

PERFORMANCE AGREEMENT

Made and entered into by and between

THE CITY OF JOHANNESBURG METROPOLITAN MUNICIPALITY

("the City")

(Represented by **the City Manager**, duly authorised by Municipal Council Resolution)

and

Sinaye Nxumalo

("the Group Executive Director")

for the financial year: 1 July 2025 to 30 June 2026

KK

STN
MES

1. INTRODUCTION

- 1.1 The City has entered into a contract of employment with the Group Executive Director in terms of Section 57(1)(a) of the Local Government: Municipal Systems Act 32 of 2000 ("the Systems Act").
- 1.2 Section 57(1)(b) of the Systems Act, read with the contract of employment concluded between the parties, requires the parties to conclude an annual performance agreement.
- 1.3 The parties wish to ensure that they are clear about the goals to be achieved and secure the commitment of the Group Executive Director reporting to the City Manager, to a set of actions that will secure local government policy goals.

2. PURPOSE OF THIS AGREEMENT

- 2.1 The parties agree that the purpose of this Agreement is to:
 - 2.1.1 comply with the provisions of Section 57(1)(b), 4(A), (4B) and (5) of the Systems act; and the employment contract entered into between the parties;
 - 2.1.2 specify objectives and targets established for the Group Executive Director;
 - 2.1.3 specify accountabilities as set out in the performance plan (scorecard) attached as Annexure 'A';
 - 2.1.4 monitor and measure performance against set targeted outputs;
 - 2.1.5 use the performance agreement and scorecard as the basis for assessing whether the employee has met the performance expectations applicable to his or her job;
 - 2.1.6 in the event of outstanding performance, to appropriately reward the employee in accordance with the City's performance management policy; and
 - 2.1.7 give effect to the City's commitment to a performance-orientated relationship with the Group Executive Director in attaining equitable and improved service delivery.

3. COMMENCEMENT AND DURATION

- 3.1 Notwithstanding the date of signature hereof, this Agreement will commence on the date of appointment of the Group Executive Director, and, subject to paragraph 3.3, will continue in force

until a new performance agreement is concluded between the parties as contemplated in paragraph 3.2.

- 3.2 The parties will review the provisions of this Agreement during June each year. The parties will conclude a new performance agreement that replaces this Agreement at least once a year by not later than July each year.
- 3.3 This Agreement will terminate on the termination of the Group Executive Director's contract of employment regardless of the reason for such termination.
- 3.4 The content of this agreement may be revised at any time during the abovementioned period to determine the applicability of the matters agreed upon.
- 3.5 If at any time during the validity of this agreement the work environment alters (whether as a result of government or council decisions or otherwise) to the extent that the contents of this agreement are no longer appropriate, the contents shall be revised.

4. PERFORMANCE OBJECTIVES

- 4.1 The scorecard in Annexure "A" sets out:
- 4.1.1 the performance objectives and targets that must be met by the Group Executive Director; and
- 4.1.2 the time frames within which those performance objectives and targets must be met.
- 4.2 The performance objectives and targets reflected in Annexure "A" (scorecard) are set by the City Manager and the Group Performance Audit Committee after consultation with the Group Executive Director and are based on the Growth and Development Strategy, Integrated Development Plan, Mayoral Priorities Service Delivery and Budget Implementation Plan (SDBIP) and Budget of the City, and include key objectives; key performance indicators; target dates and weightings.
- 4.3 The key objectives describe the main tasks that need to be done. The key performance indicators provide the details of the evidence that must be provided to show that a key objective has been achieved. The target dates describe the timeframe in which the work must be achieved. The weightings show the relative importance of the key objectives to each other.
- 4.4 The Group Executive Director's performance will, in addition, be measured in terms of contributions to the goals and strategies set out in the City's Integrated Development Plan.

KK STN 3
MES

5. PERFORMANCE MANAGEMENT POLICY

- 5.1 The Parties record that the City has a Performance Management Policy, which may be amended from time to time. It describes the systems and procedures of performance management in the City in which the Group Executive Director will be required to engage in performing his job.
- 5.2 The Group Executive Director agrees to participate in the performance management system that the City adopts or introduces.
- 5.3 The Group Executive Director accepts that the purpose of the performance management policy and system is to provide a comprehensive system with specific performance standards to assist the City, City Manager and Group Executive Director to perform to the standards required.
- 5.4 The Group Executive Director undertakes to actively focus towards the promotion and implementation of the Key Performance Areas (KPA's) (including special projects relevant to the employee's responsibilities) within the local government framework.
- 5.5 The Group Executive Director's assessment will be based on his or her performance in terms of the outputs/outcomes (performance indicators) identified as per the performance plan which are linked to the KPA's.

