

## PERFORMANCE AGREEMENT

Made and entered into by and between

### THE CITY OF JOHANNESBURG METROPOLITAN MUNICIPALITY

("the City")

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

and

Adv. Nombulelo Mahanjana

("the acting Group Head")

**for the financial year: 1 July 2026 to 30 June 2027**

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## **1. INTRODUCTION**

- 1.1 The City has entered into a contract of employment with the acting Group Head 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 acting Group Head 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 acting Group Head.
  - 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 acting Group Head 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 acting Group Head, 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 City Manager'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 acting Group Head; 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 acting Group Head 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 acting Group Head'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 acting Group Head will be required to engage in performing his job.

5.2 The acting Group Head agrees to participate in the performance management system that the City adopts or introduces.

5.3 The acting Group Head 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 acting Group Head to perform to the standards required.

5.4 The acting Group Head undertakes to actively focus on 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 acting Group Head'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 acting Group Head, 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 acting Group Head.

6.2 The performance of the acting Group Head 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

6.3 The acting Group Head must avail himself/herself for scheduled performance reviews. Failure to do so, may result in the City Manager concluding on the acting Group Head'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 acting Group Head 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 acting Group Head'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 acting Group Head will be consulted before any such change is made.

- 6.8 Despite the establishment of agreed intervals for evaluation, City Manager may, in addition, review the acting Group Head 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 acting Group Head 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 acting Group Head delegate such powers reasonably required by the acting Group Head 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 acting Group Head such resources as acting Group Head 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 acting Group Head timeously in respect of decisions which will have a significant impact on the performance of the duties of the acting Group Head.

## **9. MANAGEMENT OF OUTCOMES**

- 9.1 The evaluation of the acting Group Head'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 acting Group Head 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 acting Group Head in accordance with the City's policy and system referred to in this agreement.
- 9.4 Should the acting Group Head 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 Head not be entitled to a performance bonus in line with the acting Group Head's employment contract, alternative performance rewards will be awarded as per the relevant policy.
- 9.5 In the case of unacceptable performance, City Manager shall provide systematic remedial or developmental support to assist the acting Group Head to improve his or her performance.
- 9.6 Where the City Manager is, at any time during the Acting Executive Head's employment, not satisfied with the acting Group Head's performance with respect to any matter dealt with in this Agreement, the City Manager will give notice to the acting Group Head to attend a meeting with the City Manager.
- 9.7 The acting Group Head will have the opportunity at the meeting to satisfy the City Manager of the measures being taken to ensure that the acting Group Head'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 acting Group Head 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 party's 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 acting Group Head 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.

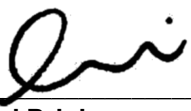
## 11. GENERAL

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 acting Group Head 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 31<sup>st</sup> day of July 2026.

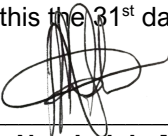
For: **THE CITY OF JOHANNESBURG**  
**METROPOLITAN MUNICIPALITY**

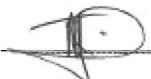
  
\_\_\_\_\_  
**Dr. Floyd Brink**  
**City Manager**

Witness: \_\_\_\_\_

Witness: \_\_\_\_\_

SIGNED at Braamfontein on this the 31<sup>st</sup> day of July 2026.

  
\_\_\_\_\_  
**Adv. Nombulelo Mahanjana**  
**Acting Group Head**

Witness: \_\_\_\_\_

Witness:

A handwritten signature in black ink, consisting of several loops and strokes, positioned above a horizontal line.

