CHRIS HANI DISTRICT MUNICIPALITY



1ST DRAFT ANNUAL PERFORMANCE REPORT (2022/2023)

the performance targets set by the municipality for the following financial year and; (iii) measures that were taken or are to with targets of and with performance in the previous financial year (ii) the development and service delivery priorities and Background: In terms of Section 46 of the local government: municipal systems act, 2000 (Act 32 of 2000 as amended) reflecting the (i) the municipality's and any service providers performance during the financial year, also in comparison states that a Municipality must prepare for each financial year, an annual report consisting of a performance report be taken to improve performance

The 1st draft annual report has been presented to Council structures and council on the 30th August 2023 for noting as legislatively required. It will be submitted to AG and made public in line with the applicable legislative requirements.

Signatures CLLR L. SIZANI
ACTING EXECUTIVE MAYOR
CHRIS HANI DISTRICT MUNICIPALITY MR G MASHIYI
MUNICIPAL MANAGER
CHRIS HANI DISTRICT MUNICIPALITY Draft Annual report submitted by: **Draft Annual Report Approved by:** 30 Quyus 2023 DATE

CHRIS HANI DISTRICT MUNICIPALITY



DRAFT ANNUAL PERFORMANCE REPORT 2022/2023

31ST AUGUST 2023 ISSUED BY THE PMS OFFICE

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1. Introduction

The district municipality, at the beginning of 2022/23 Financial Year, adopted a "pro-poor" budget which gives effect to the strategic priorities of the municipality. In terms of the Local Government: Municipal Finance Management Act, 56 of 2003 (MFMA), Sec 53(1)(c)(ii) a municipality's Service Delivery and Budget Implementation Plan (SDBIP) must be approved by the Mayor within 28 days after the approval of the budget. The SDBIP gives effect to the Integrated Development Plan (IDP) and budget of the municipality. The performance herein mentioned in the paragraph above is based on the service delivery and budget implementation plan approved and later revised by Council as per the requirements of the MFMA.

The SDBIP therefore serves as a "contract" between the administration, Council and community expressing the goals and objectives set by the Council as quantifiable outcomes that can be implemented by the administration over a twelve-month period. This provides the basis for measuring performance in service delivery against end-of-year targets and implementing the budget. Once approved, the SDBIP forms the basis of the performance plan of the Municipal Manager and cascaded down to inform the performance plans of the Section 56 managers. This ultimately forms the basis for measuring the performance of the municipality as well as the individual performances of the municipal manager and his senior management team.

In line with the requirement mentioned above, the Executive Mayor of the Chris Hani District Municipality approved the SDBIP for the 2022/2023 financial year in June 2022 while the Performance Agreements of the Senior Managers were concluded in July 2022. During the development of the SDBIP, a balanced scorecard model was utilized. This means that all aspects of the operation of the municipality were included in the SDBIP (internal business processes, financial perspectives, and service delivery perspective) with a view of ensuring that all operational aspects are monitored and evaluated against the impact they have on the operation of the municipality and the delivery of services.

For purposes of consolidation, the SDBIP for 2022/23 was divided in terms of the five key performance areas applicable to local government for both the Top Layer and Operational Service Delivery and Budget Implementation plans; viz.

- KPA 1: Municipal Transformation and Institutional Development;
- KPA 2: Basic Service Delivery and Infrastructure Development;

- KPA 3: : Local Economic Development;
- KPA 4: Municipal Financial Viability and Management; and
- KPA 5: Good Governance and Public Participation.

KPA 1: the main focus is on the provision of support services internally. These would speak chiefly to matters of human resource provisioning and development, employee wellness, management of municipal facilities, information communication technologies, fleet management services and legal services.

KPA 2: the main focus is of tangible service delivery matters such as provision of water and sanitation, infrastructure, free basic services, housing and town planning services.

KPA 3: this focuses on those indicators seeking to ensure that conducive conditions are created for broader economic growth and ultimately to boost the district economy. Typically, these indicators would focus on amongst others, issues such as SMME development, tourism promotion and development, forestry programmes, heritage development, the Expanded Public Works Programme (EPWP), and agriculture.

KPA 4: focuses on the internal financial management processes. As such, this would focus on matters relating to budget development, financial planning and reporting, supply chain management issues, asset management as well as income and expenditure management.

KPA 5: focuses on good governance matters such as public participation, stakeholder engagement, customer care and performance management, the effectiveness of oversight structures, internal audit matters, risk management and communications.

Section 46 of the Local Government: Municipal Systems Act, 32 of 2000 (MSA) requires that municipalities must, at the end of the financial year, prepare an annual performance report. The report required in terms of this Section must reflect the performance of the municipality and each of the external service providers engaged by the municipality (refer to appendix I of the document) for the year. Furthermore, this section prescribes that the performances reflected above must be compared with performances for the previous financial year and include measures to improve performance where underperformance was recorded.

During the 2022/2023 Financial Year the overall CHDM performance results reflect a regressing rate on the side of institutional performance (with reasons clearly stated in the SDBIP report) and in some KPA's; a progressing rate caused by improved performance results of departments in implementing the Integrated Development Plan, Budget and Service Delivery and Budget Implementation Plan of the Municipality.

The tables below provide a general overview and comparison of the performance of the institution in percentage terms for each KPA and finally for the institution as a whole.

Table 22: Comparison summary from 2018/2019 to 2022/2023 financial years

| KPA | Overall | Overall | Overall | Overall | Overall |
|----------------|-------------|-------------|-------------|-------------|-------------|
| | Performance | Performance | Performance | Performance | Performance |
| | Percentage | Percentage | Percentage | Percentage | Percentage |
| | (2018/2019 | (2019/2020 | (2020/2021 | (2021/2022 | (2022/2023 |
| | FY) | FY) | FY) | FY) | FY) |
| Municipal | 67% | 48% | 100% | 88% | 88% |
| Transformation | | | | | |
| and | | | | | |
| Organizational | | | | | |
| Development | | | | | |
| Basic service | 53% | 64% | 28.6% | 21% | 27% |
| delivery and | | | | | |
| infrastructure | | | | | |
| Development | | | | | |
| Local Economic | 84% | 70% | 62.5% | 63% | 63% |
| Development | | | | | |
| Financial | 17% | 32% | 90.9% | 91% | 80% |
| Management | | | | | |
| and Viability | | | | | |
| Good | 84% | 79% | 75% | 100% | 75% |
| Governance | | | | | |
| and Public | | | | | |
| Participation | | | | | |
| Overall | 64% | 63% | 61.5% | 53% | 51% |
| Institutional | | | | | |
| Performance | | | | | |

The performance of the institution varies over the years with a decline recorded in some KPA's due to various reasons that will be detailed in the report.

2. PERFORMANCE HIGHLIGHTS FOR 2022/2023

KPA 1: Municipal Transformation and Organizational Development

- Relations with labour remained stable: Continued Local Labour Forums (LLF) convened assisted in ensuring sound employer and employee relations within the district.
- Filling of vacant posts: A total number 39 vacant funded positions were filled to ensure sufficient human capital to assist the municipality with on-going operations and fast track service delivery.
- Medical Assessments and Vaccination programme for employees conducted
- Integrated Health, Wellness and Safety programmes for Employees and Councillors:
 These were conducted consistently.
- Cascading of performance to line managers

KPA 2: Basic Service Delivery and Infrastructure Development

- Monitoring and support of Funeral parlours: Routine inspections were conducted for funeral parlours and sanitation structures across the district to ensure compliance with standards. Provision of certificates of acceptability where applicable.
- Monitoring of compliance of both drinking water and wastewater quality: Water samples
 were taken to assess the quality of both drinking water as well as waste water to
 primarily improve the blue and green drop status.
- Completion of water project
- Provision of free basic services
- In respect to fire services and disaster management, the CHDM was able to respond to all incidents reported within the stipulated timeframes.

KPA 3: Local Economic Development (LED)

- Support has been provided for tree nurseries and afforestation projects at Intsika Yethu.
- Irrigation schemes were supported as per SLA with CHDA

KPA 4: Municipal Financial Viability and Management

 Compilation and approval of a funded Credible Budget to ensure effective cash flow management that will support the implementation of the SDBIP and improve its performance.

KPA 5: Good Governance and Public Participation

- Implementation of Risk Management Framework: The districts' risk management instruments remain strong in ensuring adherence to a clean administration and accountable governance.
- Various initiatives were undertaken during the year under review to improve risks associated with fraud and corruption.
- CHDM continues to excel in implementing mechanisms to strengthen the public participation function using both physical and virtual platforms
- The implementation of the Integrated Marketing and Communication strategy of the district immensely paved the way for effective engagement with all relevant stakeholders across the district.
- Review and approval of sector plans

3. SUMMARY ON THE DRAFT ANNUAL PERFORMANCE REPORT 2022/2023

The draft annual performance has been prepared per KPA for both levels of the SDBIP and is herein reflected below:

| | | TOP LAYE | R SDBIP | |
|----------|------------------|----------|-----------------|--------------|
| KPA | TOTAL INDICATORS | ACHIEVED | NOT ACHIEVED | PERC PER KPA |
| 1 – MTOD | 8 | 7 | 1 | 88% |
| 2 – SDI | 33 | 9 | 24 | 27% |
| 3 – LED | 8 | 5 | 3 | 63% |
| 4 – FMV | 10 | 8 | 2 | 80% |
| 5 – GGPP | 4 | 3 | 1 | 75% |
| TOTAL | 63 | 32 | 31 | 51% |

The SDI KPA in the Top Layer SDBIP was hit hard with 24 indicators reported as not achieved as against the 23 reported last year for reasons as reflected in below:

- There were some service providers whose services were terminated by the municipality owing to poor performance. The processes of termination is done in line with the requirements of contract management, which include amongst others notices to terminate; as well as starting with the procurement of other service providers to complete the affected project. This as well has caused other unforeseen delays in the completion of projects and ultimately the performance of the municipality
- Some projects were as well affected by the cashflow problems that were faced by service providers which remedial actions were discussed and agreed upon with the PMU and Project PSC's
- In some cases, the projects could not be completed as they were negatively affected by community unrests emanating from different service delivery expectations and demands from their respective municipalities and sector departments (electrification backlogs, roads infrastructure)

| | | OPERATION | AL SDBIP | |
|----------|------------|------------------|--------------|--------------|
| KPA | TOTAL | ACHIEVED | NOT ACHIEVED | |
| | INDICATORS | | | PERC PER KPA |
| 1 – MTOD | 18 | 15 | 3 | 83% |
| 2 – SDI | 17 | 17 | 0 | 100% |
| 3 – LED | 5 | 1 | 4 | 20% |
| 4 – FMV | 12 | 9 | 3 | 75% |
| 5 – GGPP | 68 | 52 | 16 | 76% |
| TOTAL | 120 | 94 | 26 | 78% |

In areas where the institution recorded a non-achievement of the indicator, reasons for non-achievement and corrective measures thereof have been included on indicators and some directorates had to make some adjustments after the internal audit to effect findings. Non-achieved indicators have been rolled-over for implementation in the 1st quarter of the next financial year (2023/2024 SDBIP) and will be reported on a monthly basis for close monitoring

Listings have as well been packaged and properly referenced.

Below is list of Indicator Codes, Indicator and Indicator Description that were implemented during the year under review. The descriptions are split per Key Performance Area using the following arrangement:

| KPA | CODE | Description |
|-----|------|---|
| 1 | MTOD | Municipal Transformation and Organisational |
| | | Development |
| 2 | SDI | Service Delivery Infrastructure |
| 3 | LED | Local Economic Development |
| 4 | FMV | Financial Management and Viability |
| 5 | GGPP | Good Governance and Public Participation |