6. EVALUATING PERFORMANCE

- 6.1 It is recorded that in terms of the City's performance management policy and system, for purposes of evaluation of the performance of the Group Executive Director, a Group Performance Audit Committee / Performance Evaluation Panel has been established to assist the City Manager and in the process of evaluating the Performance of the Group Executive Director.
- 6.2 The performance of the Group Executive Director in relation to his or her performance agreement shall be reviewed on a quarterly basis as follows:

First quarter	:	July – September
Second quarter	:	October – December
Third quarter	:	January – March
Fourth quarter	:	April - June

KK STN
MES 4

- 6.3 The Group Executive Director must avail himself/herself for scheduled performance reviews. Failure to do so, may result in the City Manager concluding on his/her review in absentia and the outcome of the review is final.
- 6.4 The City Manager shall ensure that the Group Performance Audit Committee be convened to conduct review sessions on the performance of the Group Executive Director at least twice a year.
- 6.5 The City Manager shall ensure that a record is kept of the mid-year review and final review sessions.
- 6.6 Performance feedback shall be based on the assessment of the Group Executive Director's performance by the City Manager and Group Performance Audit Committee / Performance Evaluation Panel and may include recommendations for corrective steps to be taken to improve performance.
- 6.7 The City will be entitled to review and make reasonable changes to the provisions of the performance plan (scorecard) from time to time for operational reasons. The Group Executive Director will be consulted before any such change is made.
- 6.8 Despite the establishment of agreed intervals for evaluation, the City Manager may, in addition, review the Group Executive Director performance at any stage while the contract of employment remains in force.
- 6.9 Personal growth and development needs identified during any performance review discussion must be documented and, where possible, actions agreed.
- 6.10 The annual performance appraisal will involve assessment of the achievement of results as outlined in the performance plan and each KPA and CCR should be assessed according to the extent to which the specified standards or performance indicators have been met.

7. OBLIGATIONS OF EMPLOYER

The City must -

- 7.1 Create an enabling environment to facilitate effective performance by the employee;
- 7.2 Provide access to skills development and capacity building opportunities;
- 7.3 Work collaboratively with the Group Executive Director to solve problems and generate solutions to common problems that may impact on the performance of the employee;

KK
STN 5
MES

- 7.4 On the request of the Group Executive Director delegate such powers reasonably required by the Group Executive Director to enable him or her to meet the performance objectives and targets established in terms of the agreement; and
- 7.5 Make available to the Group Executive Director such resources as the Group Executive Director may reasonably require from time to time to assist him or her to meet the performance objectives and targets established in terms of the agreement.

8. CONSULTATION

The City Manager agrees to consult the Group Executive Director timeously in respect of decisions which will have a significant impact on the performance of the duties of the Group Executive Director.

9. MANAGEMENT OF OUTCOMES

- 9.1 The evaluation of the Group Executive Director's performance will form the basis for rewarding performance or correcting unacceptable performance.
- 9.2 A performance bonus not exceeding 14% may be paid to the Group Executive Director in recognition of outstanding performance, in accordance with the City's policy and system referred to in this agreement.
- 9.3 An increase may be awarded to the Group Executive Director in accordance with the City's policy and system referred to in this agreement.
- 9.4 Should the Group Executive Director be entitled to a performance bonus referred to in paragraph 9.2, this will be paid out after the tabling of the annual report.
- 9.4.1 However, should the Acting Group Executive Director not be entitled to a performance bonus in line with his/her employment contract, alternative performance rewards will be awarded as per the relevant policy.
- 9.5 In the case of unacceptable performance, the City Manager shall provide systematic remedial or developmental support to assist the Group Executive Director to improve his or her performance.
- 9.6 Where the City Manager is, at any time during the Group Executive Director's employment, not satisfied with the Group Executive Director's performance with respect to any matter dealt with in this Agreement, the City Manager will give notice to the Group Executive Director to attend a meeting with the City Manager.

