



PERFORMANCE AGREEMENT

Made and entered into by and between

THE CITY OF JOHANNESBURG METROPOLITAN MUNICIPALITY

("the City")

(Represented by **Dr. Floyd Brink, the City Manager**, duly authorised by Municipal Council Resolution)

and

Siyanda Mnukwa

("the Executive Director")

for the financial year: 1 August 2026 to 30 June 2027

SM 3

1. INTRODUCTION

- 1.1 The City has entered into a contract of employment with the 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 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 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 their 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 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 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 may terminate on the termination of the Executive Director's appointment 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 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 Executive Director and are based on the 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 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.

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 Executive Director will be required to engage in performing their job.
- 5.2 The Executive Director agrees to participate in the performance management system that the City adopts or introduces.
- 5.3 The 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 Executive Director to perform to the standards required.
- 5.4 The 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 Executive Director's assessment will be based on their 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 Executive Director, a Group Performance Audit Committee and Performance Evaluation Panel have been established to assist the City Manager and in the process of evaluating the Performance of the Executive Director.

6.2 The performance of the Executive Director in relation to their 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

6.3 The Executive Director must avail themselves for scheduled performance reviews. Failure to do so, may result in the City Manager concluding on the Executive Director's 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 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 Executive Director's performance by the City Manager and Group Performance Audit Committee, as well as the 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 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 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 Executive Director to solve problems and generate solutions to common problems that may impact on the performance of the employee;

7.4 On the request of the Executive Director delegate such powers reasonably required by the Executive Director to enable them to meet the performance objectives and targets established in terms of the agreement; and

7.5 Make available to the Executive Director such resources as the Executive Director may reasonably require from time to time to assist them to meet the performance objectives and targets established in terms of the agreement.

8. CONSULTATION

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

9. MANAGEMENT OF OUTCOMES

9.1 The evaluation of the 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 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 Executive Director in accordance with the City's policy and system referred to in this agreement.
- 9.4 Should the 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 Executive Director not be entitled to a performance bonus in line with the Executive Director's 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 Executive Director to improve their performance.
- 9.6 Where the City Manager is, at any time during the Executive Director's employment, not satisfied with the Executive Director's performance with respect to any matter dealt with in this Agreement, the City Manager will give notice to the Executive Director to attend a meeting with the City Manager.
- 9.7 The Executive Director will have the opportunity at the meeting to satisfy the City Manager of the measures being taken to ensure that the 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 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.

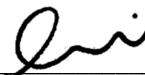
- 10.2 The parties shall, prior to the arbitration date, be required to meet with the arbitrator in order to determine the appropriate terms of reference for the arbitrator, and their powers, and to submit an agreement in writing to the arbitrator.
- 10.3 Should the parties fail to agree on the identity 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 Executive Director shall be bound to the dispute resolution procedures contained herein.
- 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 Executive Director in terms of their 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 2026

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



Dr. Floyd Brink
City Manager

Witness: 

Witness: 

SIGNED at Braamfontein on this the 31st day of July 2026



Siyanda Mnukwa
Executive Director

Witness: 

Witness: 