4. PERFORMANCE REPORT - TOP LAYER SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN

| | CHRIS HANI DISTRICT MUNICIPALITY 1ST DRAFT ANNUAL PERFORMANCE REPORT - TOP LAYER SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN 2022/2023 FINANCIAL YEAR | | | | | | | | | | | | |
|-------------------------------|--|---|----------------|-------------------|--|--|---|--|--|---|-----------|--|--|
| | Measurable KPI Programme Comparison of Performance SDBIP Performance Reporting Annual Comparison of Performance SDBIP Performance Reporting Comparison of Performance SDBIP Performance SDBI | | | | | | | | | | | | |
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian | | |
| | | | | | NAL DEVELOPMENT | area Cuided by Belieid | Weight: | | livery of Complete | to Communities | | | |
| BRUA | | | EST | ibiish and iviain | | | | otimally Towards the De | | | | | |
| Integrated Human Resources | To Attract, Retain and Build a productive workforce | Number of Integrated Human Resource Management programmes implemented | MTOD - 1 | | 03 Integrated Human Resource Management Programmes implemented by 30 June 2022 | Refer to MTOD 1.1 - 1.4 for actual achievement | 03 Integrated Human Resource Management Programmes implemented by 30 June 2023 | Refer to MTOD 1.3 for actual performance | Refer to MTOD 1.3 for actual performance | Refer to MTOD 1.3 for actual performance | Corporate | | |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|--------------------------|---|----------------|---------------------|---|--|---|---|--|---|--------------------|
| Priority Area | Copedities | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Human Resource Management programme implemented | MTOD - 1.3 | | 01 Human Resource Management programmes implemented by 30 June 2022 | Refer to MTOD 1.3.1 to 1.3.4 for actual achievement | 01 Human Resource Management programmes implemented by 30 June 2023 | Refer to MTOD 1.3.1 to MTOD-1.3.2 for actual performance | Refer to MTOD 1.3.1 to MTOD- 1.3.2 for actual performance | Refer to MTOD 1.3.1 to MTOD- 1.3.2 for actual performance | Corporate Services |
| | | Number of Reviewed Staff Establishment approved by Council | MTOD1.3.1 | OPEX | 01 Reviewed Staff Establishment approved by Council by 30 June 2022 | Achieved. 01 Reviewed Staff Establishment approved by Council by 29 June 2022. Awareness with Directorates on the approved organisational structure facilitated & Consultation | 01 Reviewed Staff Establishment approved by Council by 30 June 2023 | Achieved: Awareness with Directorates on the approved organisational structure facilitated, Consultation directorates and organized labour on staff establishment, Consultation and | | | Corporate Services |

| | Measurable | KPI | | Programme | Comparison of | Performance | SDBIP Annual | Perfo | rmance Reporting | | |
|---|------------|---|----------------|----------------------|--|--|---|---|--|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of | | OPEX | 20 Vacant funded | with Directorates was conducted. There were delays in the consultation with labour in the 3rd quarter, it was conducted in the 4th quarter and relevant council structures and council for approval Achieved: 37 (5 in | 20 Vacant | submission of Draft establishment was facilitated, Approval of the staff establishment by Council. Achieved: 39 Vacant | Overachieveme | Adherence to | |
| | | vacant funded positions filled; employment Equity plan developed and Implemented | MTOD-1.3.2 | | positions filled and employment equity plan implemented by 30 June 2022 | Q1, 12 in Q2, 7 in Q3 and 13 in Q4) Vacant funded positions filled and employment equity plan implemented by 30 June 2022 | funded positions filled and employment equity plan implemented by 30 June 2023 | funded positions filled and employment equity plan (Q1 - 11, Q2 - 22 and 6 in the last quarter) implemented by 30 June 2023 | nt due to service delivery demands | the set target and considerations on review | Corporate Services |
| Integrated Wellness and Occupational | | Number of Integrated Health, Wellness and Occupational Health and Safety Programmes implemented | MTOD-2 | | 03 Integrated Health, Wellness and Occupational Health and Safety programmes implemented by 30 June 2022 | Refer to MTOD - 2.1 to 2.3 for actual achievement | 02 Integrated Wellness, Occupational Health and Safety programmes implemented by 30 June 2023 | Refer to MTOD - 2.1 for actual performance | Refer to MTOD - 2.1 for actual performance | Refer to MTOD - 2.1 for actual performance | Corporate Services |

| | Measurable | KPI | | Programme | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | ı | |
|------------------|---|--|----------------|----------------------|---|--|--|--|--|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Wellness programmes implemented | MTOD 2.1 | 150 000,00 | 01 Wellness programme implemented by 30 June 2022 | Achieved: 01 Wellness programme implemented (Change Management activity, Emotional Intelligence activity, Change management activity in Q3 and team activity plan in Q4) by 30 June 2022 | 01 Wellness programme implemented by 30 June 2023 | Achieved. 01 Wellness programme implemented (01 Change management activity and 1 teamwork activity implemented from the 11 October to 06 December 2022 for all departments, 1 emotional intelligence programme was implemented from the 14-17 February 2023) | | | Corporate Services |
| Asset Management | To ensure effective Maintenance of Municipal buildings. | % of works done in the construction of Chris Hani Village phase 1 | MTOD - 4 | R20 000 000,00 | 36% of works done in the construction of Chris Hani Village phase 1 by 30 June 2022 | Not Achieved. In the 1st 6 months of the financial year, the institution could not move with the implementation of the project owing to financial constraints. The Contractor could not resume on site due to institutional financial challenges. Q 3 and Q 4 have | Five (5) potential external funders consulted for the construction of CHDM Village by 30 June 2023 | Not Achieved. meeting was held on the 30th August 2022 for resuming of CHDM Village Phase One. Construction programme has been reviewed. Engagements with external funders were facilitated. Meeting has been held Daku Group Property | Potential Funders who are property developers have been consulted for financial assistance for construction of CHDM Village. | Continuous engagements with the potential funders who are property developers. No financial positive feedback has been received so far, some funders are still working on the | IPED |

| | Measurable | KPI | | Programme | Comparison of | Performance | SDBIP Annual | Perfo | rmance Reporting | | |
|---------------|---|--|----------------|----------------------|---|---|---|---|--|--|--------------------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | been reviewed due to budget constraints. The target was reviewed in the last financial year owing to financial constraints for implementation in the next financial year. Project has received a budget allocation of R20 million for 2022- 2023 FY | | Investors in February 2023. | | possible options that they can use to fund the construction of CHDM Village Office Park. | |
| | To provide effective ICT Services | Number of ICT Programmes Implemented | MTOD - 7 | 10 000 000,00 | 01 ICT programmes implemented by 30 June 2022 | Refer to MTOD 7.1 - 7.3 for actual achievement | 02 ICT programmes implemented by 30 June 2023 | Refer to MTOD - 7.1 | Refer to MTOD - 7.1 | Refer to MTOD - 7.1 | Corporat |
| ICT | | Number of E- government project implemented | MTOD - 7.1 | | 01 E-Government project implemented by 30 June 2022 | Achieved: 01 e- government project implemented (Analysis report has been developed and circulated to all directorates in the Q1, content management and | 01 E- Government project implemented by 30 June 2023 | Achieved: Procurement process facilitated. Implementation and monitoring of EDMS Project. Progress review meeting held on the 11 May 2023. Amended file plan on | | | Corporate Services |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|---|---|----------------|---------------------|---|--|---|--|--|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | user training conducted. Procurement of service providers for EDMS was facilitated | | the EDMS system according to the DD8 new national archives directive. Demonstrated new changes on the system. Developed a systems manual. Reviewed and amended project timelines. EDMS installed and functional. File plan developed on the system and systems manual produced | | | |
| Administrat | To ensure effective administration support and legal services | Number of Administratio n Support and Legal Services Programmes implemented | MTOD - 8 | 300 000,00 | 01 Administration Support and 01 Legal Services Programmes implemented by 30 June 2021 | Refer to MTOD - 8.1 to MTOD - 8.3 for actual achievement | 01 Administratio n Support and 01 Legal Services Programmes implemented by 30 June 2023 | Refer to MTOD 8.3.1 - 8.3.3 for actual achievement | Refer to MTOD 8.3.1 - 8.3.3 for actual achievement | Refer to MTOD 8.3.1 - 8.3.3 for actual achievement | Corporate Services |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | g | |
|-------------------|--------------------------|---|----------------|---------------------|---|--|---|--|--|---|-----------|
| Oca A viting in O | | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | % Response to requests for access to information received by the Municipality | MTOD - 8.3.1 | | 100% Response to requests for access to information coordinated by the Municipality by 30 June 2022 | Achieved: 100% Response to requests for access to information coordinated by the Municipality | 100% Response to requests for access to information coordinated by the Municipality by 30 June 2023 | Achieved. | | | SMS |
| | | % Response to all New Litigation Cases against the Municipality | MTOD - 8.3.2 | | Response to all New Litigation Cases against the Municipality by 30 June 2022 | Achieved: Response to all New Litigation Cases against the Municipality) | Response to all New Litigation Cases against the Municipality) by 30 June 2023 | Achieved. | | | SMS |
| | | Number of Litigation Awareness conducted | MTOD - 8.3.3 | OPEX | 3 Litigation Awareness conducted by 30 June 2022 | Achieved: 3 Litigation Awareness conducted (PAJA Mainstreaming & PAIA Mainstreaming, Legislative & Policy Development and Drafting of Contracts) | 3 Litigation Awareness conducted by 30 June 2023 | Achieved | | | SMS |

| ity Area | Measurable Objectives | KPI | Programme Budget Allocation | Comparison o Revised SDBIP Annual Target 2021/2022 | f Performance Actual Performance | SDBIP Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective | odian |
|----------|--------------------------|-----------------|-----------------------------------|--|------------------------------------|--|--|--|--|-------|
| Prior | | | Indic | | | | Achieved or under Achieved) | Acmevement | Action) | Custo |
| KPA | 2: BASIC SERVI | CE DELIVERY ANI | O INFRASTRUCTUR | RE DEVELOPMENT | | Weight: 50% | • | | | |

KPA 2: BASIC SERVICE DELIVERY AND INFRASTRUCTURE DEVELOPMENT

Weight: 20%

BROAD STRATEGIC OBJECTIVE 2: To ensure provision of Municipal Health, Environmental Management and Basic Services in a well-structured, efficient and integrated manner.

| | Measurable | KPI | | Programme | Comparison of | Performance | SDBIP | | | | |
|---------------|--|---|----------------|----------------------|--|---|---|---|---|---|-------------------------|
| Driority Area | | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target | | | | Custodian |
| IIWQ | To ensure Universal coverage of Water and Sanitation by 2030 | Number of households served with Quality basic water supply | SDI - 1 | R 90 119 994,00 | 6365 households served with Quality basic water supply by 30 June 2022 (Gqebenya water supply (ward 6, Emalahleni, 750h/h); Ncora Flats Kwa Mazola Matafeni water supply (ward 17, Intsika Yethu 931 h/h), Gubenxa village internal water supply (ward | Refer to SDI 1.1 - 1.7 for actual achievement | 7 027 households served with Quality basic water supply by 30 June 2023 | Refer to SDI 1.1 - 1.7 for actual achievement | Refer to SDI 1.1 - 1.7 for actual achievement | Refer to SDI 1.1 - 1.7 for actual achievement | Engineering & Technical |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | f Performance | SDBIP Annual | Perfo | ormance Reporting | I | |
|---------------|--------------------------|-----|----------------|---------------------|--|-----------------------|---------------------|--|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | 20, Engcobo, 454 h/h; Mtshabe water supply (ward 10, Intsika Yethu, 36 h/h); Lixeni /ncityana/ kumbeke village water supply (ward 20 Engcobo, 64 h/h); Kumbeke village water supply (ward 20, Engcobo, 138 h/h); Luthuthu water supply, (Ward 2, Emalahleni 247 h/h; | | | | | | |

| | Measurable Objectives | KPI | | Programme | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | g | |
|---------------|--------------------------|-----|----------------|----------------------|---|-----------------------|------------------|--|--|---|-----------|
| Priority Area | | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | water backlog scheme 3 phase 1C (Ward 17, Emalahleni, 735 h/h); Water backlog scheme 3: Phase 1D (Ward 20, Emalahleni 553 h/h) Water backlog Gubenxe, magongoeshoek, polar park water supply (ward1, 2 Sakhisizwe; 1390 h/h); Gasini A Water supply (ward 10 Intsika Yethu 49 h/h); Lalini Nkwenkwezi water supply(Ward 12, Engcobo 387 h/h) Lokshini phase 3 water supply (Ward 13, Engcobo 220 h/h); (Hewu RA 60 phase hh136), Emqonci village reticulation 22hh. | | | | | | |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | J | |
|---------------|--------------------------|-----|----------------|---------------------|---|-----------------------|------------------|--|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | Lokshini village water supply phase 2 (ward 13, Engcobo, 189h/h); Clarkebury water supply (ward 16, Engcobo, 161 hh); Water supply sudwana water supply (ward 13, Engcobo, 201 hh); Lalini Nkwenkwezi water supply (Ward 12, Engcobo 236 h/h), Lokshini phase 3 water supply (Ward 13, Engcobo 112 h/h), Mntuntloni B 145hh, Bhodini Phase 2 water supplyh/h) | | | | | | |

| | Measurable | KPI | | Programme | Comparison o | of Performance | SDBIP | Perfo | ormance Reporting | ı | |
|---------------|------------|-----|----------------|----------------------|---|-----------------------|--|---|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | SDI 1.1. | | | | 2113 households served with Quality basic water supply by 30 June 2023 | Not achieved 1. Gqebenya water supply(ward 6, Emalahleni, 750h/h); practical completion. Completion and consent pending 2. Water backlog scheme 3 phase 1C (Ward 17, Emalahleni, 735h/h) construction progress 85%. 3. Bhodini Phase 2 PART 2 water supply ward 7, 67h/h); construction 40% 4. Bhodini Phase 2 Part 1 ward 7 107h/h Construction 92% | 1. Practical completion done on the 30 September 2022 contractor completed all snag completion done 9 December 2022. Consent letter still pending 2. Hydraulic testing, equipping two pumpstation, connection to Sikhungwini pumping main line 3. Contract only commenced in May and contractor needs to work and spend to achieve target. 4.Contractor still finalising testing | 1) Practical completion done on the 30 September 2022 contractor completed all snag completion done 9 December 2022. Consent letter still pending. Meeting scheduled 11July 2023 with community regarding project to try get consent processed. Meeting scheduled 11 July 2023 as per request of the ward councillor to address community concern of some taps not receiving water. | |