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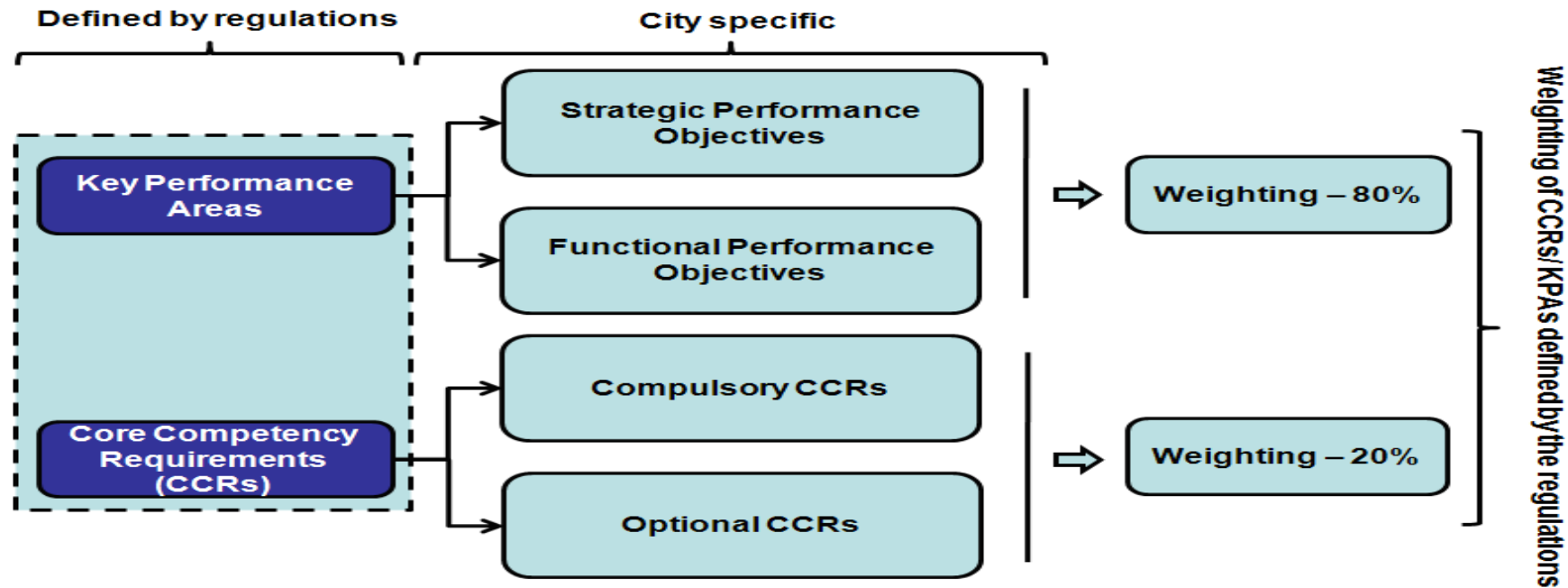
**ANNEXURE “A”****PERFORMANCE SCORECARD – SECTION 57 EMPLOYEES**

|                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Employee</b>         | Adv. Nombulelo Mahanjana<br>Acting Group Head                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Manager</b>          | Dr. Floyd Brink<br>City Manager                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Department</b>       | Group Forensic and Investigation Services (GFIS)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Position purpose</b> | <ol style="list-style-type: none"><li>1. To support, execute and report on GFIS contribution linked to the CoJ priorities and programmes.</li><li>2. To prevent, detect, investigate and resolve all reported crimes committed against CoJ related to fraud and corruption, theft of City’s assets, Maladministration including Unauthorised Irregular, fruitless and Wasteful (UIFW), Theft of City’s Assets, Hijacked properties, Compliance with property Bylaw, Cybercrime, illegal connections, vandalism and Breach of security.</li><li>3. To monitor that the remedial actions emanating from the finalised forensic investigation reports are implemented on those who have committed crimes against the CoJ.</li><li>4. To provide efficient and effective integrated forensic information management centre.</li><li>5. To ensure stakeholders (internal and external) are educated, informed and work together with GFIS in order to ensure a corrupt free CoJ.</li><li>6. To ensure compliance with all the relevant policies and regulations such as strategic planning, performance management, financial management etc.</li></ol> |

**The period of this Performance Plan is from 1 July 2026 to 30 June 2027**

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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%.

