

## MID-YEAR AMENDMENTS TO THE HEALTH 2020/21 SERVICE DELIVERY BUDGET IMPLEMENTATION PLAN (SDBIP)

### 1. STRATEGIC THRUST

Improved quality of life and development driven resilience for all

### 2. OBJECTIVE

To note and to seek approval on the proposed changes to Health 2020/21 SDBIP

### 3. LEGISLATIVE COMPLIANCE

3.1. *Section 72 of the MFMA, 56 of 2003* requires that the Accounting Officer of the municipality must by January of each year, assess the performance of the municipality for the first half of the financial year against predetermined targets, performance indicators and community needs as set out in the municipal Service Delivery and Budget Implementation Plans and IDPs. It further requires that the Accounting Officer submits reports of such assessment to the City and its municipal entities, to Council. These must include:

- Progress report for the first half of the financial year on service delivery performance & service delivery targets & performance indicators in SDBIP
- Monthly budget statements for the first half of the financial year in terms of Section 71 of the MFMA).

3.2. The same legislation also makes provision for adjustments of the budget where necessary based on the mid-year review.

3.3. *Circular 13 of the MFMA* provides guidance and assistance in the development of Service Delivery & Budget Implementation Plan (SDBIP). The SDBIP gives effect to Integrated Development Plan (IDP) and stipulate the following:

- The SDBIP serves as a “contract” between the administration, council and community.
- Being a management and implementation plan (and not a policy proposal), the SDBIP is not required to be approved by the council, it is however tabled before council and made public for information and for purposes of monitoring.
- However, the top-layer of the SDBIP (Institutional SDBIP) and its targets cannot be revised without notifying the council, and if there are to be changes in service delivery targets and performance indicators, this must be with the approval of the council, following approval of an adjustments budget (section 54(1)(c) of MFMA).
- This council approval is necessary to ensure that the mayor or municipal manager do not revise service delivery targets downwards in the event where there is poor performance.

- 3.4. The report therefore outlines areas of adjustments for consideration and approval by the Mayoral Committee and subsequently tabling at Council.

**GDS OUTCOME: Improved Quality of Life and Development-Driven Resilience for All  
STRATEGIC PRIORITY: Minimizing the Impact of COVID 19  
STRATEGIC PROGRAMME:**

Change	KPI No	Key Performance Area	Key Performance Indicator	2019/20 Baseline	2020/21 Target	Q1 target	Q1 actual	Q2 target	Q2 actual	Q3 Jan-Mar	Q4 Apr-Jun	Estimated budget Capex	Opex	Evidence and Means of verification	Proposed deviation	Motivation for deviation
Existing	1.		No of clinics that are COVID 19 testing sites <sup>1</sup>	New	76	35	60	76	76	76	76			Listing of clinics that offer covid testing	Alignment of quarterly targets to the annual target. In addition Lenasia Ext 10 is a 2 roomed facility unsuitable for testing'	Lenasia Ext 10 is a 2 roomed facility unsuitable for testing'
Amended KPI as per the proposed Deviation			No of clinics that are COVID 19 testing sites <sup>2</sup>	New	75	75	75	75	75	75	75			Listing of clinics that offer covid testing	Alignment of quarterly targets to the annual target. In addition Lenasia Ext 10 is a 2 roomed facility unsuitable for testing'	Lenasia Ext 10 is a 2 roomed facility unsuitable for testing'
Existing	2.		% of clinics with PPE's	New	100%	25% of clinics with PPE's	50% of clinics with PPE's	75% of clinic with PPE's	100% of clinics with PPE's	100% of clinics with PPE's	100% of clinics with PPE's			Listing of clinics that have PPEs	Alignment of quarterly targets to the annual target	Alignment of quarterly targets to the annual target
Amended KPI as per the proposed Deviation			% of clinics with PPE's	New	100%	100% of clinics with PPE's	100% of clinics with PPE's	100% of clinics with PPE's	100% of clinics with PPE's	100% of clinics with PPE's	100% of clinics with PPE's			Listing of clinics that have PPEs	Alignment of quarterly targets to the annual target	Alignment of quarterly targets to the annual target

<sup>1</sup> This is dependent on the testing kits availability from the Gauteng Health Department

<sup>2</sup> This is dependent on the testing kits availability from the Gauteng Health Department

#### **4. BACKGROUND**

- 4.1. The 2020/21 mid-year reporting period represents a period in which strategic planning documents are reviewed, as part of the City's planning and reporting processes.
- 4.2. The mid-year amendment report is prepared in order to profile all amendments so as to assist the Mayoral Committee and Council in reflecting on organisational performance and the requisite readjustments at the midyear period. These amendments have been identified within the Health Department and prompted by the:
- Changed circumstances relating to programme implementation (such as budgets constraints, feasibility study outcomes, interdependencies and so forth).
  - Continuous enhancement of quality of the City's predetermined objective (performance indicators and performance targets) to conform to National Treasury Framework for Managing Performance Information i.e. in line with specific, measurable, achievable, relevant and time-bound (S.M.A.R.T.) principles.
- 4.3. It should be noted that amendments on programmes or projects, if approved would subsequently be effected on the Health Department's SDBIP to ensure alignment and will be reported on from 3<sup>rd</sup> quarter onwards.
- 4.4. The amendments recommended in the attached report therefore seek to refocus the KPIs and orientate them to be more output and progressively, to measure impact.

#### **5. PROPOSED DEVIATION**

The Department wishes to amend the quarterly targets to two KPI s that support the COVID strategic priority to be in line with the annual target. In addition Lenasia Ext 10 is a 2 roomed facility unsuitable for testing.

#### **6. MOTIVATION**

In response to the COVID 19 pandemic, the quarterly targets for both KPIs must be aligned to the annual targets. In addition, Lenasia Clinic Ext10 is a 2 roomed facility unsuitable to be a testing site. The revised number of 75 clinics must offer testing throughout all quarters and not for each quarter to have a quarterly target as it exist in the Department SDBIP at present. In addition, all clinics must have PPEs throughout all quarters and not for each quarter to have a quarterly target as it exist in the Department SDBIP at present

7. LEGAL AND CONSTITUTIONAL IMPLICATIONS

This report is in compliance with the provisions of the Municipal Finance Management Act, 2003, Circular 13 of MFMA and the Local Government: Municipal Planning and Performance Management Regulations, 2001.

8. COMMUNICATION IMPLICATIONS

This report was communicated with the Health Management team and its MMC.

9. RECOMMENDATIONS

It is recommended:

- That the proposed amendments to the Health Department Service Delivery and Budget Implementation Plan for 2020/21 as detailed in section 3.4 above be noted and approved.
- That the proposed changes be affected from 3rd quarter reporting.
- That the Health Departmental SDBIP be revised to effect the proposed changes where required

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Date:

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Date:

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