| | Measurable | KPI | | Programme | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | 9 | |
|---------------|------------|-----|----------------|----------------------|---|-----------------------|------------------|--|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | | | The purpose to resolve matters and get consent letter issued. The contractor will go back to site and do remedial work. WSP to also ensure that fuel delivery is enhanced and also eskom connection is being followed up. 2. Work ceded to sub contractor and VO needs be finalised 3.Smme subcontractor appointed to assist in getting work completed . 4.Penalties shall be applied | |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|--------------------------|-----|----------------|---------------------|---|-----------------------|---|--|--|--|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | SDI - 1.2 | | | | 1 208 households served with Quality basic water supply by 30 June 2023 | Not achieved 1) Lixeni ncityana kumbeke water supply consent letter still pending. 2.Ncora Flats Kwa Mazola Matafeni water supply (ward 17, Intsika Yethu 931 h/h) Contract terminated PSP progress 57%. 3.Clarkebury water supply (ward 16, Engcobo, 220 hh) construction | 1) Water supply still not available for consent to be issued. Water supply still not available for consent to be issued due to the water treatment works that must supply water not energised due to community village not having electrification and not allowing the 22kv line to be energised that must supply eskom power to allow wtw to produce water for the village 2. Pressure testing repair reservoir in stalling valves, | 1) Engagements have taken place trying to address electrical supply but still not resolved. Engag ements with local communities, Local Municiplaity, CHDM and other stakeholders have taken place to resolve the energising of power supply. Council approved budget to assist Dr AB Xuma with electrification of the village to allow the project to continue. 2. Contractor to | |

| | Measurable Objectives | KPI | | Programme Budget | Comparison o | f Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|--------------------------|-----|----------------|---------------------|---|-----------------------|------------------|--|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | | repair standpipe splash pads. | complete remaining items water cart be on site beginning july to assist testing. Contractor to also work weekends and provide program work 3. Improvement was seen when termination was issued and the client then allowed contractor to continue. Work almost practical complete Practical completion will be confirmed by 11July 2023 | |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | ı | |
|---------------|--------------------------|-----|----------------|---------------------|---|-----------------------|--|--|---|--|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | SDI 1.3 | | | | households served with Quality basic water supply by 30 June 2023 | Not achieved. Kumbeke village water supply (ward 20, Engcobo, 138 h/h); achieved, completion achieved consent received. Targets not achieved 2. Water supply sundwana water supply (ward 13, Engcobo, 201 hh) Construction 80% 3. Qwebe-Qwebe ward 12 Engcobo, 366h/h construction 98% | 1.n/a. 2. Subontractor still busy with taps chambers and testing still being finalised .SMME still busy with valve chambers. Challenge they are faced with is purchasing of materials. Installation of valve chambers affects the contractor's ability to do all the testing of pipelines. 3. Contractor still busy with testing chamber slabs, cleaning site, testing spring. Contractor has completed the original scope but is still doing | 1.n/a 2. All chamber and tap material has been purchased via cessions 3.Contractor to close out remaining 2 % work | |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|--------------------------|-----|----------------|---------------------|---|-----------------------|--|---|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | | the pipeline testing and chambers. | | |
| | | | SDI 1.4 | | | | households served with Quality basic water supply by 30 June 2023 | Not achieved. 1. Luthuthu water supply, (Ward 2, Emalahleni 170 h/h; Practical completion 2. Lokshini phase 3 water supply (Ward 13, Engcobo 112 h/h), practical completion signed 3. Eluhweni water supply ward 5 Engcobo, 484 h/h construction 80% | 1. Community has issue at Mdeni pumpstation, Completion certificate still pending. Community was not allowing access to the pumpstation which serves a a backup source. 2.Contractor to sort snags as per practical completion certificate. 3. Contractor has cashflow challenges | 1. CHDM to intervene in addressing commiunity of mdeni with regards to pumstaion access. CHDM to intervene in resolving the community not allowing access to pumpstation by getting ISD, Councillors and local leaders. The municipality to arrange a suitable date and confirm the meeting. 2. Contractor to complete snags so that completion can be issued. | |

| | Measurable | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|------------|-----|----------------|---------------------|---|-----------------------|---|---|---|--|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | | | 3. One SMME's is assisting the main contractor to finish the project. Weekly meetings to monitor the progress on site. | |
| | | | SDI 1.5 | | | | 870 households served with Quality basic water supply by 30 June 2023 | Not achieved: 1.water backlog scheme 3: Phase 1D (Ward 20, Emalahleni 553 h/h) complete no water ;2.Water backlog Gubenxa, maxongoeshoek polar park water supply (ward 1 and 2 Sakhisizwe; 251 h/h);Awarded 3. Mgababa water supply Intsika Yethu ward 18, 66 h/h. complete | 1. 1. Lubisi wtw pumps not functional to supply water to verify leaks are repaired 2. Project was terminated 3. n/a | 1. 1. CHDM currently repairing pumps at Lubisi wtw . Anticipate completion mid July 2023. 2. Contractor appointed in June 2023 3.n/a | |
| | | | SDI 1.6 | | | | households served with Quality basic | Not achieved. Lokshini village water supply phase 2 (ward 13, Engcobo, | During testing vj couplings and valves not fitted | SMME fixing all pipe fitting challenges | |

| | Measurable | Measurable KPI Objectives | | | Performance | SDBIP Annual | Perfo | ormance Reporting | | | |
|---------------|------------|------------------------------|----------------|------------|---|-----------------------|---|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | water supply by 30 June 2023 | 189h/h). Construction 95% | correctly affecting testing | | |
| | | | SDI 1.7 | | | | 1 010 households served with Quality basic water supply by 30 June 2023 | Not achieved. 1. Lalini Nkwenkwezi water supply (Ward 12, Engcobo 294 h/h) Terminated and rescinded. 2. Ngqoki water supply Engcobo ward 15, 716h/h, construction 95% | Project was terminated and contractor requested rescinding of termination Contractor slow progress and low cashflow. Contractor speed up on remaining works | 1. Rescinding letter received and contractor requested to provide BoQ of work of cedent, action plan complete works in the 3 months requested 2.contractor speed up on remaining and has improved | |
| | | | SDI - 1.8 | | | | 304 households served with Quality basic water supply by 30 June 2023 | Not achieved. 1. Mntuntloni B ward 12 Engcobo 145hh, Practical and completion certificate signed but no water, Terminated and rescinded 2. Qoloweni water supply (Intsika Yethu Ward 19, 159h/h) not | 1. Practical and completion certificate signed. Challenge is water supply await supply from bulk phase 2. Contractor slow progress and low cashflow. | | |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|--------------------------|---|----------------|---------------------|--|---|--|---|--|--|-------------------------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | achieved. Construction 95 % | Contractor speed up on remaining works | | |
| | | Number of Water reticulation projects completed | SDI-2 | | | | 19 Water reticulation projects completed by 30 June 2023 | Refer to SDI 2.1 - 2.7 for actual achievement | Refer to SDI 2.1 - 2.7 for actual achievement | Refer to SDI 2.1 - 2.7 for actual achievement | Services |
| PMU | | | SDI 2.1 | | 04 Water reticulation projects completed by 30 June 2022 | Not achieved only 2 water projects completed Namely 1) Mtshabe water supply (ward 10, Intsika Yethu, 36 h/h); 2) Gasini A Water supply (ward 10 Intsika Yethu 49 h/h); Water projects not achieved: | 04 Water reticulation projects completed by 30 June 2023 | Not achieved 1. Gqebenya water supply(ward 6, Emalahleni, 750h/h) Target not achieved. practical complete. Completion and consent pending 2.water backlog scheme 3 phase 1C (Ward 17, | 1. Practical completion done on the 30 September 2022 contractor completed all snag completion done 9 December 2022. Consent letter still pending 2. Hydraulic | 1) Practical completion done on the 30 September 2022 contractor completed all snag completion done 9 December 2022. Consent letter still pending. Meeting | Engineering & Technical |

| | Measurable | KPI | | Programme | Comparison of | Performance | SDBIP | Perfo | ormance Reporting | <u> </u> | |
|---------------|------------|------------------|---------|----------------------|---|--|---|---|---|---|-----------|
| Priority Area | Objectives | , ludicator Code | | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | 3) Gqebenya water supply(ward 6, Emalahleni, 750h/h); construction 4)Lokshini village water supply phase 2(ward 13, Engcobo, 112h/h); construction 81% | | Emalahleni, 735 h/h) construction progress 85%. 3. Bhodini Phase 2 PART 2 water supply ward 7, 67h/h);construction 40% 4. Bhodini Phase 2 Part 1 ward 7 107h/h Construction 92% | testing, equipping two pumpstation, connection to Sikhungwini pumping main line 3. Contract only commenced in May and contractor needs to work and spend to achieve target. 4.Contractor still finalising testing | scheduled 11July 2023 with community regarding project to try get consent processed 2. Work ceded to sub contractor and VO needs be finalised 3.SMME subcontractor appointed to assist in getting work completed . 4.Penalties shall be applied | |
| | | | SDI 2.2 | | 05 Water reticulation projects completed by 30 June 2022 | Not achieved 1) Lixeni /ncityana/ kumbeke village water supply(ward 20 Engcobo, 64 h/h) complete no consent letter; 2) | 2 Water reticulation projects completed by 30 June 2023 | Not achieved. 1. Ncora Flats Kwa Mazola Matafeni water supply (ward 17, Intsika Yethu 931 h/h) 2.Clarkebury water | Pressure testing repair reservoir in stalling valves, repair standpipe splash pads Work was not | Contractor to complete remaining items water cart be on site beginning July to assist testing. | |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|--------------------------|-----|----------------|---------------------|---|---|---|---|---|--|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | Clarkebury water supply (ward 16, Engcobo, 161 hh) construction 66%; 3) Lalini Nkwenkwezi water supply (Ward 12, Engcobo 161 h/h) construction 83% 4) Ncora Flats Kwa Mazola Matafeni water supply(ward 17, Intsika Yethu 931 h/h) construction 98,2% | | supply (ward 16, Engcobo, 220 hh) construction | completed as per due completion date due to slow progress by both contractor and SMME. Finalisation of testing, M&E, borehole access road, package plant, disinfection. | Contractor to also work weekends and provide program work 2. Improvement was seen when termination was issued and the client then allowed contractor to continue. Work almost practical complete Practical completion will be confirmed by 11July 2023 | |
| | | | SDI 2.3 | | 05 Water reticulation projects completed by 30 June 2022 | Not Achieved 1) Gubenxa village internal water supply (ward 20, Engcobo, 454 h/h, 2) Kumbeke village water supply (ward 20, Engcobo, 138 h/h) complete | 2 Water reticulation projects completed by 30 June 2023 | Not achieved. 1. Qwebe-Qwebe ward 12 Engcobo, 366h/h, construction. 2. Water supply sundwana water supply (ward 13, Engcobo, 201 hh) Construction 80% | Contractor still busy with testing chamber slabs, cleaning site, testing spring Subontractor still busy with taps chambers | 1. Contractor to close out remaining 2 % work 2. All chamber and tap material has been purchased via cessions | |

| | Measurable Objectives | KPI | | Programme | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | l | |
|---------------|--------------------------|-----|----------------|----------------------|---|---|---|---|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | 3) Water supply sudwana water supply (ward 13, Engcobo, 201 hh) construction 4) Lokshini phase 3 water supply (Ward 13, Engcobo 142 h/h) construction 80% | | | and testing still being finalised | | |
| | | | SDI 2.4 | | 3 Water reticulation projects completed by 30 June 2022 | Not achieved 1) Luthuthu water supply,(Ward 2, Emalahleni 247h/h; construction 90% 2) Emqonci village reticulation 22hh. practical complete completion pending 3) Mntuntloni B 145hh, 4) Bhodini Phase 2 water supply 192h/h), complete 5) Target achieved Hewu RA 60 phase hh136) complete | 3 Water reticulation projects completed by 30 June 2023 | Not achieved. 1. Luthuthu water supply, (Ward 2, Emalahleni 170 h/h; Practical completion 2. Lokshini phase 3 water supply (Ward 13, Engcobo 112 h/h), practical completion signed 3. Eluhweni water supply ward 5 Engcobo, 484 h/h construction 80% | 1. Community has issue at Mdeni pumpstation, Completion certificate still pending 2. Contractor to sort snags as per practical completion certificate. 3. Contractor has cashflow challenges | 1. CHDM to intervene in addressing community of Mdeni with regards to pumpstation access 2. Contractor to complete snags so that completion can be issued. 3. One SMME's is assisting the main contractor to finish the project. Weekly meetings to | |