## SECTION 1: STRATEGIC PERFORMANCE OBJECTIVES (SPO)

| KPA No                                                                    | Key Performance Area                                                           | KPI No. | Key Performance Indicators (KPIs)                                                      | Baseline | Target                                                                                                 | Means of Verification                                                |
|---------------------------------------------------------------------------|--------------------------------------------------------------------------------|---------|----------------------------------------------------------------------------------------|----------|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <b>STRATEGIC PERFORMANCE OBJECTIVES</b><br><b>(TOTAL WEIGHTING = 50%)</b> |                                                                                |         |                                                                                        |          |                                                                                                        |                                                                      |
| 1.                                                                        | Investigated reported allegations <sup>1</sup> of crimes committed against CoJ | 1.1     | Percentage of reduction of Illegally occupied building incidents reported <sup>1</sup> | 56%      | 1 = 75% reduction<br>2 = 80% reduction<br>3 = 85% reduction<br>4 = 90% reduction<br>5 = +90% reduction | Dashboard of illegally occupied building investigations with status. |
|                                                                           |                                                                                | 1.2     | % of reduction of historic fraud & corruption incidents reported                       | 45%      | 1 = 75% reduction<br>2 = 80% reduction<br>3 = 85% reduction<br>4 = 90% reduction<br>5 = +90% reduction | Dashboard of fraud and corruption investigations with the status.    |
|                                                                           |                                                                                | 1.3     | % of reduction of historic theft of city assets incidents reported                     | 56%      | 1 = 75% reduction<br>2 = 80% reduction<br>3 = 85% reduction<br>4 = 90% reduction<br>5 = +90% reduction | Dashboard of theft of city assets investigations with the status.    |
|                                                                           |                                                                                | 1.4     | % of reduction of historic maladministration incidents reported                        | 31%      | 1 = 75% reduction<br>2 = 80% reduction<br>3 = 85% reduction                                            | Dashboard of maladministration investigations with the               |

### 1.1

<sup>1</sup> This KPI measures the investigated allegations of buildings that are occupied illegally either as a result of hijacking//bad/problem properties that are not complaint with the relevant legal prescript incl policies and bylaws of the City, these incidents that were reported either historic (prior 30 June 2025), current (01 Jul 2026 to 30 June 2026) and new (current financial year).

| KPA No | Key Performance Area | KPI No. | Key Performance Indicators (KPIs)                            | Baseline      | Target                                                                                                 | Means of Verification                                       |
|--------|----------------------|---------|--------------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
|        |                      |         |                                                              |               | 4 = 90% reduction<br>5 = +90% reduction                                                                | status.                                                     |
|        |                      | 1.5     | % of reduction of historic UIFW incidents reported           | 9%            | 1 = 75% reduction<br>2 = 80% reduction<br>3 = 85% reduction<br>4 = 90% reduction<br>5 = +90% reduction | Dashboard of UIFW investigations with the status.           |
|        |                      | 1.6     | % of cybercrime incidents reported                           | 57%           | 1 = 75% reduction<br>2 = 80% reduction<br>3 = 85% reduction<br>4 = 90% reduction<br>5 = +90% reduction | Dashboard of cybercrime investigations with the status.     |
|        |                      | 1.7     | % of reduction of security breach of incidents reported      | 100%          | 1 = 75% reduction<br>2 = 80% reduction<br>3 = 85% reduction<br>4 = 90% reduction<br>5 = +90% reduction | Dashboard of security breach investigations with the status |
|        |                      |         | % reduction of current/new <sup>2</sup> corruption incidents | 57% (231/402) | 1 = 45% reduction<br>2 = 60% reduction<br>3 = 75% reduction<br>4 = 80% reduction<br>5 = +80% reduction | Dashboard of current/new investigations with the status.    |

## 1.1

<sup>2</sup> Current refers to cases reported from 1 July 2024 to 30 June 2025

| KPA No | Key Performance Area                     | KPI No. | Key Performance Indicators (KPIs)                               | Baseline | Target                                               | Means of Verification                                         |
|--------|------------------------------------------|---------|-----------------------------------------------------------------|----------|------------------------------------------------------|---------------------------------------------------------------|
|        |                                          | 1.8     | % of digital investigation support provided                     | New      | 1 = 75%<br>2 = 80%<br>3 = 90%<br>4 = 95%<br>5 = +95% | Dashboard of digital investigation support                    |
|        |                                          | 1.8     | Number of revenue assurance transactions detected. <sup>3</sup> | 959      | 1 = 350<br>2 = 400<br>3 = 450<br>4 = 455<br>5 = +455 | Dashboard of revenue transactions with the status.            |
| 2      | Prevent crimes committed against the CoJ | 2.1     | Number of procurement committee members screened                | 847      | 1 = 200<br>2 = 250<br>3 = 300<br>4 = 350<br>5 = +350 | Dashboard of BSC/BEC/BAC members screened.                    |
|        |                                          | 2.2     | Number of awareness sessions conducted                          | 195      | 1 = 100<br>2 = 150<br>3 = 200<br>4 = 250<br>5 = +250 | List of awareness sessions conducted.<br>Attendance register. |