KK STN 6
MES

9.7 The Group Executive Director will have the opportunity at the meeting to satisfy the City Manager of the measures being taken to ensure that the Group Executive Director's performance becomes satisfactory and any programme, including any dates, for implementing these measures.

9.8 Where there is a dispute or difference as to the performance of the Group Executive Director under this Agreement, the parties will confer with a view to resolving the dispute or difference.

10. DISPUTES

10.1 Any dispute arising out of this Agreement, shall be submitted to and determined by arbitration in accordance with the arbitration rules of an accredited private dispute resolution agency, as amended. The arbitrator shall be mutually agreed upon and shall be selected from a list of arbitrators supplied by an accredited private dispute resolution agency.

10.2 The parties shall, prior to the arbitration date, be required to meet with the arbitrator in order to determine the appropriate terms of reference for the arbitrator, and his powers, and to submit an agreement in writing to the arbitrator.

10.3 Should the parties fail to agree on the identity of the arbitrator within a period of 14 days after the date of the submission of the dispute to the City Manager, either of the parties shall be entitled to request a private dispute resolution agency, to appoint the arbitrator. The accredited private dispute resolution agency, in making the appointment, shall have regard to the nature of the dispute, and shall have regard to the parties' requirement of speedy arbitration in the selection of arbitrators. If the appointment is to be made in this manner, preference shall be given to the attorneys or advocates on the Panel of arbitrators of the accredited private dispute resolution agency.

10.4 The arbitrator shall be entitled further to determine the procedure to be followed in the arbitration, but to ensure that each party has the right to be heard, lead appropriate witnesses, submit documentation, and to argue in respect of the appropriate outcome and remedy. The arbitrator shall, in determining the procedures to be followed, be guided by the parties intention to have the dispute finally adjudicated upon within as short as possible a period from the date of the dismissal, or of the dispute, arising.

10.5 The parties shall be entitled to be represented by a representative of choice at the arbitration, and the outcome of the arbitration shall be final and binding. The Group Executive Director shall be bound to the dispute resolution procedures contained herein.

KK
STN 7
MES

10.6 The fact that any dispute has been referred to, or is the subject of an arbitration, as well as any information submitted or furnished to the arbitrator, or in any other matter forming part of the record of any arbitration proceeding, shall be kept confidential by the parties to such proceeding.

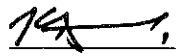
11. GENERAL

11.1 The contents of the Agreement and the outcome of any review conducted in terms of Annexure "A" (scorecard) will not be confidential and may be made available to the public by the City, where appropriate.

11.2 Nothing in this Agreement diminishes the obligations, duties or accountabilities of the Group Executive Director in terms of his contract or employment, or the effects of existing or new regulations, circulars, policies, directives or other instruments.

SIGNED at Braamfontein on this the 31st day of July 2025.

For: **THE CITY OF JOHANNESBURG**
METROPOLITAN MUNICIPALITY




City Manager

Witness: 


Witness: _____

SIGNED at Braamfontein on this the 31st day of July 2025.



Sinaye Nxumalo
Group Executive Director

Witness: 

Witness: 