| | Measurable | KPI | Programme Budget | | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | ı | |
|---------------|------------|-----|---------------------|------------|---|---|---|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | | | monitor the progress on site. | |
| | | | SDI 2.5 | | 01 Water reticulation projects completed by 30 June 2022 | Not achieved Construction on hold | 3 Water reticulation projects completed by 30 June 2023 | Not achieved: 1. Water backlog scheme 3: Phase 1D (Ward 17, Emalahleni 553 h/h) complete no water; 2. Water backlog Gubenxa, maxongoeshoek polar park water supply (ward 1 and 2 Sakhisizwe; 251 h/h); Awarded 3. Magababa water supply Intsika Yethu ward 18, 66 h/h. complete | 1. 1. Lubisi wtw pumps not functional to supply water to verify leaks are repaired 2. Project was terminated 3. n/a | 1. 1. CHDM currently repairing pumps at Lubisi wtw . Anticipate completion mid July 2023. 2. Contractor appointed in June 2023 3. n/a | |
| | | | SDI 2.6 | | | | 1 Water reticulation projects completed by 30 June 2023 | Not achieved. Lokshini village water supply phase 2 (ward 13, Engcobo, 189h/h). Construction 95% | During testing vj couplings and valves not fitted correctly affecting testing | SMME fixing all pipe fitting challenges | |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | l | |
|---------------|--------------------------|-----|----------------|---------------------|---|-----------------------|--|---|---|--|-----------------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | SDI 2.7 | | | | 02 Water reticulation projects completed by 30 June 2023 | Not achieved. 1. Latini Nkwenkwezi water supply (Ward 12, Engcobo 294 h/h) Terminated and rescinded. 2. Ngqoki water supply Engcobo ward 15, 716h/h, construction 95% | 1. Project was terminated and contractor requested rescinding of termination 2. Contractor slow progress and low cashflow. Contractor speed up on remaining works | 1. Rescinding letter received and contractor requested to provide BoQ of work of cedent, action plan complete works in the 3 months requested 2. Contractor speed up on remaining and has improved | |
| | | | SDI 2.8 | | - | - | 03 Water reticulation projects completed by 30 June 2023 | Not achieved. 1. Mntuntloni B ward 12 Engcobo 145hh. Practical and completion certificate signed but no water 2. Qoloweni water supply Intsika Yethu Ward 19, 159 hh) Construction 72% | 1. Practical and completion certificate signed. Challenge is water supply await supply from bulk phase. 2. Contractor deal with testing and outstanding | 1. Phase 1 and phase 3 bulk contracts in construction planned completion end November by when water will be at Mntuntloni that be fed from Ncora wtw | Engineering and |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|--------------------------|--|----------------|---------------------|--|---|---|---|---|---|--------------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | | works. SMME still rectify washed away trenches and testing | 2. Material and resources on site contractor and SMME to finalise testing repair to washed away trenches. Contractor submit extension of time claim for consideration | |
| | | Number of Bulk water supply projects completed | SDI-3 | R 110 600 000,00 | 03 Bulk water supply projects completed by 30 June 2022 | Refer to SDI 3.1 - 3.2 for actual achievement | 8 Bulk water supply projects completed by 30 June 2023 | Refer to SDI 3.1 - 3.2 for actual achievement | Refer to SDI 3.1 - 3.2 for actual achievement | Refer to SDI 3.1 - 3.2 for actual achievement | Serv |
| PMU | | | SDI 3.1 | | 02 Bulk water supply projects completed by 30 June 2022 | Not achieved 1) Water backlog Kumbeke/ Hlophekazi practical completion pending. 2) water backlog supply Ngxumza to | 03 Bulk water supply projects completed by 30 June 2023 | Not achieved. 1 Hewu water supply Phase 8. Construction 75% 2.Water backlog Phase 3 western bulk distribution. 3 water backlog | Hard rock affecting progress Contractor still to complete valve chambers and crossings. Being delayed | PSP raised concern that pecker taking to long contractor look at option of chemical blasting It agreed in | Engin & Tech |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | rmance Reporting | | |
|---------------|--------------------------|-----|----------------|---------------------|---|--------------------------|---|---|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | east construction 88% | | Kumbeke/ Hlophekazi. Target achieved. practical signed 30 September 2022 completion signed 7 December 2022 | by SMME. 3.n/a | meeting between parties that main contractor take over works . 3.n/a | |
| | | | SDI - 3.2 | | | | 2 Bulk water supply projects completed by 30 June 2023 | Not achieved 1. water backlog water supply Ngxumza to East. Not achieved contract terminated and turnkey appointed progress 35% Based on turnkey appointment 2. Hewu water supply phase 10 construction 54% | 1. Contractor liquidated Refer to termination letter 2. Subconctracto r doing bse of reservoir complete now main contractor commenced reservoir | 1. Contract terminated PSP appointed on turnkey and contractor appointed and commenced work at 35% first site meeting be in July 2023. Original contract terminated and the new contractor appointed under the turnkey to complete remaining balance of works Plan to | |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | 9 | |
|---------------|--------------------------|-----|----------------|---------------------|---|-----------------------|---------------------|--|--|--|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | | | complete end August 2023 2. Subcontractor doing base now finally complete and main contractor can now erect reservoir. Main contractor to assist subcontractors. EOT claim to be processed by CHDM | |
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| | Measurable | KPI | | Programme | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|------------|--|----------------|----------------------|--|---|--|--|--|---|-------------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | 3 Bulk water supply projects completed by 30 June 2023 | Not Achieved. 1. Water backlog water supply 3d and 4. Not achieved Construction 95% New contractor 89% 2. Lokshini Sitholeni . Not achieved, construction 90% 3. Northern scheme Sikhungwini to Ngxumza Target not achieved construction 98% | 1. Contractor still busy with pipeline, booster pump stations, earth berms and pipe markers, reservoirs 2. Contractor to complete snags as per the practical completion certificate 3. Contractor still busy with valves slabs, pipeline markers and pressure testing, | 1. Contractor to close out remaining 5% of work 2. Contractor finalise snags that completion certificate can be issued 3. Contractor to close out the remaining 2% Off work | |
| PMU | | Number of Water Treatment works upgraded | SDI - 5 | R12104672, 31 | 02 Water Treatment works Completed by 30 June 2022 | Not achieved 1 wtw completed namely 1) Middelburg wtw 2) Tsomo wtw only achieved practical completion | 02 Water Treatment works upgraded by 30 June 2023 | Not achieved. 1. Tsomo wtw contractor taken off site. 2. Molteno wtw work suspended | Contractor taken off site and psp completing works. Rock affecting realigning of | Contractor source a blaster Pump set be dismantled and reassembled inspect all elements. The | Engineering |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | 1 | |
|---------------|--------------------------|--|----------------|---------------------|---|--|---|--|---|---|------------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | | sewer pipeline. The high lift pump. Pump set 1 has mechanical issues. Sealing concrete structures still leaking. 2.Work suspended due psp payment | leaking of structures referred back to professor as what they proposed not solving leaks. 2. CHDM process some claims in May as funding approved. PSP still not returned. Court instructed that CHDM can source new PSP. RFQ issued await appointment new psp | |
| PMU | | Number of households served with safe basic sanitation | 9 - IQS | | 2 270 households served with safe basic sanitation by 30 June 2022 | Not Achieved. 2 310 households served with safe basic sanitation by 30 June 2022 | 2 111 households served with safe basic sanitation by 30 June 2023 | Refer to SDI 6.1 - 6.4 for actual achievement | Refer to SDI 6.1 - 6.4 for actual achievement | Refer to SDI 6.1 - 6.4 for actual achievement | Engineerin |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|--------------------------|-----|----------------|---------------------|---|---|--|--|--|---|-----------|
| Priority Area | | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | SDI 6.1 | | 664 Households served with safe basic sanitation by 30 June 2022 | Not Achieved. 50 toilets signed off end June 2022. Late commencement work only commenced end May 2022. PSP appointed 9 MAY, contractor health and safety file were approved on 15th June 2022 resulted to delays on completion, remainder as expected July 2022 | 1 251 Households served with safe basic sanitation by 30 June 2023 | Achieved: Emalahleni ward 13 482 hl. Emalahleni W2 769 | | | |
| | | | SDI 6.2 | | 588 Households served with safe basic sanitation by 30 June 2022 | Achieved Intsika Yethu Sanitation ward 1, 14, 15 & 18 Phase 2 - 2 134h/h | 180 Households served with safe basic sanitation by 30 June 2023 | Achieved. Intsika Yethu 180 hh | | | |
| | | | SDI 6.3 | | 664 Households served with safe basic sanitation by 30 June 2022 | Not achieved 126 happy letters signed off | 366 Households served with safe basic | Not achieved. Sakhisizwe 342h/h | Target incorrectly set | The Engineering and pms Departement need to confirm both the values | |

| | Measurable | KPI | | Programme | Comparison of | Performance | SDBIP | Perfo | ormance Reporting | 9 | |
|---------------|------------|-----|----------------|----------------------|---|---|--|--|--|--|-----------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | sanitation by 30 June 2023 | | | before adjusting to avoid calculation error. Confirmation by both engineering and PMS in validating information to be done when adjustments are undertaken in financial year | |
| | | | SDI 6.4 | | 354 Households served with safe basic sanitation by 30 June 2022 | Not achieved 0 toilets signed off end June 2022. Late commencement work only commenced end May 2022. PSP appointed 9 MAY, contractor health and safety file were approved on 13th June 2022 resulted to delays on completion. | 314 Households served with safe basic sanitation by 30 June 2023 | Achieved: 1. Enoch sanitation 201 hl. 2. Engcobo sanitation 113 hl. Total 314 hl | | | |

| | Measurable | KPI | | Programme | Comparison o | f Performance | SDBIP | Perfe | ormance Reporting | J | |
|---------------|------------|---|----------------|----------------------|---|---|--|--|---|--|--|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| PMU | | Number of Waste Water Treatment works completed | 7 - IQS | 49 366 000,00 | 01 Waste Water Treatment Works Completed by 30 June 2022 | Not Achieved - Contract was terminated, rescinded and to recommence. The contract was terminated in March 2022. On 28 April 2022 site visit meeting was held on site to list site challenges. Contractor requested rescinding in May of termination and in June CHDM retracted termination. Letter of Termination of contract was rescinded and the subcontractor who worked ceded to and is on site preparing their compliance documentation and re-establishment on | 02 Waste Water Treatment Works Completed by 30 June 2023 | Not achieved. 1.Cala waste water treatment works: Construction suspended. 2 Tsomo wwtw construction 86% | 1. Approval of indirect fees, Approval of variation orders number 1 and 2 required. 2. Variations not yet approved will create challenges tat contractor will not be paid and will further affect contractor cashflow and could end up stopping work 1. Approval of indirect indirections and indirections and indirections and indirections are indirections. | 1. CHDM to finalise the approvals of the fees and variation orders that work may proceed. 2. CHDM needs to finalise approval of Vos. Main contractor The Contractor to take decision regarding the electrical subcontractor getting equipment to site. If they not then option of getting another contractor to install. Work needs be coordinated with mechanical to avoid standing time. | Director: Engineering and Technical Services |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting |] | |
|---------------|--|--------------------------------|----------------|---------------------|---|---|--|--|--|---|-----------------------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | site for them to proceed with the works | | | | | |
| WSA | To ensure universal coverage of water and sanitation by 2030 | % reduction of Water losses | 8- IQS | OPEX | 10% reduction of Water losses by 30 June 2022 | Not Achieved 10% reduction of Water losses by 30 June 2022. Water Balance calculations information not complete. Budget constraints. Water Balancing calculations done inhouse. | 10% reduction of Water losses by 30 June 2023 | Achieved 10% reduction of Water losses by 30 June 2023 | | | Engin & Tech Services |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|--|---|----------------|---------------------|---|-----------------------|---|--|--|---|-----------|
| Priority Area | 00,000,1100 | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| PMU | To ensure universal coverage of water and sanitation by 2030 | Number of waste water projects completed | SDI - 12 | R7995975,8 6 | | | 1 Waste water projects (New Rathwick bulk services - Phase 4) completed by 30 June 2023 | Not achieved work suspended | 1.Insufficienct funding. 2. Work still suspended as October 2023 | 1. Meeting with CoGTA to finalise funding registration approval scheduled for January but postponed for February. 2. Numerous emails between parties trying to address consultant returning to project but not successful in the month of January | |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|-------------------|---|---|----------------|---------------------|--|--|---|--|--|--|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| HUMAN SETTLEMENTS | To facilitate implementatio n of Human Settlements programmes | Number of human settlement programmes implemented | SDI - 13 | R2 000 000 | 6 houses for destitute beneficiaries constructed in all 6 local municipality by 30 June 2022 | Not achieved - Engineer has not yet been appointed. Construction will commence after the designs have been developed by the appointed engineer and approved for construction. The Notice for the appointment of the engineer has been advertised on the 1st of July 2022. 6 houses for destitute beneficiaries will be constructed in all 6 local municipality by 30 June 2023 | 01 Human Settlements programme implemented by 30 June 2023 | Not Achieved | The contractor for construction of houses has not been appointed through SCM processes and the construction of houses for destitute beneficiaries has not commenced on site. (Delays on procurement) | Due to delays on appointment of the Engineer for the destitute programme for 2022-2023, the construction work could not commence on site. The destitute programme will then be deferred to 2023-2024 FY. | IPED |