## 1.1

<sup>3</sup> Revenue assurance transactions refer to Illicit transaction includes both financial and non-financial. Financial relates to revenue losses and non-financial relates to CoJ Assets losses etc.

| KPA No | Key Performance Area                                | KPI No. | Key Performance Indicators (KPIs)                                                      | Baseline | Target                                                                                                                                                                                                                                                                                                                                                                                                | Means of Verification                      |
|--------|-----------------------------------------------------|---------|----------------------------------------------------------------------------------------|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|
| 3.     | Monitor implementation of finalised forensic report | 3.1     | % of finalised forensic investigation reports recommending disciplinary action tracked | 100%     | 1 = 80% tracked within 90 days of issuance of forensic report<br>2 = 90% tracked within 90 days of issuance of forensic report<br>3 = 100% tracked within 90 days of issuance of forensic report<br>4 = 100% tracked within 60 days of issuance of forensic report<br>5 = 100% tracked within 30 days of issuance of forensic report                                                                  | Dashboard of disciplinary cases monitored. |
|        |                                                     | 3.2     | % of criminal cases tracked to determine status by investigative bodies                | 100%     | 1 = 80% tracked within 90 days issuance of criminal action recommendations<br>2 = 90% tracked within 90 days issuance of criminal action recommendations<br>3 = 100% tracked within 90 days issuance of criminal action recommendations<br>4 = 100% tracked within 60 days issuance of criminal action recommendations<br>5 = 100% tracked within 30 days issuance of criminal action recommendations | Dashboard of criminal cases monitored      |

| KPA No | Key Performance Area                                       | KPI No. | Key Performance Indicators (KPIs)                                                                | Baseline                 | Target                                                                                                                                                                | Means of Verification                                                                                    |
|--------|------------------------------------------------------------|---------|--------------------------------------------------------------------------------------------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
| 4      | Good Governance                                            | 4.1     | Audit opinion <sup>4</sup>                                                                       | Unqualified Audit Report | 1 = Disclaimer of Audit Opinion<br>2 = Adverse Audit Opinion<br>3 = Unqualified Audit opinion<br>4 = Financially Unqualified Audit Opinion<br>5 = Clean Audit Outcome | AG Management Letter                                                                                     |
|        |                                                            | 4.2     | % of Internal Audit findings resolved <sup>5</sup>                                               | 100%                     | 1 = <85% resolution<br>2 = 85% - 90% resolution<br>3 = 91% - 95% resolution<br>4 = 96% -97% resolution<br>5= 98% - 100% resolution (including no findings)            | <ul style="list-style-type: none"> <li>GAC Internal Audit Report on Findings</li> </ul>                  |
|        |                                                            | 4.3     | % Resolution of external (AGSA) audit findings <sup>6</sup>                                      | 100%                     | 1 = < 85% resolution<br>2 = 85% - 90% resolution<br>3 = 91% - 95% resolution<br>4 = 96% - 97% resolution<br>5 =98% - 100% resolution (including no findings)          | <ul style="list-style-type: none"> <li>GAC Internal Audit Report on Findings</li> <li>Minutes</li> </ul> |
| 5.     | Zero tolerance of fraud and corruption (Circular 88 GG5.1) | 5.1     | Number of alleged fraud and corruption <sup>7</sup> cases <b>reported</b> per 100 000 population | 402                      | 1 = 300<br>2 = 350<br>3 = 420                                                                                                                                         | Dashboard of new allegations reported (all categories)                                                   |

## 1.1

<sup>4</sup> The opinion may be that given for the department/entity where applicable.

<sup>5</sup> These are findings by internal audit only that are picked up on an ongoing basis.

<sup>6</sup> This is for only findings classified as matters affecting audit opinion and others important matters.