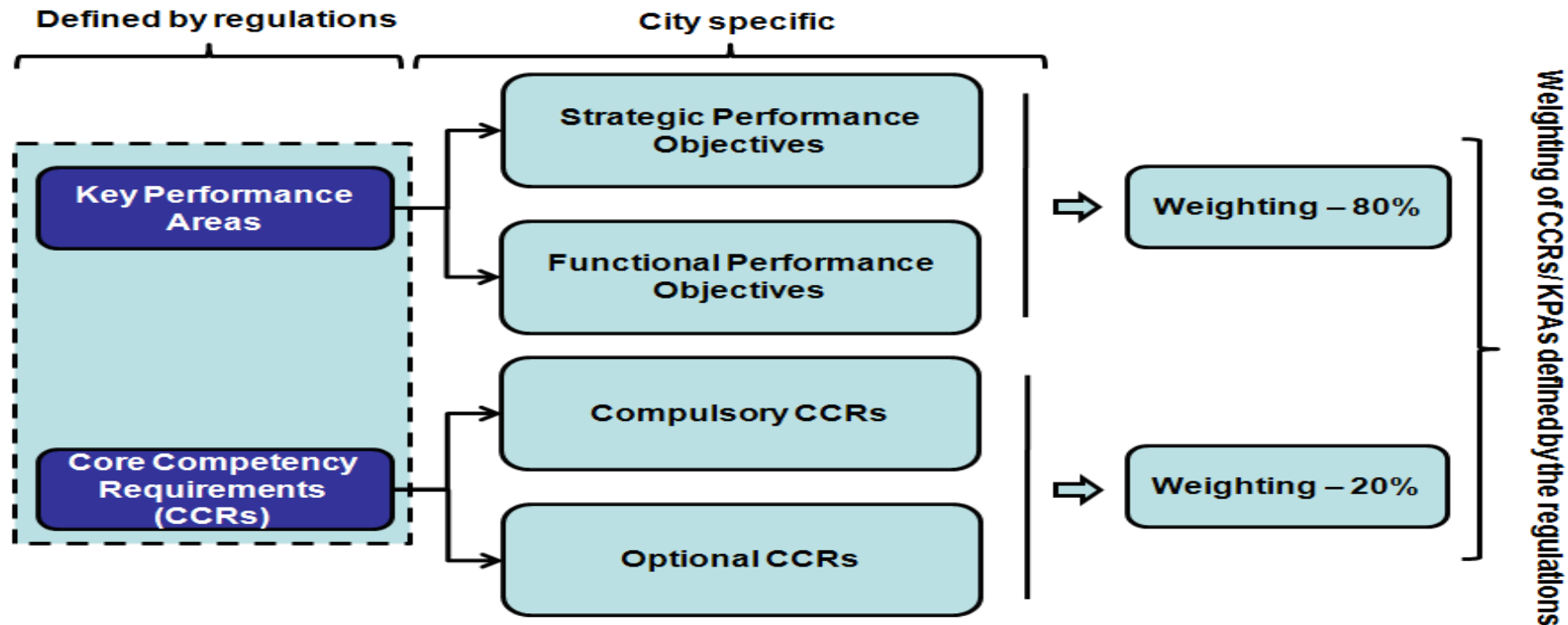


ANNEXURE "A"

PERFORMANCE SCORECARD	
Employee	Siyanda Mnukwa: Executive Director
Manager	Dr Floyd Brink: City Manager
Department	Community Development
Position Purpose	To provide comprehensive community development services to the citizens of the City of Johannesburg
The period of this Performance Plan is from 1 July 2026 to 30 June 2027	

SM 3

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 cluster-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%.

SECTION 1: STRATEGIC PERFORMANCE OBJECTIVES (TOTAL WEIGHTING 50%)

KPA No	Key Performance Area	KPI No.	Key Performance Indicator	Baseline	Annual Target	Means of Verification
1	Citywide Job Creation Programme	1.1	Number of EPWP job opportunities created ¹	2000 work opportunities created through EPWP	1=2,000 EPWP job opportunities created 2=2,500 EPWP job opportunities created 3=3,000 EPWP job opportunities created 4=3,250 EPWP job opportunities created 5=3,500 EPWP job opportunities created	DED analysis report.
		1.2	Number of SMMEs supported through departmental projects ²	70 SMMEs supported	1=55 SMMEs supported 2=60 SMMEs supported 3=65 SMMEs supported 4=70 SMMEs supported 5=75 SMMEs supported	- Signed Cover report. - Supporting sign-off by SMMEs.
2.	Accelerate execution of planned maintenance and completion of capital projects	2.1	Percentage of repairs and maintenance projects completed ³	80%	1=75% of planned projects completed 2=80% of planned projects completed 3=85% of planned projects completed 4=90% of planned projects completed 5=95% of planned projects completed	- Quarterly Performance Monitoring Report. - Photographic evidence (Before/After). - Final Bill of Quantities verified and signed off by Quantity Surveyor. - Completion certificates where applicable.

1.1

¹ Contributing towards the Institutional SDBIP target for EPWP. Support through access to jobs created by Stadium Management, Internship programme from Library Grant Funding, Arts Alive programme and departmental projects.

² Contributing towards the institutional SDBIP target for SMMEs. Support through procurement processes and training workshops for SMMEs. The department to comply with DED guidelines and criteria.

³ The objective is to accelerate the execution and on-time completion of planned maintenance of swimming pools, libraries, sports facilities, arts and cultural facilities, museums, gallery.