| | Measurable | KPI | | Programme | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | ı | |
|---------------------------|---|--|----------------|----------------------|---|--|---|--|--|---|------------------------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| Municipal Health Services | To provide municipal health services in accordance with relevant legislations | % Wastewater quality compliance in accordance with Regulations 991 and section 39 of National Water Act 36 of 1998 as amended for compliance | SDI - 14 | R 420 000 | 100% Wastewater quality compliance in accordance with Regulations 991 and section 39 of National Water Act 36 of 1998 as amended monitored for compliance by 30 June 2022 | Achieved. 36.76% Wastewater quality compliance in accordance with Regulations 991 and section 39 of National Water Act 36 of 1998 as amended monitored for compliance. | 100% Wastewater quality compliance in accordance with Regulations 991 and section 39 of National Water Act 36 of 1998 as amended monitored for compliance by 30 June 2023 | Achieved, 122 Wastewater samples were taken and analysed for compliance in accordance with Regulations 991 and section 39 of National Water Act 36 of 1998 as amended. Out of the 122 Wastewater samples taken, the annual average compliance rate is 63.96 % due non- compliance to certain parameters. | | | Health & Comm Services |
| Munic | | % of Drinking Water Compliance to SANS 241 monitored | SDI - 15 | R500 000 | 100% of Drinking Water Compliance in line with SANS 241 monitored by 30 June 2022 | Achieved. 98.02% of Drinking Water Compliance to SANS 241 monitored. | 100% of Drinking Water Compliance in line with SANS 241 monitored by 30 June 2023 | Achieved. 100% of Drinking Water compliance monitored. 2198 water samples were taken and 25 did not comply, however, after resampling all samples complied. Therefore, the actual annual compliance for | | | Health & Comm Services |

| | Measurable Objectives | KPI | | Programme | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | 1 | |
|-------------------|--|--|----------------|----------------------|--|--|--|--|--|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | drinking water was 98.9%. | | | |
| Management | To ensure effects of disaster and fire are prevented or minimised | Number of Disaster Risk Management and District Fire Services Programmes implemented as per DMP & DFSP | SDI-17 | OPEX | 01 Disaster Risk Management and 01 District Fire Services Programmes implemented as per DMP & DFSP by 30 June 2021 | Refer to SDI 17.1.1 - 17.1.3 for actual achievement | 01 Disaster Risk Management and 01 District Fire Services Programmes implemented as per DMP & DFSP by 30 June 2023 | Refer to SDI 17.1.1 - 17.1.3 for actual achievement | Refer to SDI 17.1.1 - 17.1.3 for actual achievement | Refer to SDI 17.1.1 - 17.1.3 for actual achievement | Health & Comm Serv |
| Disaster and Fire | | Number of Disaster Risk Management Programmes implemented as per DMP | SDI-17.1 | OPEX | 01 Disaster Risk Management Programmes implemented as per DMP by 30 June 2021 | Refer to SDI 17.1.1 - 17.1.3 for actual achievement | 01 Disaster Risk Management Programmes implemented as per DMP by 30 June 2023 | Refer to SDI 17.1.1 - 17.1.3 for actual achievement | Refer to SDI 17.1.1 - 17.1.3 for actual achievement | Refer to SDI 17.1.1 - 17.1.3 for actual achievement | Health & Comm |
| | | % Response to disaster management | SDI- | OPEX | 100% response to disaster management | Achieved. 100% response to disaster | 100% response to disaster | Achieved. 100% response to disaster reported. | | | Healt |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting |] | |
|--------------------------------|---|--|----------------|---------------------|---|--|---|--|---|---|-------------------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | incidents reported | | | incidents reported by 30 June 2022 | management incidents reported. | management incidents reported by 30 June 2023 | | | | |
| | | % of Disaster stricken Households assisted with relief and recovery material | SDI-17.1.2 | R2 430 000.00 | 100 % Disaster Stricken Households assisted with relief and recovery material by 30 June 2022 | Achieved. 100% Disaster Stricken Households assisted. | 100% Disaster Stricken Households assisted with relief and recovery material by 30 June 2023 | Achieved. 100% Disaster Stricken Households assisted with relief and recovery material | | | Health & Comm |
| Free Basic Support Services | To ensure provision of basic services to indigent communities | % indigent households with access to free basic services | SDI-19 | | | | 7% of indigent households with access to free basic services by 30 June 2023 | Achieved. | The reasons for the over achievement on the 7%, PMS indicated that the National KPI was 7%. Based on that premise the KPI was then set to be | | Budget & Treasury |

| | Measurable Objectives | KPI | | Programme Budget | Comparison o | f Performance | SDBIP Annual | Perfe | ormance Reporting | | |
|---------------|--------------------------|--------------|----------------|---------------------|---|-----------------------|------------------|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | | 7%. The total indigent registers are based on the local municipality's information and therefore, the achievement was based on the list with each consumer to arrive to the 100%. Given that this information was provided correctly that the 7% was a minimum, the municipality would have revised the target upwards. | | |
| KDA | 3-1 OCAL ECON | OMIC DEVELOP | MENI | <u> </u> | | | | Weight: 20% | target apwards. | | |

BROAD STRATEGIC OBJECTIVE 3: To ensure development and implementation of regional economic strategies and effective Spatial Planning and Land Use Management approaches as drivers for economies of scale and social cohesion.

| | Measurable | KPI | | Programme | Comparison of | Performance | SDBIP | Perfo | ormance Reporting | ı | |
|------------------|--|--|----------------|-----------------------------------|---|--|---|---|---|---|-----------------------------------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| Priority Area | Measurable Objectives | KPI | Indicator Code | Programme Budget Allocation | Comparison of Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | variance Reporting Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | C u st o di a n |
| SPATIAL PLANNING | To ensure provision for the inclusive, developmental, equitable and efficient spatial planning by 2030 | Number of spatial planning programme implemented as per SPLUMA | LED-1 | R500 000 | 01 Spatial Planning programme implemented as per SPLUMA by 30 June 2022 | Achieved. 05 Tribunal set for the year 2021-2022 (01st September 2021, 02 Dec 2021, 10th February 2022 and the 02 June 2022) and applications were processed accordingly and approved. | 01 Spatial Planning programme implemented as per SPLUMA by 30 June 2023 | Achieved. Tribunal Members appointment Facilitated and appointed by Council. There was actual sitting for applications consideration as there we no applications to consider however Tribunal set as part of Induction. Tribunal Set on the 01 June 2023. | | | SMS |
| Agricu Itural | To Contribute to economic development and growth in | Number of Agriculture programmes implemented | LED -3 | R5 150 000 | 04 Agriculture Programmes implemented by 30 June 2022 | Refer to LED 3.1 - 3.4 for actual achievement | 04 Agriculture Programmes implemented | Refer to LED 3.1 - 3.4 for actual achievement | Refer to LED 3.1 - 3.4 for actual achievement | Refer to LED 3.1 - 3.4 for actual achievement | IPED |

| | Measurable Objectives | S | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | J | |
|---------------|------------------------------|--|----------------|---------------------|--|---|---|--|--|---|----------------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | the district as envisaged in | | | | | | by 30 June 2023 | | | | |
| | the NDP 2030 | Number of Poverty Alleviation Programmes Implemented as per Concept document | LED -3.1 | R500 000 | 01 Poverty Alleviation Agricultural Programme Implemented as per Concept document by 30 June 2022 | The service provider appointed by SCM could not deliver the inputs on time as a result the order has been cancelled by SCM. The service provider cited financial challenges on procurement of the inputs. The service provider has been terminated. The programme will be implemented for 2022-2023 FY (Quarter 2). | 01 Poverty Alleviation Programme Implemented as per Concept document by 30 June 2023 | Achieved. Poverty alleviation projects monitored | | | IPED |
| | | Number of livestock improvement and infrastructure development programme implemented | LED -3.2 | R400 000 | 01 Livestock improvement programme implemented as per SLA with CHDA by 30 June 2022 | Achieved- 1 Livestock improvement programme implemented as per SLA with CHDA by 30 June 2022. | 01 Livestock improvement programme implemented as per SLA with CHDA by 30 June 2023 | Achieved. Implementation of the SLA with CHDA monitored | | | Director :IPED |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | I | |
|---------------|--------------------------|--|----------------|---------------------|--|---|--|--|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | as per SLA with CHDA | | | | | | , | | | |
| | | Number of Dry land cropping programme (RAFI) implemented as per SLA with CDC | LED -3.3 | R1 000 000 | 01 Dry land cropping programme (RAFI) implemented as per SLA with CDC by 30 June 2022 | Achieved. Implementation of SLA with CHDA is being monitored | 01 Dry land cropping programme (RAFI) implemented as per SLA with CDC by 30 June 2023 | Achieved. Signed SLA implemented | | | IPED |
| | | Number of irrigation schemes programme implemented as per SLA with CHDA | LED -3.4 | R1 400 000 | 01 Irrigation schemes programme implemented (Shiloh) as per SLA with CHDA by 30 June 2022 | Achieved. 01 Irrigation schemes programme implemented (Shiloh) as per SLA with CHDA by 30 June 2022 | 01 Irrigation schemes programme implemented (Shiloh) as per SLA with CHDA by 30 June 2023 | Achieved. Signed SLA monitored | | | IPED |
| SMME SUPPORT | | Number of SMME programmes Implemented | LED-4 | | 01 SMME programme implemented by 30 June 2022 | Not Achieved. The adjudication has not yet been finalised due to non-sitting of the SMME Development Committee. The Chairperson of the Committee to convene a meeting | 01 SMME programme implemented by 30 June 2023 | Not Achieved | | | IPED |

| | Measurable | KPI | | Programme | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|----------------------------|------------|--|----------------|----------------------|---|--|--|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | to finalise adjudication. | | ĺ | | | |
| | | % of budget spent on local businesses as per Preferential Procurement regulation monitored | CED-5 | OPEX | 30% of budget spent on local businesses as per preferential procurement regulation monitored by 30 June 2022 | Achieved : Report on the 30% spent on the local SMMEs monitored | 30% of budget spent on local businesses as per preferential procurement regulation monitored by 30 June 2023 | Not Achieved. Due to scope limitation, the analysis could not be conducted | | | IPED |
| LOCAL ECONOMIC DEVELOPMENT | | Number of work opportunities created through EPWP | LED-8 | | 2 240 work opportunities created through EPWP by 30 June 2022 | Not Achieved. 1 868 EPWP jobs created and maintained. 1 626 EPWP work opportunities created (Engineering Services). 68 work opportunities created (with 16 created and maintained) SMS. IPED - 34 work opportunities created. Corp Serv - 40 EPWP work | 1546 work opportunities created and maintained through EPWP by 30 June 2023 | Refer to the LED - 8.1 to LED 8.5 for actual achievements | Refer to the LED - 8.1 to LED 8.5 for actual achievements | Refer to the LED - 8.1 to LED 8.5 for actual achievements | Strategic Management Services |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|--------------------------|-----|----------------|---------------------|---|---|---|--|--|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | opportunities created and maintained. Health & Comm Serv - 100 EPWP job opportunities created | | | | | |
| | | | LED - 8.1 | | | | 1346 work opportunities created | Achieved 1430 vs 1346 =106% | over achievement due to improved reporting and compliance by contractors submitting labour forms | | Engin & Techn Serv |
| | | | LED - 8.2 | | | | 18 EPWP work opportunities created | Achieved: 63 Job opportunities Created. | Improved coordination on created jobs within the institution | | SMS |
| | | | LED - 8.3 | R980 100 | | | 36 EPWP work opportunities created | Not achieved . 28 jobs created | Two jobs were cancelled due to funding constraints. | Municipality to provide funding. | IPED |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|--------------------------|---------------|----------------|---------------------|---|-----------------------|---|--|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | LED - | | | | 40 EPWP work opportunities created | Not Achieved: 30 EPWP work opportunities created | | | Corp |
| | | | LED - 8.5 | | | | 70 EPWP work opportunities created | Achieved. Recruitment process completed . 72 Beneficiaries employed | Demand for extra beneficiaries | | Health & |
| KP | 4: FINANCIAL M | ANAGEMENT AND |) VI | ABILITY | | Weight: 20% | | | | | |

Broader Objective 4 :To Ensure an Efficient and Co-ordinated Financial Management that Enables CHDM to deliver its Mandate