KK STN
MES 8



ANNEXURE A

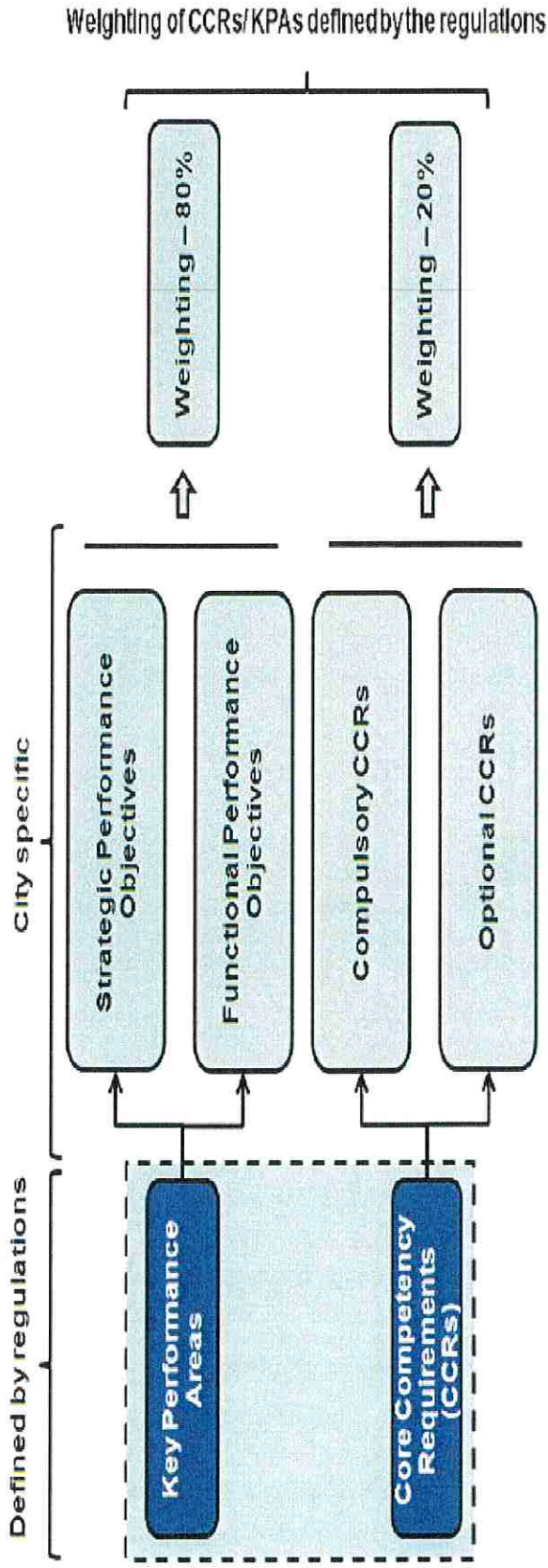
PERFORMANCE SCORECARD: SECTION 57

Employee	Group Executive Director: Sinaye Nxumalo
Manager	City Manager
Department	Group Risk and Assurance Services (GRAS)
Position Purpose	Enterprise Risk Advisory Services; Compliance Monitoring and Advisory Services; Internal Audit Services. Combined Assurance Services; Strategic Management Services, and Enabling independent oversight: Group Risk Governance Committee, Group Audit Committee, Group Performance Audit Committees and Section 79.

The period of this Performance Plan is from 1 July 2025 to 30 June 2026

KK
SIN
MES

The individual performance scorecards shall be made up of Key Performance Areas (KPA) {divided into Functional Performance Objectives (FPO) and Strategic Performance Objectives (SPO)} and Core Competency Requirements (CCR) which shall have a relative weighting of 50%: to 30% to 20% respectively. Therefore, the scorecard is separated into three sections, namely, Functional Performance Objectives, Strategic Performance Objectives and Core Competency Requirements.



Strategic Performance Objectives (SPOs) are those KPAs which are derived from key citywide and sector-based objectives and strategies. Of the total 80% KPA weighting, the relative weighting for SPOs should not be less than 50%. The SPOs are developed to reflect the City's strategic priorities within the individual employee scorecard.

Functional Performance Objectives (FPOs) relate to the employee's functional areas, objectives and responsibilities. Of the total 80% KPA weighting, the relative weighting for FPOs should not exceed 30%.

KK MES
STW

KPA No	Key Performance Area (KPA)	KPI No.	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
STRATEGIC PERFORMANCE OBJECTIVES (TOTAL WEIGHT = 50%)						
1.	Combined assurance on risk, compliance, performance and financial controls	1.1	Number of Integrated outcome and advisories Combined Assurance Dashboard report ¹	4 reports	1 = 1 Combined assurance dashboard report 2 = 2 Combined assurance dashboard report 3 = 4 Quarterly Combined and integrated assurance dashboard reports 4 = 4 Quarterly reports plus 1 report on the analyses of AGSA combined assurance dashboard outcomes for 2024/25 financial year. 5 = 4 Quarterly reports plus 1 dashboard/integrated report on advisories to management ²	<ul style="list-style-type: none"> Report/s to GRGC, GAC Advisory report to EMT³ GRGC Minutes
		1.2	% UJFW expenditure investigations completed within defined timelines.	75%	1= ⁴ <75% expenditure investigations completed within defined timelines. 2= 75% expenditure investigations completed within defined timelines. 3= 85% expenditure investigations completed within defined timelines. 4= 95% expenditure investigations completed within defined timelines. 5= 100% expenditure investigations completed within defined timelines.	<ul style="list-style-type: none"> UJFW expenditure register & MPAC reports Quarterly reports to GAC GAC/ MPAC minutes
		1.3	% of Integrated probity reviews of high value tenders completed within defined timelines.	100%	1 = <65 % probity reviews of high value tenders completed within defined timelines 2 = 66% - 75% probity reviews of high value tenders completed within defined timelines 3 = 76% - 85% probity reviews of high value	<ul style="list-style-type: none"> Register of Probity Audit and Compliance reviews Probity reports to CM and GAC GAC minutes

¹ Quarterly Integrated and Combined Assurance Dashboard reports with 100% coverage of priority programmes in the integrated assurance report summarising assurance outcomes and advisories on attainment of Mayoral Priority programmes.