| KPA No                                                                        | Key Performance Area                | KPI No. | Key Performance Indicators (KPIs)                                                                                                        | Baseline | Target                                                         | Means of Verification                                                                                    |
|-------------------------------------------------------------------------------|-------------------------------------|---------|------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
|                                                                               |                                     |         |                                                                                                                                          |          | 4 = 450<br>5 = above 450                                       |                                                                                                          |
| 6.                                                                            | Service Standards                   | 6.1     | % of PSC screening completed within <b>21<sup>8</sup> working days</b> (except for international qualifications/ criminal verifications) | 56%      | 1 = 55%<br>2 = 75%<br>3 = 85%<br>4 = 90%<br>5 = 95%            | Dashboard of PSC requests processed, Signed requests and reports.                                        |
|                                                                               |                                     | 6.2     | New complaints received, registered and feedback to clients within <b>5 working day</b>                                                  | 100%     | 1 = 85%<br>2 = 90%<br>3 = 95%<br>4 = 97%<br>5 = above 97%      | Dashboard of new cases reported via Hotline, Email and Walk-in.                                          |
|                                                                               |                                     | 6.3     | % of investigation of cases completed within <b>100 working days</b> (except for complex cases <sup>9</sup> )                            | 34%      | 1 = 55%<br>2 = 65%<br>3 = 75%<br>4 = 80%<br>5 = above 80%      | Dashboard of completed investigations                                                                    |
| SECTION 2: FUNCTIONAL PERFORMANCE OBJECTIVES (FPO)<br>(TOTAL WEIGHTING = 30%) |                                     |         |                                                                                                                                          |          |                                                                |                                                                                                          |
| 1.                                                                            | Procurement and Contract Management | 1.1     | % Compliance to acquisition of goods and services as per the approved demand                                                             | 100%     | 1 = 70% compliance<br>2 = 80% compliance<br>3 = 90% compliance | <ul style="list-style-type: none"><li>Approved Acquisition plan</li><li>Departmental Quarterly</li></ul> |

## 1.2

<sup>7</sup> This KPIs measures new allegations reported for all crime categories for investigations in the reporting period.

<sup>8</sup> PSC refers to background checks conducted on potential candidates or service providers prior to employment by the CoJ. Indicator performance can be measured and reported at 3 levels – 0-7 days @ 15% as per the IDP/Service Standard Charter, 8-14 days @55% and 15-21 days at 85%.

<sup>9</sup> Complex cases are those investigation that involves multiple witnesses and / or implicated officials, at various levels of authority. The investigation involves a large volume of information and substantial amount of money, these relate to extended period of time wherein varying procedures and situations are applied in the perpetration of malfeasance resulting in variable perspective and interpretation of events.

| KPA No | Key Performance Area         | KPI No. | Key Performance Indicators (KPIs)                                                                                                         | Baseline                                       | Target                                                                                                                                                              | Means of Verification                                                                                                                        |
|--------|------------------------------|---------|-------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
|        |                              |         | plan                                                                                                                                      |                                                | 4 = 100% compliance<br>5=100% compliance and no SCM deviations reported                                                                                             | Acquisition Status Reports<br><ul style="list-style-type: none"> <li>SCM Assessment reports</li> <li>Audited Financial statements</li> </ul> |
| 2.     | UIFW Strategy Implementation | 2.1     | Percentage reduction in historical <b>Unauthorised</b> expenditure reported on 30 June 2026                                               | No Unauthorised expenditure reported           | 1= $\leq$ 65% reduction<br>2=66%–74% reduction<br>3=75%–85% reduction<br>4=86%–96% reduction<br>5=97% and above (including non-incurrence in June 2027 report)      | <ul style="list-style-type: none"> <li>GRAS UIFWe report tabled at GAC and GPAC</li> <li>Audited Financial Statements</li> </ul>             |
|        |                              | 2.2     | Percentage reduction in historical <b>Irregular</b> expenditure reported on 30 June 2026                                                  | No Irregular expenditure reported              | 1= $<$ 65%<br>2=65% -74%<br>3=85% reduction<br>4=86%-96%<br>5=97% and above (including non-incurrence in June 2027 report)                                          | <ul style="list-style-type: none"> <li>GRAS UIFWe report tabled at GAC and GPAC</li> <li>Audited Financial Statements</li> </ul>             |
|        |                              | 2.3     | Percentage reduction in historical <b>Fruitless and Wasteful</b> expenditure reported on 30 June 2026                                     | No Fruitless and Wasteful expenditure reported | 1= $<$ 65%<br>2=65% -74%<br>3=85% reduction<br>4=86%-96%<br>5=97% and above (including non-incurrence in June 2027 report)                                          | <ul style="list-style-type: none"> <li>GRAS UIFWe report tabled at GAC and GPAC</li> <li>Audited Financial Statements</li> </ul>             |
| 3.     | Risk Management              | 3.1     | % of risks mitigation strategies action plan for departmental top strategic risks implemented towards the reduction of departmental risks | 33%                                            | 1 < 50% implemented.<br>2 = 51% - 84% implemented<br>3 = 85% implemented<br>4 = 95% of departmental top strategic risks implemented<br>5 = 100% of departmental top | GRGC Risk analysis reports and Minutes                                                                                                       |