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | 9 | С |
|---------------|-----------------------------------|-------------------------------------|----------------|---------------------|---|---|--|--|--|---|-------------------------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | st o di a n |
| Rev | Ensure sound financial management | Number of Revenue Enhancement | FMV | OPEX | 01 Revenue Enhancement programme | Refer to FMV 2.1 - 2.3 for actual achievement | 01 Revenue Enhancement programme | Refer to FMV 2.1 - 2.3 for actual achievement | Refer to FMV 2.1 - 2.3 for | Refer to FMV 2.1 - 2.3 for | вто |

| | Measurable | KPI | | Programme | Comparison of | Performance | SDBIP | Perfo | ormance Reporting | l | |
|---------------|------------|--|----------------|----------------------|--|---|--|--|---|---|----------------------------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | programmes implemented | | | implemented by 30 June 2022 | | implemented by 30 June 2023 | , | actual achievement | actual achievement | |
| | | Number of Data cleansing activities completed in 6 Local Municipalities. | FMV-2.1 | OPEX | 1 Data cleansing activity completed in 6 Local Municipalities by 30 June 2022. | Not Achieved - Revision of Data Cleansing Plan; 2. Implementation of Data Collection and Capturing in 4 Local Municipalities (Engcobo and Intsika Yethu, Inxuba Yethemba and Emalahleni) (Enoch Mgijima and Sakhisizwe Local Municipalities) Data cleansing activities completed. Billing Data Base reviewed for all 6 municipalities | 1 Data cleansing activity completed in 6 Local Municipalities by 30 June 2023. | Not Achieved. | Analysis and capturing against the billing system in 2 local municipalities (Engcobo and Intsika Yethu) could not be achieved due to capacity constraints | 2 Accountants vacancies were advertised to capacitate the Revenue section which would assist data cleansing and other activities in the Revenue section | Budget and Treasury Office |

| | Measurable Objectives | KPI | 9 | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | 9 | |
|---------------|--------------------------|--|----------------|---------------------|---|---|--|--|--|---|-------------------------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Debt collection and Credit control plans implemented | FMV-2.2 | OPEX | 1 Data cleansing activity completed in 6 Local Municipalities by 30 June 2022. | Not Achieved - Revision of Data Cleansing Plan; 2. Implementation of Data Collection and Capturing in 4 Local Municipalities (Engcobo and Intsika Yethu, Inxuba Yethemba and Emalahleni) (Enoch Mgijima and Sakhisizwe Local Municipalities) Data cleansing activities completed. Billing Data Base reviewed for all 6 municipalities | Revenue collection increased by 45% by 30 June 2023. | Not Achieved. List of demand letters and register for distribution of demand letters. | | | Chief Financial Officer |
| | | Number of Updated Indigent register submitted to Council for approval | FMV - 2.3 | OPEX | Updated Indigent register developed, submitted to Council for adoption and implemented by 30 June 2022 | Achieved - Engagement with local municipalities on the submission and capturing of indigent registers from all 6 local municipalities, Verification of | 1 Updated Indigent register developed, submitted to Council for adoption and implemented | Achieved. Engagement with local municipalities on the submission and capturing of indigent registers from all 6 local municipalities 2. Updated indigent register presented to | | | Chief Financial Officer |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | I | |
|------------------|-----------------------------------|---|----------------|---------------------|---|--|--|--|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | Indigent Register Council resolution is attached. Updated indigent register presented to Council structures and Council and was adopted, Updated indigent register implemented | by 30 June 2023 | Council structures and Council for adoption and implementation | | | |
| CHAIN MANAGEMENT | Ensure sound financial management | Number of SCM Compliance programmes implemented | FMV - 3 | OPEX | 01 SCM Compliance programme implemented by 30 June 2022 | Refer to FMV 3.1 - 3.7 for actual achievement | 01 SCM Compliance programme implemented by 30 June 2023 | Refer to FMV 3.1 - 3.7 for actual achievement | Refer to FMV 3.1 - 3.7 for actual achievement | Refer to FMV 3.1 - 3.7 for actual achievement | вто |
| SUPPLY CHAIN MA | | Number of Procurement plan developed and implemented. | FMV - 3.1 | | 01 Procurement plan developed and implemented by 30 June 2022. | Achieved. Procurement plan implemented. Procurement plan for 2022-23 developed | 01 Procurement plan developed and implemented by 30 June 2023. | Achieved. 01 Procurement plan developed and implemented | | | ВТО |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | 3 | |
|---------------|--------------------------|--|----------------|---------------------|--|--|---|--|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Deviations registers compiled and submitted. | FMV - 3.2 | | 01 Deviation registers compiled and submitted by 30 June 2022. | Achieved. 1 Deviation register compiled and submitted | 01 Deviation registers compiled and submitted by 30 June 2023. | Achieved. 01 Deviation registers compiled and submitted | | | ВТО |
| | | Number of Irregular expenditure reports compiled and submitted. | FMV - 3.3 | | 01 Irregular expenditure register compiled and submitted by 30 June 2022 | Achieved. 01 Irregular expenditure register compiled and submitted | 01 Irregular expenditure register compiled and submitted by 30 June 2023 | Achieved. 01 Irregular expenditure register compiled and submitted | | | вто |
| | | Number of Contract management register compiled and submitted | FMV - 3.4 | | 01 Contract management register compiled and submitted by 30 June 2022 | Achieved - 01 Contract management register compiled and submitted | 01 Contract management register compiled and submitted by 30 June 2023 | Achieved. 01 Contract management register compiled and submitted | | | вто |
| | | Number of bid committees reports compiled and submitted | FMV - 3.5 | | 04 reports on the functionality of Bid committees compiled and submitted by 30 June 2022 | Achieved. 04 reports on the functionality of Bid committees compiled and submitted | 04 reports on the functionality of Bid committees compiled and submitted by 30 June 2023 | Achieved. 04 reports on the functionality of Bid committees compiled and submitted | | | вто |

| | Measurable Objectives | KPI | | Programme | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | 3 | |
|---------------|--------------------------|---|----------------|----------------------|---|--|--|---|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of SCM reports compiled and submitted. | FMV - | | 5 SCM reports compiled and submitted by 30 June 2022 | Achieved - 1. SCM annual report 2. 4 X SCM quarterly report | 5 SCM reports compiled and submitted by 30 June 2023 | Achieved. 5 SCM reports compiled and submitted | | | вто |
| | | Number of GRAP Compliant Annual Financial Statement prepared and submitted | FMV-6 | OPEX | 04 GRAP Compliant Annual Financial Statements compiled by 30 June 2022 | Achieved. 04 GRAP Compliant Annual Financial Statements compiled. 1. Annual Financial Statement. 2. Report from Audit Committee and Internal Audit. 3. Council Resolution and Acknowledgement letter from A.G 3. Mid - year financial statement. (Report of mid - year financial statement and Audit File) 4. Quarter three (3) Financial Statement, Report on quarter three (3) | 04 GRAP Compliant Annual Financial Statements compiled by 30 June 2023 | Achieved -2 GRAP Compliant Annual Financial Statements compiled and submitted. 1st set (CHDM AFS) compiled and submitted to council structures and Council for noting and AG for compliance by 30th August. 2nd set consolidated (CHDM and CHDA) and submitted to AG by 30th September for compliance. Mid-year AFS submitted. Q3 AFS | | | вто |

| | Measurable Objectives | KPI | Programme Budget | Comparison | of Performance | SDBIP Annual | Performance Reporting | | | |
|---------------|--------------------------|--------------|-----------------------------|---|------------------------------------|------------------|--|--|---|-----------|
| Priority Area | OSJECTIVES | | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | Financial Statement and Audit File | | | | | |
| KPA | NO- 5 GOOD GO | VERNANCE and | Public Participation | | · | | · | Weight | : 20% | |

KPA NO- 5 GOOD GOVERNANCE and Public Participation

BROAD STRATEGIC OBJECTIVE 5: To create an Efficient, Effective, Accountable and Performance-oriented Administration

| | Measurable | KPI | | Programme | Comparison of | f Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|----------------|--|---|----------------|----------------------|--|--|--|--|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| Communications | To empower Citizens through Communicatio n, Public Participation and stakeholder engagement. | Number of Communicati on programmes implemented | GGPP - 1 | R393 251,00 | 02 Communication Programmes implemented by 30 June 2022 | Refer to GGPP-1.1 for actual achievement | 02 Communicati on Programmes implemented by 30 June 2023 | Refer to GGPP-1.1 for actual achievement | Refer to GGPP- 1.1 for actual achievement | Refer to GGPP- 1.1 for actual achievement | SMS |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | ormance Reporting | | |
|---------------|--------------------------|--|----------------|---------------------|---|---|--|---|--|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of External Communicatio n Management Programmes implemented | GGPP 1.1 | | 1 External Communication Management Programme implemented by 30 June 2022 | Achieved. 128 Stakeholder engagements and campaigns support facilitated; 4 External Newsletter developed; 2 booklets produces (service delivery milestones and summary by-laws); a) Media Management: 10 Media briefings conducted; 29 Media statements produced; 12 media monitoring reports | 1 External Communicatio n Management Programme implemented by 30 June 2023 | Achieved. 1. External Communication support activities (Campaigns; stakeholder engagements) facilitated 2 Media engagement (a)facilitate advertising, media statements, media briefings, media monitoring; (b)facilitate updates on Website & social media) facilitated | | | Strategic Management Services |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | rmance Reporting | 3 | |
|---------------|--------------------------|-----|----------------|---------------------|---|---|---------------------|--|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | produced; 21 Media enquiries and responses; 25 Radio talk shows conducted; 2 Outside broadcasting services facilitated b) Social Media updates: Social media pages are monitored daily - Facebook and Twitter - 1380 posts uploaded during the financial year, with 13437 followers | | | | | |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | Performance | SDBIP Annual | Perfo | rmance Reporting | | |
|---------------|---|--|----------------|---------------------|--|--|---|--|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| Customer Care | | % Complaints resolved as per Norms and Standards for the Municipal Compliant Management System monitored | GGPP - 3 | OPEX | 100% complaints resolved as per Norms and Standards for Municipal Complaint Management System monitored by 30 June 2022 | Achieved. 84.5% complaints resolved as per Norms and Standards for Municipal Complaint Management System monitored by 30 June 2022 | 100% complaints resolved as per Norms and Standards for Municipal Complaint Management System monitored by 30 June 2023 | Achieved. 89% complaints resolved | | | SMS |
| IGR | To ensure integrated approach to service delivery | Number of Functional Inter Governmenta I Relations (DDM) and Functional International Relations Programmes implemented | GGPP-11 | Opex | 2 functional intergovernmental relations (District Development Model and functional international relations programmes implemented by 30 June 2022 | Refer to GGPP 11.1 - 11.2 for actual achievement | 2 functional inter- governmental relations (District Development Model and functional international relations programmes implemented and coordinated by 30 June 2023) | Refer to GGPP 11.1 - 11.2 for actual achievement | Refer to GGPP 11.1 - 11.2 for actual achievement | Refer to GGPP 11.1 - 11.2 for actual achievement | SMS |

| | Measurable | KPI | | Programme | Comparison of | Performance | SDBIP | Perfo | ormance Reporting | 1 | |
|---------------|------------|--|----------------|----------------------|--|---|--|--|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of functional DDM Coordinated | GGPP - 11.1 | | 01 Functional DDM coordinated by 30 June 2022 | Achieved: 05 Functional District Development Model coordinated (12th of August 2021, 3rd of December 2021, 08th of March 2022 & on the 9th-10th of March 2022 and lastly 01st of June 2022. | 01 Functional DDM coordinated by 30 June 2023 | Achieved. 01 Functional DDM coordinated on the 04th August 2022, Special Technical IGR Forum on the 23 March 2023 and Political Briefing on Gwatyu Farms on the 13th April 2023. | | | SMS |
| | | Number of Functional International Relations Programmes implemented | GGPP-11.2 | | 01 Functional International Relations Programmes implemented by 30 June 2022 | Achieved: 04 Functional International Relations Programmes implemented (GIZ- GSP II Learning and Sharing programme was conducted on the 26 October 2021, Meeting was held | 01 Functional International Relations Programmes implemented by 30 June 2023 | Achieved: 01 International Relations Programme Implemented on Renewable Energy by the Sun Farming Renewable Energy company | | | SMS |

| | Measurable Objectives | KPI | | Programme Budget | Comparison of | of Performance | SDBIP Annual | Perfo | rmance Reporting |) | |
|---------------|--------------------------|-----|----------------|---------------------|---|-----------------------|---------------------|--|--|---|-----------|
| Priority Area | Objectives | | Indicator Code | Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | between CHDM and | | | | | |
| | | | | | | TURKEY Embassy | | | | | |
| | | | | | | on 31st of January | | | | | |
| | | | | | | 2022 as well as | | | | | |
| | | | | | | between CHDM and | | | | | |
| | | | | | | CHDA in | | | | | |
| | | | | | | preparation for the | | | | | |
| | | | | | | German delegation | | | | | |
| | | | | | | from SUN Farming. | | | | | |