² For strategic and/or operational interventions based on combined and integrated assurance outcome

³ Advisory report to EMT on recommended strategic and/or operational interventions based on integrated assurance outcomes

⁴ Completed investigations are reported per category to MPAC (to MFMA Section 32(2)) which assesses recoverability or regularization and advises Council accordingly.

KPA No	Key Performance Area (KPA)	KPI No.	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
2.	Risk governance and management.	2.1	% of Top Citywide Strategic risks and mitigation actions plans monitored against tolerance level.	100%	tenders completed within defined timelines 4 = 86% - 95% probity reviews of high value tenders completed within defined timelines 5= >96% probity reviews of high value tenders completed within defined timelines 1= <85% Top Citywide Key Strategic risks and mitigation actions plans monitored against tolerance level 2= 85% - 99% Top Citywide Key Strategic risks and mitigation actions plan monitored against tolerance level 3= 100% ⁵ Top Citywide Key Strategic risks and mitigation actions plans monitored against tolerance level 4= Risk management advisories +50% of Top Citywide Strategic risks recommended to bring residual risks to acceptable levels 5= Risk management advisories +>50% of Top Citywide Strategic risks recommended to bring residual risks to acceptable levels	<ul style="list-style-type: none"> 2024/25 Top Citywide Strategic Risk Register. Q1 to Q4 GRGC reports. GRGC minutes
		2.2	% of identified Major Projects residual risk profiles monitored and reported	100%	1 = < 85% Identified major Projects risk profiles monitored and reported. 2 = 85%-99% Identified major Projects risk profiles monitored and reported 3 = 100% Identified major Projects risk profiles monitored and reported. ⁶ 4 = 100% Identified major Project risk profiles monitored and reported and 50% of the Integrated Risk Response Advisories. ⁷ 5 = 100% Identified major Project risk profiles	<ul style="list-style-type: none"> Quarter 4 Group Risk Report to the GRGC Risk Advisory report to EMT

⁵ 100% of top 10 key strategic risk and mitigation action plans monitored against tolerance level.

⁶ 100%= list of major projects from the office of the COO

⁷ On the management of identified projects risks assessed and residual risks monitored

KPA No	Key Performance Area (KPA)	KPI No.	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
					monitored and reported + >50% Integrated Risk Response Advisories report.	
		2.3	100% value of City's assets and Liabilities adequately covered against damage and losses	100%	<p>1= 100% Analysis of coverage levels in terms of premiums versus the exposures</p> <p>2= 100% Insurance underwriters survey completed on coverage of insurable assets and liabilities.</p> <p>3= 100% insurable assets and Liabilities adequately covered against damage and losses.</p> <p>4= 50%-79% Analysis and risk management advisories on uninsurable assets and liabilities.</p> <p>5= 80% Analysis and risk management advisories on uninsurable assets and liabilities.</p>	<ul style="list-style-type: none"> Insurance policies for Motor Insurance and non-motor insurance covers GRGC report/ minutes
3.	Compliance culture	3.1	% of Regulatory requirements identified, assessed, monitored and reported for City Departments and Municipal Entities ⁸	75%	<p>1= <65% of Key Regulatory requirements monitored and reported for City Departments and ME's</p> <p>2= 75% Key Regulatory requirements monitored and reported for City Departments and ME's</p> <p>3= 85% Key Regulatory requirements monitored and reported for City Departments and ME's</p> <p>4= 95% of Key Regulatory requirements monitored and reported for City Departments and ME's</p> <p>5= 100% Key Regulatory requirements monitored and reported for City Departments and ME's + 50% recommendations on identified, assessed, and monitored regulatory requirements.</p>	<ul style="list-style-type: none"> Quarterly GRGC / EMT compliance monitoring reports. GRGC minutes

⁸ Key regulations in line with the compliance universe for the City Departments and Municipal Entities.