| KPA No                                                                           | Key Performance Area                              | KPI No. | Key Performance Indicators (KPIs)                            | Baseline                          | Target                                                                                                                                                                                                                                                                                   | Means of Verification                                                                                                                                 |
|----------------------------------------------------------------------------------|---------------------------------------------------|---------|--------------------------------------------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                  |                                                   |         |                                                              |                                   | strategic risks implemented                                                                                                                                                                                                                                                              |                                                                                                                                                       |
| 4.                                                                               | Departmental performance monitoring and reporting | 4.1     | % Achievement of departmental SDBIP                          | 90%                               | 1 = < 75% achieved.<br>2 = 75% - 84% achieved<br>3 = 85% - 89% achieved<br>4 = 90% - 99% achieved<br>5 = 100% achieved                                                                                                                                                                   | Signed departmental progress report                                                                                                                   |
| 5                                                                                | Policy Management                                 | 5.1     | Percentage approved policies in departmental policy register | Approved policies in the register | 1=<85% policies reviewed and approved.<br>2= 85% - 90% policies reviewed and approved<br>3= 91%-100% policies reviewed and approved<br>4 = 100% policies reviewed and approved within 6 months after the date of review<br>5=100% policies reviewed and approved 3 months after approval | <ul style="list-style-type: none"> <li>Progress report to GSPCR Policy Office</li> <li>Approved COJ policies report tabled at EMT and GPAC</li> </ul> |
| <b>SECTION 3: CORE COMPETENCY REQUIREMENTS</b><br><b>(TOTAL WEIGHTING = 20%)</b> |                                                   |         |                                                              |                                   |                                                                                                                                                                                                                                                                                          |                                                                                                                                                       |
| <b>Financial Competence (Compulsory)</b>                                         |                                                   |         |                                                              |                                   |                                                                                                                                                                                                                                                                                          |                                                                                                                                                       |
| 1                                                                                | Expenditure Management                            | 1.1     | % Spent of allocated departmental Opex budget                | 91% (R25.9m)                      | 1 < 93% spent<br>2 = 93% - 94% spent<br>3 = 95% - 97% spent<br>4 = 98% - 99% spent<br>5 = 100% spent                                                                                                                                                                                     | 1. SAP Report<br>2. Midyear and Annual financial expenditure report                                                                                   |
|                                                                                  |                                                   | 1.2     | Percentage of valid departmental invoices paid               |                                   | 1 = 75% of valid invoices<br>2 = 80% of valid invoices                                                                                                                                                                                                                                   | Mid-year and Annual Merchants                                                                                                                         |

| KPA No                                         | Key Performance Area              | KPI No. | Key Performance Indicators (KPIs)                                                                                           | Baseline      | Target                                                                                                                                                                                                                                  | Means of Verification                                                                                                                 |
|------------------------------------------------|-----------------------------------|---------|-----------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
|                                                |                                   |         | within 30 days of submission to Group Finance for payment <sup>10</sup>                                                     |               | 3 = 85% of valid invoices<br>4 = 90% of valid invoices<br>5 = 100% of valid invoices                                                                                                                                                    | reports                                                                                                                               |
| People Management and Empowerment (Compulsory) |                                   |         |                                                                                                                             |               |                                                                                                                                                                                                                                         |                                                                                                                                       |
| 2                                              | Performance and People Management | 2.1     | % Compliance to the performance management cycle as per the policy for employees of the CoJ <sup>11</sup> in the department | 100%          | 1 = <65%<br>2 = 65% - 84%<br>3 = 85% - 100%<br>4 = 100% compliance and up to 50% of employees achieved 3.1 or more on their set targets<br>5 = 100% compliance and more than 50% of employees achieved 3.1 or more on their set targets | <ul style="list-style-type: none"><li>Assessment report by GCSS</li></ul>                                                             |
|                                                |                                   | 2.2     | Percentage of disciplinary cases resolved within 120 days <sup>12</sup>                                                     | 100%          | 1 = >75%<br>2 = 75 - 80%<br>3 = 81 - 85%<br>4 = 86 - 90%<br>5 = 90 - 100%                                                                                                                                                               | <ul style="list-style-type: none"><li>Appointment letters of Prosecutor and Presiding Officer</li><li>Disciplinary sanction</li></ul> |
| Change Management (optional)                   |                                   |         |                                                                                                                             |               |                                                                                                                                                                                                                                         |                                                                                                                                       |
| 3                                              | Institutionalisation of           | 3.1     | Number of Geyodi                                                                                                            | New indicator | 1 ≤ 2 or less <sup>13</sup>                                                                                                                                                                                                             | <ul style="list-style-type: none"><li>Approved GEYODI action</li></ul>                                                                |