KPA No	Key Performance Area	KPI No.	Key Performance Indicator	Baseline	Annual Target	Means of Verification
		2.2	Percentage completion of CAPEX projects for 2026/27 FY ⁴	90%	1=60% of projects completed 2=80% of projects completed 3=95% of projects completed 4=98% of projects completed 5 =100% of projects completed	• Approved project plan. • Certification of Compliance. • Photographic evidence (completed projects).
3	Community development	3.1	Number of Arts and Culture programmes implemented ⁵	16 programmes	1=16 Arts and Culture programmes 2=18 Arts and Culture programmes 3=20 Arts and Culture programmes 4=22 Arts and Culture programmes 5=24 Arts and Culture programmes	• Approved programme implementation reports. • Annual close out reports • Photographic evidence • Attendance registers/statistics.
		3.2	Number of Museum programmes implemented ⁶	16 programmes	1=16 Museum programmes 2=18 Museum programmes 3=20 Museum programmes 4=22 Museum programmes 5=24 Museum programmes	• Approved programme implementation reports. • Annual close out report. • Photographic evidence. • Attendance registers.
		3.3	Number of Heritage programmes implemented ⁷	7 programmes	1=6 Heritage programmes 2=7 Heritage programmes 3=8 Heritage programmes 4=9 Heritage programmes 5=10 Heritage programmes	• Approved programme implementation reports. • Annual close out report. • Photographic evidence. • Attendance registers.
4	Sports and Healthy Lifestyle	4.1	Number of lifestyle programmes implemented ⁸	16 programmes	1=16 lifestyle programmes 2=18 lifestyle programmes 3=20 lifestyle programmes 4=22 lifestyle programmes 5=24 lifestyle programmes	• Approved programme implementation reports. • Annual close out reports. • Photographic evidence. • Attendance registers.

1.1

⁴ Completion of capital projects in line with project scope and milestones.

⁵ Programmes to promote social cohesion through Arts Alive, Dialogues, cultural programmes, festivals, concerts.

⁶ Programmes to promote Museum visits e.g. Labour of Love (JAG); Fashion from the early 1900 (MA); Constance Stuart Larrabee (Bensusan Museum); Joburg Art Fair (JAG); For Future Generations- Hugh Tracy and International Library for African Music Exhibition (MA); Missionary Encounters (MA); Exhibition: Maritz Collection (JAG); Exhibition: Decorative Pieces from JAG collection/ to correspond with school syllabus (JAG);

⁷ Street naming, place naming, restoration of heritage assets, installation of heritage blue plaques.

⁸ Programmes include Aerobics, active walking/ running, active cycling, club participation throughout the Regions.

KPA No	Key Performance Area	KPI No.	Key Performance Indicator	Baseline	Annual Target	Means of Verification
		4.2	Number of priority sporting codes implemented ⁹	12 competitive sporting codes	1=12 competitive sporting codes 2=13 competitive sporting codes 3=14 competitive sporting codes 4=15 competitive sporting codes implemented through collaborations 5=16 competitive sporting code implemented through collaborations	- Approved programme implementation reports. - Annual close out report. - Photographic evidence. - Attendance registers.
5	Access to Facilities	5.1	Number of people accessing facilities ¹⁰	2,500,000 people	1=2,500,000 people accessing facilities 2=3,000,000 people accessing facilities 3=3,500,000 people accessing facilities 4=4,000,000 people accessing facilities 5=4,500,000 people accessing facilities	- Departmental Performance Quarterly Report. - Register of participants/Record of venue utilization. - Photographic evidence.
6	Literacy and Learning	6.1	Number of digital transformation programmes implemented in LIS to promote digital literacy ¹¹	4 programmes	1=5 programmes 2=6 programmes 3=7 programmes 4=8 programmes 5=9 programmes	- Approved programme implementation programme reports. - Annual close out report - Registers/ Statistics.

1.1

⁹ Priority codes are aligned to the nationally approved list and include: Basketball, Boxing, Cricket, Rugby, Aquatics (Gala, Dragon Boat, Canoeing, Water Polo, Synchronized Swimming, Diving), Tennis, Athletics, Netball, Marginalized Soccer (Female, Indian), Volleyball, Hockey, and Goalball (for Persons with Disabilities).

¹⁰ Contributing to circular 88 on Percentage utilization rate of community halls and average number of library visits per library. Utilization for various community activities arranged directly Community Development services or vulnerable community services (workshops, clubs) etc.. ACH Museums, Art Gallery, Access to Sport and recreation and stadiums. Accessing to Libraries and information Services programmes. Accessing to Arts, Culture and Heritage programmes.

¹¹ KPI 66 on Institutional SDBIP on number of digital transformation programmes 1) Digital literacy, 2) mobile literacy, 3) Mobi readathon, 4) Coding, 5 Gamification, 5) Reading with Tech, 6) access to e-resources database, access to website. Scorecard KPI will be revised during the mid-year deviation process to align with Institutional SDBIP.