KK
STN
MES

KPA No	Key Performance Area (KPA)	KPI No.	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
4.	Internal Audit Assurance	4.1	% Completion of Core admin Internal audit coverage plan ⁹	80%	1= 50%-74% coverage of strategic and key operational risk areas in annual internal audit plans 2= 75%-84% coverage of strategic and key operational risk areas in annual internal audit plans 3= 85%-90% completion of core admin Internal audit coverage plan 4= 91%-95% completion of core admin Internal audit coverage plan 5= 96%-100% completion of core admin Internal audit coverage plan	<ul style="list-style-type: none"> Approved Internal Audit Plan. Quarterly Progress Report to the GAC. GAC minutes
		4.2	Number of Audits on predetermined objectives (AoPO) completed	4	1= Two (2) AoPO completed 2= Three (3) AoPO completed 3= Four (4) AoPO audits completed 4= Four (4) AoPO audits completed + 50% of AoPO finding follow up completed. 5= Four (4) AoPO audits completed + >50% of AoPO finding follow up completed.	<ul style="list-style-type: none"> GPAC Minutes AoPO Internal Audit reports
5	Good governance	5.1	Audit outcome ¹⁰	Unqualified Audit opinion	1= Disclaimer of Audit Opinion 2= Adverse Audit Opinion 3= Unqualified Audit opinion without material matters 4= Financially Unqualified Audit Opinion 5= Clean Audit Outcome	<ul style="list-style-type: none"> Auditor General management letter
		5.2	% Follow up on Resolution of internal audit findings	95%	1 = < 80% Follow up on Resolution of internal audit findings 2 = 80% Follow up on Resolution of internal audit findings 3 = 90% Follow up on Resolution of internal audit findings 4 = 95% Follow up on Resolution of internal	<ul style="list-style-type: none"> GAC Internal Audit Report on Findings Minutes OPCA minutes/ reports

⁹ Total number of planned internal Audit projects against implemented. Coverage of strategic and key operational risk areas in annual internal audit plan. Implementation of approved annual coverage plan
¹⁰ The opinion may be that given for the department/entity where applicable.

KPA No	Key Performance Area (KPA)	KPI No.	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
					audit findings 5 = 100% Follow up on Resolution of internal audit findings	
		5.3	% Follow up on Resolution of external (AGSA) audit findings	95%	1 = <75% Follow up on Resolution of AGSA 2 = 80% Follow up on Resolution of AGSA 3 = 85% Follow up on Resolution of AGSA 4 = 90% Follow up on Resolution of AGSA 5 = 95% and above Follow up on Resolution of internal audit findings	<ul style="list-style-type: none"> GAC Internal Audit Report on Findings Minutes
		5.4	% Resolution of external (AGSA) audit findings ¹¹	50%	1 = 65%- 70% resolution 2 = 71% - 84% resolution 3 = 85% resolution 4 = 86% -95% resolution 5 =96%-100% resolution (including no findings)	<ul style="list-style-type: none"> GRAS report on Audit Findings approved by GAC & GPAC Minutes of meetings
		5.5	% Resolution of internal audit findings ¹²		1 = 65%- 70% resolution 2 = 71% - 84% resolution 3 = 85% resolution 4 = 86% -95% resolution 5 =96%-100% resolution (including no findings)	<ul style="list-style-type: none"> GRAS report on Audit Findings approved by GAC & GPAC
6	Financial Management	6.1	% Reported instances of financial misconduct ¹³	New Indicator	1 = <65% reported alleged instances of misconduct 2 = 66% - 70% reported alleged instances of misconduct 3 = 85%- 94% reported alleged instances of misconduct 4 = 95% reported alleged instances of misconduct 5 = 100% reported alleged instances of misconduct	<ul style="list-style-type: none"> DB report DB minutes

¹¹ This is for only findings classified as matters affecting audit opinion and others important matters.

¹² These are findings by internal audit only that are picked up on an ongoing basis.

¹³ This refers to the UJ/We referrals submitted to MPAC and Council for consideration.