## 1.1

<sup>10</sup> 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.

<sup>11</sup> This is performance for the entire staff compliment in the department unless specified otherwise for departments with very large numbers of employees.

<sup>12</sup> 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.

<sup>13</sup> Geyodi programmes implemented as per the approved action plans

| KPA No | Key Performance Area      | KPI No. | Key Performance Indicators (KPIs)                               | Baseline      | Target                                                                                                                                                                                  | Means of Verification                                                                                                                                                                                |
|--------|---------------------------|---------|-----------------------------------------------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|        | GEYODI and EE in the City |         | programmes implemented as per the approved action plans.        |               | 2= 3<br>3= 4<br>4= 5<br>5= 6                                                                                                                                                            | plans signed off by Departmental Executive Directors and Municipal Entities Accounting Officers.<br>• Nomination Letters of Geyodi Focal Persons to champion GEYODI.<br>Quarterly Compliance Reports |
|        |                           | 3.2     | % EE, Gender and Disability mainstreaming <sup>14</sup>         | New indicator | 1 ≤ 40% <sup>15</sup><br>2= 41% - 59% <sup>16</sup><br>3= 60% - 79% <sup>17</sup><br>4= 80% - 99% <sup>18</sup><br>5= 100% <sup>19</sup>                                                | • Minutes<br>• Attendance registers<br>• Concept documents.                                                                                                                                          |
| 4      | Employee Safety           | 4.1     | Percentage of Health and Safety corrective measures implemented |               | 1< 85% corrective measures implemented<br>2= 85% corrective measures implemented<br>3= 100% corrective measures implemented<br>4= 100% corrective measures implemented, and no injuries | • Implementation plan with targeted corrective measures<br>• Signed departmental quarterly progress reports<br>• Consolidated GSHE biannual assessment                                               |

## 1.1

<sup>14</sup> The KPI include both the internal focused initiatives on Employment Equity, inclusive of Gender Disabilities and Diversity Management initiatives and interventions.

<sup>15</sup> 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.

<sup>16</sup> Provide feedback to staff or the constituency in ways agreed to by the forum. This includes, emails, staff meetings or relevant structure/forum etc.

<sup>17</sup> Participate in the development of the Action Plan and monitor implementation.

<sup>18</sup> Input into or submission of relevant reports to various structures or relevant authorities.

<sup>19</sup> 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 Indicators (KPIs)            | Baseline                        | Target                                                                              | Means of Verification                                                                                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|----------------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                                                                             |                       |                                                                                              |                                              |                                 | sustained<br>5= 100% corrective measures implemented and no injuries and fatalities | reports indicating corrective measures implemented and the level of compliance according to the audits conducted  |
| <b>Customer Orientation and Customer Focus (Compulsory)</b>                                                                                                                                                                                                                                 |                       |                                                                                              |                                              |                                 |                                                                                     |                                                                                                                   |
| 5                                                                                                                                                                                                                                                                                           | Customer satisfaction | 5.1                                                                                          | % Increase in customer satisfaction index[1] | 60%                             | 1 <60%<br>2 = 60%<br>3 = 61% [2]<br>4 = 62%<br>5 = >62%                             | Annual Customer satisfaction survey report                                                                        |
| 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. |                       |                                                                                              |                                              |                                 |                                                                                     |                                                                                                                   |
| Adv. Nombulelo Mahanjana<br>Acting Group Head: GFIS                                                                                                                                                                                                                                         |                       | Signature:  |                                              | Dr. Floyd Brink<br>City Manager |                                                                                     | Signature:  Date: 31 July 2026 |

## 1.1

[1] 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

[2] Per GPAC guidance, an aspirational target to counter declining satisfaction trends