Indicator Descriptions – Top Layer Service Delivery and Budget Implementation Plan 2022/2023

| Indicator | KPI | Indicator Descriptions |
|---------------|---|--|
| Code | | |
| | | KPA 1 - Municipal Transformation and Organisational Development |
| MTOD - 1 | Number of Integrated Human Resource Management programmes implemented | Integrated Human Resource Management programmes – seeks to improve organization performance and developing a culture that foster innovation to help the organisation to achieve its performance. These programme will be implemented through the following programmes 1. Skills Development 2. Labour Relations 3. Human resources Management 4. Individual Performance Management |
| MTOD - 1.3 | Number of Human Resource Management | These Human Resources Management Programme entails the implementation of four activities namely; 1. Review of the Staff Establishment 2. Filling of Vacant funded positions filled and implementation of Employment Equity |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|---|---|
| | programme | 3. CHDM Job Descriptions writing |
| | implemented | 4. Submission of Provisional Outcomes Report to Provincial Audit Committee 5. Individual Performance Management |
| MTOD1.3.1 | Number of Reviewed Staff Establishment approved by Council | An awareness and consultation process is undertaken with all directorates in the CHDM for inputs that will be included on the existing staff establishment (Organisational Structure). The staff establishment will then be presented to LLF before it is tabled to Council for approval. The process for the approval of the Staff Establishment will be as follows; 1. Conduct awareness with directorates 2. Consultations with Directorates for inputs 3. HOD's inputs on the draft structure 4. Consultations with Labour in the LLF 5. Draft Staff Establishment submitted to Council for approval and submission to MEC for CoGTA 6. Submission to MEC for consideration 7. Submission of final draft Staff Establishment to Council for final approval 2. Method of calculation = Sum =1 structure will be reviewed with different activities carried out in each quarter up to |
| | | approval. |
| | | 3. Source documents = Draft Structure, Reports, Attendance register, Approved Structure and Council Resolution. |
| MTOD- 1.3.2 | Number of vacant funded positions filled; | Vacant funded positions are vacancies that emanates from approved organisational structure. Employment Equity promotes equitable representation of designated groups within the workplace. |
| | employment Equity plan | 1. Recruitment Plan shall be the implementing tool for filling of approved vacant positions. |
| | developed and | 2. The process for the approval and implementation employment Equity plan will be as follows; |
| | Implemented | The equity plan is approved by Council after consultation with key stakeholders inclusive of the forums. The employment equity plan will be implemented through recruitment and selection processes on 2 highest levels Method of calculation = Sum =1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter Source documents = Council approved IDP |
| MTOD – 2 | Number of Integrated Health, Wellness and Occupational Health and Safety Programmes implemented | Integration of Health, Wellness and Safety Programmes that educates about wellness, health and safety of employees, councillors, traditional leaders, managers and their families informed and guided by OHS and wellness strategy. Implementation will be done through educational programmes individually and in groups. |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|--|--|
| MTOD - 2.1 | Number of Wellness programmes implemented | Wellness is aimed at transforming the organisational culture and creating a conducive work environment inclusive of women, youth and people with disabilities and other vulnerable groups based on the outcomes of the employee satisfaction survey .The programme will be implemented by identifying groups / individuals/ departmentally through educational sessions. The output will be quarterly reports and attendance registers. The method of calculation is 1X4=4 |
| MTOD - 4 | % of works done in the construction of Chris Hani Village phase 1 | Construction of CHDM Village phase 1 will be implemented through the reviewed Construction Works Programme which will determine the percentage of work completed as per the expenditure in the project. This expenditure will determine the percentage of work done in various stages and certified for completion. Construction Works Programme will include the following activities 1. Review of the Construction works programme for the Development of the Chris Hani Village. 2. Site re-establishment of main site for phase 1. 3. Commencement of works. 4. Continuous technical meetings 5. Continues Progress meetings. Method of calculation = Work done as per bill of quantities/ expenditure to date. Output = Progress Reports |
| MTOD - 7 | Number of ICT Programmes Implemented | To identify, provide, support and maintain, business systems and solutions and IT Infrastructure and to provide sound governance on management of ICT. The process for the Implementation of the ICT Programmes will be as follows; 1. Establishment of ICT e-government cloud infrastructure 2. Implementation of information security management 3. Establishment of Disaster Recovery Site. |
| MTOD - 7.1 | Number of E- government project implemented | E-Government is the use of ICT to improve the activities of the municipality it also includes G2G (Government to Government), G2B (Government to Business) and G2C (Government to Citizens). The process will entail implementation of electronic document management system (EDMS) for Content management, Business intelligence and Workflows. The EDMS process will be implemented as follows (1) Facilitation of SCM Processes, appointment of service provider, inception meeting and signing of SLA, |
| | | Implementation and monitoring. 2. Method of calculation = Sum =1 programme will be implemented with different activities each quarter |
| MTOD - 8 | Number of Administration Support and Legal Services Programmes implemented | The Legal Services and Administration Unit has two components, which are the Legal Services and Administration. Firstly, Legal Services proactively manages the litigation risk of the Municipality by implementing the Litigation Management Strategy. The strategy aims to create awareness on issues that might pose a risk of litigation to the Municipality such as PAIA requests, decision-making (PAJA), legislative/ policy development (and drafting) and drafting of contracts, and also provides for ways of responding to litigation and PAIA matters as ana when they arise. |
| | | Secondly, the Administration component provides support not only to management but also to political offices. While the records management section is a custodian of Municipal archives and records, the Council Support Unit provides secretariat support to Council structures such as Council, Mayoral Committee and standing committees. Awareness's |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|---|--|
| | | campaigns with various directorates on file plans, records disposal and other records management controls are provided on a quarterly basis, while secretarial support is also given to Council structures by means of preparation of agendas, minutes, attendance registers and resolutions. |
| MTOD - 8.3 | Number of Legal Services Projects implemented | Legal Services Programmes will be conducted through the implementation of Litigation Management Strategy, which seeks to manage litigation risks of the Municipality. The Litigation Management Strategy has 4 (four) pillars: a) Proactive Legal Support Services; b) Stakeholder Consultation; c) Litigation Risk Mitigation: and d) Capacity Building. |
| | | Inbuilt to the above pillars are the projects that are geared to ensure that the Municipality does not only respond to litigation when it is encountered, but also proactively deal with matters that might give rise to litigation. Litigation Management Projects entails the implementation of three activities namely; a) Litigation awareness activities; b) Response to all requests for access to information received; and c) Response to all New Litigation Cases received by the Municipality (by way of either defending/opposing or settling out of Court). |
| MTOD - 8.3.1 | % Response to requests for access to information received by the Municipality | The Chris Hani District Municipality regularly receives requests for access to information in terms of the Promotion of Access to Information Act (PAIA). The process is as follows: a) Any person/ entity who is either affected by an admistrative decision or has interest in the business of the Municipality has a right to request information from the Municipality; b) All Requests for access to information have to be addressed to the Office of the Municipal Manager, in terms of the legislation, must be made with a prescribed Form A; c) Upon receipt of the request, the Office of the Municipal Manager considers the request, and thereafter instruct the Legal Services Unit to advise the Municipal Manager and co-ordinate the process of responding to the request for access to information; d) The legislation (PAIA) requires that the Municipality through the Information Officer (Municipal Manager) to respond to each and every request for access to information received within a period of 30 (thirty) days; e) If the request is not contained in the prescribed Form A, as required by legislation, the Information Officer must refer the request to Legal Services Unit for recording on the PAIA Requests Register for the purposes of tracking the progress of the request. However, the request shall only be processed as soon as it has been received on the prescribed Form A, Therefore the Information Officer is required to inform the requester in writing that they are required in terms of law to submit a request for access to information in the prescribed form; |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|---|--|
| MTOD - 8.3.2 | % Response to all New Litigation Cases against the Municipality | f) Upon receipt of the Form "A" compliant (signed, dated and specifying the information requested) request the Information Officer is duty bound to respond within 30 (thirty) days communicating to the requester as to whether the request is allowed or rejected. The request is referred to Legal Services for co-ordination where it is recorded in the PAIA Register reflecting date of receipt of the request, the name of the requester, the reference number, the brief summary of information requested and the status of response to the request; g) The Legal Services Unit co-ordinates the request for access to information by considering the request, liaise with the relevant directorate within the Municipality in relation to the subject matter of the request; h) Upon receipt of information from relevant Directorate, the Legal Services Unit advise the Information Officer on whether to accept or refuse access to information, and thereafter prepare a written response on behalf of the Municipality so that the Information Officer responds within 30 (thirty) days of the day of receipt of compliant request with either a refusal or acceptance of the request to access information (also partial refusal, where certain information may not be released) l) Furthermore, if the information is not readily available, the Information Officer can in writing to the requester extend the period within which to respond by a further 30 (thirty) days). 2. Method of calculation = Response attended to / request received 3. Output = Form A, Response and Access for information Register The Office of the Municipal Manager, by way of summons or notice of motion /application, receive a new litigation matter. In order to manage the risk of financial loss occasioned by not only legal costs, but also the attachment of municipal property, it is important that the Municipality respond in writing (either by way of correspondence or Notice of Intention to Defend or Oppose) within 20 (twenty) days of receipt to all new cases. The process is as follows: a) Any p |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|---|---|
| MTOD | Number of Litigation | f) The Legal Services Unit, liaise with the relevant directorate(s) within the Municipality in relation to the subject matter of the case in view to advise the Municipal Manager; g) Upon receipt of information from relevant Directorate(s), the Legal Services Unit advise the Municipal Manager on whether to defend/ oppose or settle the matter out of Court, and thereafter either prepare a written response on behalf of the Municipality so that the Municipal Manager responds within 20 (twenty) days of the day of receipt of Notice or refer matter to external attorneys. h) As soon as the matter has been handed over to the external attorneys they are expected to advise the Municipality either to defend/ oppose or settle the matter out of Court depending on the merits of the case, and thereafter either file a Notice of intention to defend or oppose or write a settlement letter to attorneys of the aggrieved party; k) At the end of each quarter, the external attorneys are expected to submit legal confirmations of matters they handle on behalf the Municipality. 2. Method of calculation = Litigation matters received // responded to 3. Output = Summons/ Application, Notice of Intention to Defend/ Oppose, Litigation Register, Legal Confirmations from external attorneys. |
| MTOD - 8.3.3 | Number of Litigation Awareness conducted | A trend analysis of the litigation within the Municipality reveal that tender reviews, contract management and delicta damages cases flowing from water provisioning and also municipal vehicle accidents continue to be the main litigation drivers. in addition, the risk of non-compliance with the provisions of the Promotion of Access to Information Act (PAIA) and the Promotion of Administrative Justice Act (PAJA) needs to be averted, and thus there is a need to mainstream the principles enshrined on these pieces of legislation so that they are part of the administration's decision making. Awareness campaigns are designed to capacitate Municipality's functionaries pro-active litigation management topics such decision making that complies with Promotion of Administrative Justice Act (PAJA), transparency as it relates to right of protection of personal information and access to information, legislative drafting and principles of drafting of contracts. Workshops are organised on a quarterly basis with Management of the Municipality to deal with the abovementioned topics. Participants are invited to the workshops, and upon attendance are expected to sign attendance registers. There are three workshops planned for the financial year starting from the second quarter onwards, and these are geared to create awareness to management that if they do not comply with legal prescripts the Municipality shall be exposed to the risk of litigation. |
| | | KPA 2 – SERVICE DELIVERY INFRASTRUCTURE |
| SDI - 1 | Number of households served with Quality basic water supply | This indicator deals with the building of water standpipes that will be constructed at RDP standards (200 meter radius) which will supply water to beneficiaries/communities. This 200m radius is the coverage within which benefices will collect water from. The radius is determined during the design stage and is reflected on the layout map. The Quality of water will be indicated in the design report. The Census figures or counting of Households will then determine the number of |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|---|--|
| | | the beneficiaries to be served. After completion of the project a consent form is filled in by the beneficiaries receiving water. The process for the serving households with Quality basic water supply will be as follows; 1. Development of a business plan to request funding 2. Development of design reports to service the arear which will be informed by census report/baseline survey and the report will include the location co-ordinates. 3. Place an tender to appointment a contractor 4. Commencement of the construction 5. Completion and hand over of the project to Water Service Authority Unit to operate and maintain the project. 6. After the project is practically completed the beneficiaries will sign and confirm the provision of service. 2. Method of calculation = Sum (the number of households served per quarter X 4 = Total of households served with quality basic water for the year. |
| SDI - 2 | Number of Water reticulation projects completed | Source documents = Business plan, Design reports. Practical Completion Certificate, Confirmation from beneficiaries This indicator deals with the construction of water projects which has reticulation networks (water pipelines, stand taps, reservoirs, pumpstations). These networks will supply water to a village in line with RDP standards (200meter radius). The process for the construction of water reticulation projects will be as follows; Place an advert to appointment a contractor Commencement of the construction Completion and hand over of the project to Water Service Authority Unit to operate and maintain the project. Method of calculation = Sum (the number of water reticulation per quarter X 4 = Total of water reticulation projects completed for the year. Source documents = Site/Technical Meetings attendance registers, Practical and Completion Certificate |
| SDI 2.1 | | The following network projects will be constructed; 1. Gqebenya water supply(ward 6, Emalahleni, 750h/h), water pipelines, stands taps, reservoir, pump stations, 2. water backlog scheme 3 phase 1C (Ward 17, Emalahleni, 735 h/h), water pump lines, stand taps, pump stations and reservoir, 3. Bhodini Phase 2 water supply ward 7, 241h/h); water pipelines, stand taps and reservoirs 4. Gubenxa village internal water supply (ward 20, Engcobo, 454 h/h), water pipelines, stand taps, reservoirs and panel reservoir |
| SDI 2.2 | | The following network projects will be constructed; 1. Ncora Flats Kwa Mazola Matafeni water supply (ward 17, Intsika Yethu 931 h/h) water pipelines, stand taps, reservoirs, BPT |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|----------------------|---|
| | | 2. Clarkebury water supply(ward 16, Engcobo, 220 hh), water pipelines, stand taps, reservoir |
| | | 3. Lixeni /ncityana/ kumbeke village water supply (ward 20 Engcobo, 64 h/h) pipelines, stand taps, panel reservoir BPT |
| SDI 2.3 | | The following network projects will be constructed; |
| | | 1. Kumbeke village water supply(ward 20, Engcobo, 73 h/h) water pipelines, stand taps, panel reservoirs, |
| | | 2. water supply sudwana water supply (ward 13, Engcobo, 142 hh) water pipelines, stand taps, reservoirs, 3. |
| SDI 2.4 | | Qwebe-Qwebe ward 12 Engcobo, 366h/h, water pipelines, stand taps, panel reservoirs, |
| SDI 2.4 | | 1. Luthuthu water supply, (Ward 2, Emalahleni 170 h/h; water generator room water pipelines, stand taps, repair existing reservoirs, |
| | | 2. Lokshini phase 3 water supply (Ward 13, Engcobo 112 h/h), water pipelines, stand taps, repair existing reservoirs, |
| | | 3. Eluhweni water supply ward 5 Engcobo, 484 h/h water pipelines, stand taps, repair existing reservoirs |
| SDI 2.5 | | Water backlog scheme 3: Phase 1D (Ward 20, Emalahleni 553 h/h); water pipelines, stand taps, reservoir |
| | | pumpstations, |
| | | 2. Water backlog Gubenxa, maxongoeshoek polar park water supply (ward 1 and 2 Sakhisizwe; 251 h/h)water |
| | | pipelines, stand taps, abstraction and treatment, pumpstation reservoir |
| | | 3. Mgababa water supply Intsika Yethu ward 18, 66 h/h. water pipelines, stand taps, reservoir |
| SDI 2.6 | | 1. Lokshini village water supply phase 2 (ward 13, Engcobo, 189h/h), water pipelines, stand taps, reservoirs, |
| SDI 2.7 | | 1. Lalini Nkwenkwezi water supply (Ward 12, Engcobo 294 h/h), water pipelines, stand taps, reservoirs, filtration plant, |
| 00100 | | 2. Ngqoki water supply Engcobo ward 15, 74h/h, water pipelines, stand taps, reservoirs, |
| SDI 2.8 | | 1. Mntuntloni B ward 12 Engcobo 145hhwater pipelines, stand taps, reservoirs, filtration plant, |
| | | Jojweni water supply (Intsika Yethu ward 18, 271 h/h), water pipelines, stand taps, reservoirs, Access roads Qoloweni water supply (Intsika Yethu Ward 19, 172 h/h), water pipelines, stand taps, reservoirs |
| SDI – 3 | Number of Bulk water | The indicator deals with the construction of Bulk water supply line projects that will ultimately feed to a reticulation |
| ODI O | supply projects | network. The process for the construction of bulk water projects will be as follows |
| | completed | Place an tender to appointment a contractor |
| | · | 2. Commencement of the construction |
| | | 3. Completion and hand over of the project to Water Service Authority Unit to operate and maintain the project. |
| | | Method of calculation = Sum (the number of bulk water projects per quarter X 4 = Total of bulk projects completed for the |
| | | year. |
| | | Source documents = Site/Technical Meetings attendance registers, Practical and Completion Certificate |
| SDI - 5 | Number of Water | Construction of Water purification plant (Treatment Works) that purifies raw water that will ultimately serve community |
| | Treatment works | The process for the construction of water treatment works projects will be as follows |
| | upgraded | Place an tender to appointment a contractor |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|-----------------------------------|---|
| | | 2. Commencement of the construction |
| | | 3. Completion and hand over of the project to Water Service Authority Unit to operate and maintain the project. |
| | | Method of calculation = Sum (the number of water treatment projects per quarter X 4 = Total of water treatment works projects completed for the year. Source documents = Site/Technical Meetings attendance registers, Practical and Completion Certificate |
| SDI - 6 | Number of households | Construction of VIP toilets that serves rural communities with basic sanitation. The process for the serving households |
| | served with safe basic sanitation | with basic sanitation will be as follows; 1. Place a tender for SMME to construct the toilet. placement of tender for material supply. quotation requested for services of technical consultant to supervise work 2. Commencement of the construction |
| | | 3. Completion |
| | | 4. Handover of the VIP toilet to household beneficiary whom signs a happy letter |
| | | Method of calculation = Sum (the number of household happy letters per quarter X 4 = Total of households served basic sanitation for the year. |
| SDI - 7 | Number of Waste Water | Source documents = Happy letters, sanitation registers Construction of Sewerage plant (Waste Water Treatment works) that treats raw sewerage coming from community |
| 301 - 7 | Treatment works completed | sewer networks. The process for the construction of waste water treatment works projects will be as follows: 1. Place an tender to appointment a contractor 2. Commencement of the construction |
| | | 3. Completion and hand over of the project to Water Service Authority Unit to operate and maintain the project. |
| | | or completion and hand ever or the project to trater control, tallionly of the to operate and maintain the project. |
| | | Method of calculation = Sum (the number of waste water treatment projects per quarter X 4 = Total of waste water treatment works projects completed for the year. |
| | | Source documents = Practical Completion Certificate, Site/Technical Meetings, Attendance Registers |
| SDI - 9 | % reduction of Water | The input volume of water received at the treatment works will be calculated and read at the bulk meter. When the |
| | losses | water received has been treated and put into distribution that water will be exposed to 2 losses. The Real losses and |
| | | Apparent losses. Real losses are physical losses like leaks and Apparent losses are meter under-registration, theft and |
| | | billing errors. This indicator seeks to establish these two types of losses and thereafter provide a report on real losses. |
| | | The target is now to reduce the real losses by 10% per each year. The process for the reduction of Water losses will be |
| | | as follows; a) Installation of bulk and domestic meters to monitor flows put into distribution against input volume |
| | | a) motalization of balk and domestic meters to monitor hows parting distribution against input volume |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|--|--|
| | | b) In 2019/2020 the institution was at 68.2% of water loss, 2020/2021 was at 29.9% (unconfirmed) and therefore the plan is to reduce that water loss by 10% |
| | | 2. Method of calculation = 10% of 29.9% (Unconfirmed water loss from 2021/2022 report) formular = % reduced water loss/% of total water loss from 2020/2021 report |
| SDI - 12 | Number of waste water projects completed | 3. Source documents = Water loss from 2020/2021 report, Water loss Management report, Completion certificate Construction of Sewer collector pipelines and pumpstation used to collect sewer from housing development the sewer network and pumped to the waste treatment plant. The process for the construction of waste water projects will be as follows 1. Place an tender to appointment a contractor |
| | | Commencement of the construction Completion and hand over of the project to Water Service Authority Unit to operate and maintain the project. Method of calculation = Sum (the number of waste water projects per quarter X 4 = Total of waste water projects completed for the year. Source documents = Practical and Completion Certificate, Site/Technical Meetings, Attendance Registers |
| SDI - 13 | Number of human settlement programmes implemented | The Chris Hani District Municipality took an initiative to build 6 houses throughout the district in each financial year targeting the worst case scenario of child headed home; victims of violence; old age people above 70 years; HIV and Aids victims and other destitute people. The process to be followed for implementation is as follows: 1. CHDM request LMs to identify destitute beneficiaries as per the above category. 2. CHDM conduct verification assessment per each beneficiary 3. Facilitate the appointment of contractors Engineer. 4. Start the construction of destitute beneficiary houses in various stages, construction will include construction of slabs; wall plates; roof structures and finishes. |
| | | Method of calculation = Construction of 1 house in various stages in six LMs. Output = constructed destitute beneficiary houses. |
| SDI - 14 | % Wastewater quality compliance in accordance with Regulations 991 and section 39 of National Water Act 36 of 1998 as | To monitor Waste Water Quality within CHDM through sampling of final effluent water from 12 conventional wastewater treatment works. Furthermore, a sample point is a Waste Water treatment works. The sampling is done to monitor that wastewater effluent disposed to receiving rivers / streams are at acceptable levels of parameters as set in the regulation. For MHS to be able to take water samples the following must be in place: a) availability of water from the source and sample points database. |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|---|---|
| | amended for compliance | b) Toolkits (needed) such as cooler box, icepacks, labelling stickers, chemical reagents, bottle for taking the actual sample(water,) field test meter equipment and laboratory equipment. c) take sample to the laboratory for analysis and read results. After the above has taken place, reports are generated and compliance and non-compliance notices are issued to Water Services. The results report is also reported to the Integrated Regulatory Information System(IRIS) which is owned by the Department of Water & Sanitation and the Standing Committee of Health & Community Services. The compliance percentage is calculated by dividing the complying samples with the total number of samples taken, multiply by 100. e.g. actual compliance number divide by total number of samples taken * 100 = % compliance. The source document is the water samples report taken for the quarter and database |
| SDI - 15 | % of Drinking Water Compliance to SANS 241 monitored | To monitor Drinking Water Quality within CHDM through sampling at water treatments works, distribution network and point of use. Furthermore, a sample point is source of drinking water where a sample will be taken from e.g. Tap,/Treatment plants/reservoir). The sampling of water is done to monitor that water consumed by CHDM residents is safe for human consumption. For MHS to be able to take water samples the following must be in place: a) availability of water from the source, distribution network and at the tap and sample points database. b) Toolkits (needed) such as cooler box, icepacks, labelling stickers, chemical reagents, bottle for taking the actual sample(water,) field test meter equipment and laboratory equipment. c) take sample to the laboratory for analysis and read results. After the above has taken place, reports are generated and compliance and non-compliance notices are issued to CHDM Water Services. The results report is also reported to the Integrated Regulatory Information System(IRIS) which is owned by the Department of Water & Sanitation and the Standing Committee of Health & Community Services. The compliance percentage is calculated by dividing the complying samples with the total number of samples taken, multiply by 100 to give you % compliance. The source document is the water samples report taken for the quarter and database |
| SDI-17 | Number of Disaster Risk Management and District Fire Services Programmes implemented as per DMP & DFSP | Disaster Risk Management is an to integrated multisectoral and multidisciplinary administrative, organisational and operational planning processes and capacities aimed at lessening the impacts of natural hazards and related environmental technological, technological and biological disasters. It seeks to promote having in place coordinated efforts and measures from various stakeholders aimed at reducing disaster risks within Chris Hani District Municipality District Fire Services Programme is at aimed capacitating and developing the District fire Services and to make the public aware of fire danger and how to combat these dangers. |
| SDI-17.1 | Number of Disaster Risk Management | Disaster Risk Management encourages having coordinated efforts from various stakeholders aimed at reducing disaster risks within Chris Hani District Municipality. |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|--|---|
| | Programmes implemented as per DMP | Disaster Management Plan is a plan that specify clear institutional arrangements for coordination, aligning with other government initiatives and plans. The plan also show evidence of informed risk assessment and ongoing risk monitoring capabilities. its role is to develop relevant measures that reduce the vulnerability prone areas, communities and households. This programme will be implemented through three activities namely; 1. Disaster management incidents 2. Disaster Stricken Households assisted 3. Disaster Management Early Warning System |
| SDI-17.1.1 | % Response to disaster management incidents reported | Disaster management incidents- are all disaster related incidents reported from the local municipality to the district call centre. The process for responding to disaster incidents is as follows; 1. CHDM call centre receives calls from communities members affected by the disaster incident and the centre will record the incident on the occurrence book. 2. Disaster official will then respond to the incident and generate an incident report. 3. Then the Disaster officials will record the incident on the occurrence book to Close up the incident. 4. Disaster Manager will then despatch officials to conduct a disaster damage assessment report. Method of calculation = incident responded to /incident reported = 100% Response to disaster management incidents reported Source documents = Occurrence book, Incident report and Disaster damage assessment report. |
| SDI-17.1.2 | % of Disaster stricken Households assisted with relief and recovery material | Disaster stricken Household refer to all households assisted with relief material after they have been effected by a disaster incident. After a disaster incidents has been reported an Assessment report is complied to assess the impact and type of relief to be provided. The process for assisting Disaster stricken Households with relief and recovery material will be as follows: 1. Disaster officials will quantify the amount of relief material to be provided to the beneficiaries affected as per the Assessment report based on the beneficiary list. 2. The Disaster Management unit will send a request for quotation of relief material to SCM 3. The appointed service provider together with the Disaster officials will deliver the relief material to the beneficiaries. 4. 3months after the distribution of relief material to beneficiaries; the Disaster Management Officials will conduct impact assessment on the intervention provided Method of calculation = relief material provided as the assessment / beneficiary list = 100% of Disaster stricken Households assisted with relief and recovery material Source documents = Assessment report, Beneficiary list |