KK
STN
MES

KPA No	Key Performance Area (KPA)	KPI No.	Key Indicators (KPIs)	Baseline	Target	Means of Verification
7	SMME support	7.1	Number of SMMEs supported through GRAS ¹⁴	New indicator	1 = <10 SMMEs supported 2 = 11 - 19 SMMEs supported 3 = 20 SMMEs supported 4 = 21 SMMEs supported 5 = >22 SMMEs supported	<ul style="list-style-type: none"> Cumulative listing of SMME's supported (financial support) GRAS procurement report (Signed off by GH)
SECTION 2: FUNCTIONAL PERFORMANCE OBJECTIVES (FPO) (TOTAL WEIGHTING = 30%)						
1	Procurement and Contract Management	1.1	% Compliance to acquisition of goods and services as per the approved demand plan	100%	1 = Acquisition plan 2 = Procurement delayed 3 = 90% compliance 4 = 100% compliance 5 = 100% compliance and no SCM deviations reported	<ul style="list-style-type: none"> Approved Acquisition plan Departmental Quarterly Acquisition Status Reports SCM Assessment reports Audited Financial statements
2	UJFW Strategy Implementation	2.1	Percentage reduction in historical Unauthorised expenditure reported 30 June 2024	No Unauthorised expenditure reported	1 = <65% 2 = 65% - 74% 3 = 85% reduction 4 = 86% - 96% 5 = 97% and above (including non-incurrence in June 2025 report)	<ul style="list-style-type: none"> UJFW report tabled at GAC and GPAC MPAC/ Council minutes
		2.2	Percentage reduction in current and/or new Irregular expenditure	No Irregular expenditure reported	1 = <65% 2 = 65% - 74% 3 = 85% reduction 4 = 86% - 96% 5 = 97% and above (including non-incurrence in June 2025 report)	<ul style="list-style-type: none"> GRAS UJFW report tabled at GAC and GPAC Audited Financial Statements MPAC/ Council minutes

¹⁴ Exclude procurement via entities and non-financial support

KK STW
MES

KPA No	Key Performance Area (KPA)	KPI No.	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
		2.3	Percentage reduction in historical Fruitless and Wasteful expenditure reported 30 June 2024	No Fruitless and Wasteful expenditure reported	1=<65% 2=65% -74% 3=85% reduction 4=86%-96% 5=97% and above (including non-incurrence in June 2025 report)	<ul style="list-style-type: none"> GRAS UJFWe report tabled at GAC and GPAC Audited Financial Statements MPAC/ Council minutes
3	Risk Management	3.1	% Implementation of the action plans to mitigate the risks	60%	1 = 60% of action plans implemented 2 = 70% of action plans implemented 3 = 80% implemented 4 = 90% of action plans implemented 5 = 100% of action plans implemented	<ul style="list-style-type: none"> Signed quarterly departmental performance reports GRGC Risk analysis reports and Minutes
4	Departmental performance monitoring and reporting	4.1	% Achievement of departmental SDBIP	85%	1 < 75% achieved. 2 = 75% - 84% achieved 3 = 85% - 89% achieved 4 = 90% - 99% achieved 5 = 100% achieved	<ul style="list-style-type: none"> Signed departmental progress report GSPCR assessment reports presented at Sub-Mayoral Cluster meeting. GPAC minutes
5	Policy Management	5.1	% Compliance of policies in the departmental policy register	Approved policies	1= 75% compliance 2= 80% compliance 3= 85% compliance 4= 90% compliance 5= 95% compliance	<ul style="list-style-type: none"> Progress report to GSPCR Policy Office Approved COJ policies report tabled at EMT and GPAC
SECTION 3: CORE COMPETENCY REQUIREMENTS (TOTAL WEIGHTING = 20%)						
Financial Competence (Compulsory)						
1	Expenditure Management	1.1	% Spent of allocated departmental Capex ¹⁵	78%	1 < 95% Capex spent 2 = 95% Capex spent 3 = 100% Capex spent including accruals 4 = 100% Capex spent by 30 June 5 = 100% Capex spent by 30 May	<ul style="list-style-type: none"> SAP Report Approved section 71 reports
		1.2	% Spent of allocated departmental Opex budget	93%	1 < 95% Opex spent 2 = 95% Opex spent	<ul style="list-style-type: none"> SAP Report Signed quarterly departmental

¹⁵ This is applicable to departments with large capex budget – threshold to be determined.