KPA No	Key Performance Area	KPI No.	Key Performance Indicator	Baseline	Annual Target	Means of Verification
7	Stakeholder Management and community building	7.1	Number of collaboration agreements signed with stakeholders ¹²	12 organizations supported	1=10 collaboration agreements signed 2=12 collaboration agreements signed 3=16 collaboration agreements signed 4=18 collaboration agreements signed 5=20 collaboration agreements signed	- Departmental Performance Quarterly Report. - Signed MOU/MOA/SLA or Approved Collaboration reports.
		7.2	Number of citizens participating in departmental events and engagements ¹³	250,000	1 =200,000 2= 250,000 3= 280,000 4= 300,000 5= 320,000	- Signed Database reflecting Physical and Virtual engagements, notices, registers signed off by Legislature. - Submission of monthly evidence as stipulated in the Stakeholder Engagement Tool.
		7.3	Percentage of reported bylaw violation successfully resolved ¹⁴	New indicator	1=75% reported violation resolved 2=80% reported violation resolved 3=85% reported violation resolved 4=90% reported violation resolved 5=100% reported violation resolved	Bylaw enforcement Consolidated quarterly progress report

1.1

¹² Inclusive of LIS, ACH and Sport and Rec as partner organizations. Collaborations with multi stakeholders such as National, Provincial government, NGOs, Higher institutes of learning, Business, Schools, Community organisations etc.

¹³ This KPI measures the number of citizens who actively participate and engage in city led events and initiatives. These engagements include meaningful two-way interactions aimed at fostering mutual understanding and building stronger relations between the city and its residents.

¹⁴ Refers to reported bylaw violations reported , i.e. illegal parking, illegal dumping, noise pollution, driving on undesignated areas , counterfeit goods , unlawful occupation of site, misuse of park and public open spaces, environmental degradation, malicious damage to property must be resolved according to Service Level Standards timeframes by all applicable department and entities that have inspectors

KPA No	Key Performance Area	KPI No.	Key Performance Indicator	Baseline	Annual Target	Means of Verification
8	Good Governance	8.1	Audit Outcome ¹⁵	Unqualified Audit with material findings	1= Adverse Audit report ¹⁶ 2= Qualified Audit Report ¹⁷ 3= Unqualified without material findings 4= Unqualified report with audit findings classified as other matters and administrative matters 5= Unqualified audit report with no findings (clean audit)	AG Management Letter.
		8.2	% Resolution of internal audit findings ¹⁸	60	1 = 65%- 70% resolution 2 = 71% - 84% resolution 3 = 85% resolution 4 = 86% -95% resolution 5 =96%-100% resolution (including no findings)	GRAS report on Audit Findings approved by GAC & GPAC.
		8.3	% Resolution of external (AGSA) audit findings ¹⁹	No findings	1 = 65%- 70% Resolution 2 = 71% - 84% Resolution 3 = 85% Resolution 4 = 86% -95% Resolution 5= 95%- 100% Resolution (including no findings)	GRAS report on Audit Findings approved by GAC & GPAC.

1.1

¹⁵ The opinion may be that given for the department/entity where applicable.

¹⁶ This is where AGSA is unable to and does not express an audit opinion due to uncertainty.

¹⁷ This is where there is a disagreement between AGSA and COJ on fair presentation & disclosure.

¹⁸ These are findings by internal audit only that are picked up on an ongoing basis.

¹⁹ This is for only findings classified as matters affecting audit opinion and others important matters.

KPA No	Key Performance Area	KPI No.	Key Performance Indicator	Baseline	Annual Target	Means of Verification
9	Service Level Standards	9.1	% Achievement of Service Standards	80%	1= 60% 2= 70% 3= 80% 4= 90% 5= 100%	- Signed Service Level Standards - Group Governance Assessment
10	Ombudsman customer complains	10.1	% Resolution of customer complains within stipulated turnaround times	New indicator	1= Less than 50% resolution within 90 days or more 2= 50-99% resolution within 90 days or more 3= 100% resolution within 90 days 4= 100% resolution within 60 days 5= 100% resolution within 30 days or less	Quarterly report on Ombudsman findings/corrective/remedial action tabled at OCOL
SECTION 2: FUNCTIONAL PERFORMANCE OBJECTIVES (FPO) (TOTAL WEIGHTING = 30%)						
1	Procurement and Contract Management	1.1	Percentage compliance with the acquisition of goods and services as per the approved demand plan	100% compliance	1 = 70% compliance 2 = 80% compliance 3 = 90% compliance 4 = 100% compliance 5=100% compliance and no SCM deviations reported	- Approved Acquisition plan. - Departmental Quarterly Acquisition Status Reports. - SCM Assessment reports. - Audited Financial statements.
2	UIFW Strategy Implementation ²⁰²¹²²	2.1	Percentage reduction in historical Unauthorised expenditure reported on 30 June 2026	No Unauthorised expenditure reported	1=≤65% reduction 2=66%–74% reduction 3=75%–85% reduction 4=86%–96% reduction 5=97% and above (including non-incurrence in June 2027 report)	- GRAS UIFWe report tabled at GAC and GPAC. - Audited Financial Statements.

1.1

²⁰ These KPIs directly support the implementation of the approved UIFW Strategy and reflect progress in consequence management, preventative controls, and accounting treatment as per audit findings.

²¹ Scope of "Historical Expenditure": "Historical expenditure" refers to all unresolved UIFW items carried forward from prior years and recognised in the GRAP-compliant AFS disclosures as at 30 June 2025.

²² Definition of "New Incurrence": No new [unauthorised / irregular / fruitless and wasteful] expenditure incurred" refers to the absence of any newly reported amounts in the respective category in the Audited Financial Statements for the 2025/2026 financial year.

KPA No	Key Performance Area	KPI No.	Key Performance Indicator	Baseline	Annual Target	Means of Verification
		2.2	Percentage reduction in historical Irregular expenditure reported on 30 June 2026	No Irregular expenditure reported	1=<65% 2=65% -74% 3=85% reduction 4=86%-96% 5=97% and above (including non-incurrence in June 2027 report)	- GRAS UIFWe report tabled at GAC and GPAC. - Audited Financial Statements.
		2.3	Percentage reduction in historical Fruitless and Wasteful expenditure reported on 30 June 2026	50% decrease ²³	1=<65% 2=65% -74% 3=85% reduction 4=86%-96% 5=97% and above (including non-incurrence in June 2027 report)	- GRAS UIFWe report tabled at GAC and GPAC. - Audited Financial Statements.
3	Risk Management	3.1	% Implementation of the action plans to mitigate the risks	96%	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	- Signed quarterly departmental performance reports. - GRGC Risk analysis reports and Minutes.
4	Departmental performance monitoring and reporting	4.1	% Achievement of departmental SDBIP	92% achievement	1 < 75% achieved. 2 = 75% - 84% achieved 3 = 85% - 89% achieved 4 = 90% - 94% achieved 5 = 95% - 100% achieved	- Signed quarterly departmental performance reports. - GSPCR assessment reports.

1.1

²³ Percentage reduction is calculated using the formula: $[(\text{Historical Value} - \text{Current Year Value}) \div \text{Historical Value}] \times 100\%$.

KPA No	Key Performance Area	KPI No.	Key Performance Indicator	Baseline	Annual Target	Means of Verification
5	Policy Management	5.1	Percentage approved policies in departmental policy register	Approved policies in the register	1=<85% policies reviewed and approved. 2= 85% - 90% policies reviewed and approved 3= 91%-100% policies reviewed and approved 4 = 100% policies reviewed and approved within 6 months after the date of review 5=100% policies reviewed and approved 3 months after approval	- Progress report to GSPCR Policy Office - Approved COJ policies report tabled at EMT and GPAC
SECTION 3: CORE COMPETENCY REQUIREMENTS (TOTAL WEIGHTING = 20%)						
Finance Competence (Compulsory)						
1	Expenditure Management	1.1	% Spent of allocated departmental Capex ²⁴	92% ²⁵	1 = 80% Capex spent 2 = 90% Capex spent 3 = 95 Capex spent 4 = 97% Capex spent 5 = 99% Capex spent	- SAP Report - Approved section 71 reports
		1.2	% Spent of allocated departmental Opex budget	91% ²⁶	1 = 80% Opex spent 2 = 90% Opex spent 3 = 95 Opex spent 4 = 97% Opex spent 5 = 99% Opex spent	- SAP Report - Signed quarterly departmental performance reports

1.1

²⁴ This is applicable to departments with large capex budget – threshold to be determined.