KK *STW*
MES

KPA No	Key Performance Area (KPA)	KPI No.	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
					3 = 100% Opex spent including accruals 4 = 100% Opex spent by 30 June excluding accruals 4 = 100% Opex spent by 30 May	performance reports
		1.3	Percentage of valid departmental invoices paid within 30 days of submission to Group Finance for payment ¹⁶	95%	1 = 90% of valid invoices paid within 30 days 2 = 95% of valid invoices paid within 30 days 3 = 100% of valid invoices paid within 30 days of invoice date 4 = 100% of valid invoices paid within 25 days 5 = 100% of valid invoices paid within 20 days	<ul style="list-style-type: none"> Midyear and Annual Merchants reports
People Management and Empowerment (Compulsory)						
2	Performance and People Management	2.1	% Of departmental staff receiving performance coaching and review as per the LG Regulation on performance management	82%	1 = <65% 2 = 65% - 84% 3 = 85% - 100% 4 = 100% compliance, up to 50% of employees achieved 3.1 or more on their set targets 5 = 100% compliance, more than 50% of employees achieved 3.1 or more on their set targets	<ul style="list-style-type: none"> Quarterly Performance Management compliance reports Approved assessment report by GCSS Signed departmental NFR report for 2025/26 performance rewards
		2.2	Percentage of disciplinary cases resolved within 120 days ¹⁷	Adhoc	1 < 60% 2 = 60 – 69% 3 = 70 - 79% 4 = 80 - 89% 5 = 90 - 99%	<ul style="list-style-type: none"> Approved departmental quarterly performance reports GCSS LR report Annual report 2025/26
Change Management (optional)						
3	Institutionalisation of GEYODI in the City	3.1	Number of Geyodi programmes implemented as per the approved action plans.	New indicator	1 ≤ 2 or less ¹⁸ 2= 3 3= 4 4= 5 5= 6	<ul style="list-style-type: none"> Approved GEYODI action plans signed off by Departmental Executive Directors and Municipal Entities Accounting Officers. Nomination Letters of Geyodi Focal

¹⁶ By paying service provider within required 30 days, there will be a reduction or elimination of unnecessary auditing findings which will lead to improved control environment within SCM and City, as a whole. Each department must ensure that submission of invoices to Group Finance are not delayed. The Finance Manager must ensure that the invoice meets all requirements, and all relevant attachments are submitted with the invoice to avoid it being rejected by the Merchants thereby causing a delay in the payment. The department is liable for this compliance.

¹⁷ The counting begins with the charge (charge sheet date) laid on the employee up to the day of approval by the Chairperson and committee, of the recommended disciplinary action to be implemented.

¹⁸ Geyodi programmes implemented as per the approved action plans.

KPA No	Key Performance Area (KPA)	KPI No.	Key Performance Indicators (KPIs)	Baseline	Target	Means of Verification
4	Employee Safety	4.1	Percentage of Health and Safety corrective measures implemented	New indicator	1 < 85% corrective measures implemented 2 = 85% corrective measures implemented 3 = 100% corrective measures implemented 4 = 100% corrective measures implemented, and no injuries sustained 5 = 100% corrective measures implemented and no injuries and fatalities	<ul style="list-style-type: none"> Persons to champion GEYODI. Quarterly Compliance Reports Implementation plan with targeted corrective measures Signed departmental quarterly progress reports Consolidated GSHE biannual assessment reports indicating corrective measures implemented and the level of compliance according to the audits conducted
Customer Orientation and Customer Focus (Compulsory)						
4	Customer satisfaction	4.1	Customer satisfaction index score	New ¹⁹	1 < 58% 2 = 58%. 3 = 63% ²⁰ 4 = 68% 5 = 70%	Satisfaction results by GSPCR
<p>By signing this performance scorecard, the manager and employee hereby indicate their full understanding of, and agreement with the contents of the scorecard. The manager and the employee both acknowledge that this is in full compliance with the City's Performance Management Policy.</p>						
Sinaye Nxumalo Group Executive Director			Signature: 	City Manager	Signature: 	Date: 31 st July 2025

¹⁹ While Customer Satisfaction has been tracked previously, this KPI represents the establishment of a new, consolidated baseline for annual reporting

²⁰ 2025/26 Customer Satisfaction Survey. The Customer Satisfaction Index measures public perception of service improvements linked to War Room interventions, regional accelerated delivery, and key turnaround areas including water, energy, waste, roads, and safety. It tracks impact, identifies service gaps, and informs continuous improvement through evidence-based community feedback. 2025/26 Customer Satisfaction Survey.