²⁵ 2025/26 baseline

²⁶ 2025.26 baseline

KPA No	Key Performance Area	KPI No.	Key Performance Indicator	Baseline	Annual Target	Means of Verification
		1.3	Percentage of valid departmental invoices paid within 30 days of submission to Group Finance for payment ²⁷	93% ²⁸	1 = 75% of valid invoices 2 = 80% of valid invoices 3 = 85% of valid invoices 4 = 90% of valid invoices 5 = 100% of valid invoices	Mid-year and Annual Merchants reports
People Management and Empowerment (Compulsory)						
3	Performance and People Management	3.1	Percentage of departmental staff receiving performance coaching and review as per the LG Municipal Staff Regulations of 2021 on performance management	77%	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	- Quarterly Performance Management compliance reports - Approved assessment report by GCSS - Signed departmental NFR report for 2025/26 performance rewards
		3.2	Percentage of disciplinary cases resolved within 120 days ²⁹	>75%	1 < 60% 2 = 60 – 69% 3 = 70 - 79% 4 = 80 - 89% 5 = 90 - 99%	- Approved departmental quarterly performance reports - GCSS LR report - Annual report 2025/26

1.1

²⁷ 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.

²⁸ 2025/26 baseline

²⁹ The timeliness of this KPI is impacted by factors outside of the Executive Director's direct control. While factors like Disciplinary Board decisions, employee participation, and unforeseen events can impact the timeliness of this disciplinary KPI, measured from the charge sheet date, the department can focus on areas within our control. This includes encouraging prompt responses from all parties through clear communication and continuously reviewing and improving the efficiency of internal procedures. The counting begins with the charge (charge sheet date) laid on the employee up to the date of sanction by the Chairperson and Committee or Board.

KPA No	Key Performance Area	KPI No.	Key Performance Indicator	Baseline	Annual Target	Means of Verification
5	Institutionalisation of GEYODI and EE in the City	5.1	Number of GEYODI programmes implemented as per the approved action plans.	66	1 = ≤ 50 programmes ³⁰ 2 = 51 – 65 programmes 3 = 66 – 75 programmes 4 = 76 – 85 programmes 5 = 86 – 90+ programmes	- Approved GEYODI action plans signed off by Departmental Executive Directors and Municipal Entities Accounting Officers. - Nomination Letters of Geyodi Focal Persons to champion GEYODI. - Quarterly Compliance Reports
		3.2	% EE, Gender and Disability mainstreaming ³¹	New indicator	1 < 40% ³² 2= 41% - 59% ³³ 3= 60% - 79% ³⁴ 4= 80% - 99% ³⁵ 5=100% ³⁶	- Minutes - Attendance registers - Concept documents.
4	Employee Safety	4.1	Percentage of Health and Safety corrective measures implemented	58%	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	- 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

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³⁰ GEYODI themes focus programmes implemented as per the approved action plans.

Examples include sport, arts, cultural, literacy, training, and social cohesion programmes specifically targeting or including women, youth, and PWDs..

³¹ The KPI include both the internal focused initiatives on Employment Equity, inclusive of Gender Disabilities and Diversity Management initiatives and interventions.

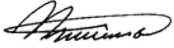
³² Attendance of consultative sessions scheduled i.e. directorate, departmental and/or citywide; depending on the level of representation in line with the approved Terms of Reference (TOR). This includes recruitment and selection processes which the representative has attended within the reporting period.

³³ Provide feedback to staff or the constituency in ways agreed to by the forum. This includes, emails, staff meetings or relevant structure/forum etc.

³⁴ Participate in the development of the Action Plan and monitor implementation.

³⁵ Input into or submission of relevant reports to various structures or relevant authorities.

³⁶ Facilitate the employee participation in citywide events planned for the City's employees, include workshops, training or EE, Gender and Disability events.

KPA No	Key Performance Area	KPI No.	Key Performance Indicator	Baseline	Annual Target	Means of Verification
Customer Orientation and Customer Focus (Compulsory)						
6	Customer satisfaction	6.1	% Increase in customer satisfaction index ³⁷	60	1 <60% 2 = 60%. 3 = 61% ³⁸ 4 = 62% 5 = >62%	Satisfaction results by GSPCR
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.						
Siyanda Mnukwa Executive Director: Community Development		Signature 		Dr Floyd Brink: City Manager	Signature 	Date: 31 July 2026

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³⁷ The Customer Satisfaction Survey will focus on initiatives from the War Room, regional accelerated service delivery and all service delivery areas that require turnaround i.e water, energy, waste, roads, safety and measure improvements in these areas, etc.

³⁸ Per GPAC guidance, an aspirational target to counter declining satisfaction trends