| Indicator | KPI | Indicator Descriptions |
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| Code | | |
| SDI-19 | % indigent households with access to free basic services | Information solicited from all municipalities for consolidation of the register. Process to be followed: STAGE 1 - COMPILATION / DEVELOPMENT OF THE INDIGENT REGISTER 1. Solicit Indigent Registers from the 6 local municipalities in the district. 2. Consolidate the registers into 1 District Indigent Register which has two parts (being billed and unbilled areas) 3. Submit the consolidated Indigent Register to Council for approval. However, changes to the approved register, are also taken into cognisance based on the changes of the registered indigent status. 4. Upon approval by Council, the indigent register is loaded onto the municipal financial system. STAGE 2 - IMPLEMENTATION OF THE APPROVED INDIGENT REGISTER From the approved consolidated indigent register, determine the percentage of households with access to basic services. 2. The calculation of the target is performed on both parts of the Indigent Register being (Billed)receiving both water and sanitation) and (Unbilled) receiving only basic water. The formula to be used for calculating the percentage of indigent households will be as follows: = Total Number of Indigent Households subsidised for Free Basic Services / Total Number of Indigent Households (Indigent Register) X 100. The total number of indigent households recognises the total indigent for billed revenues |
| | | and the total number of registered indigents for unbilled based on the standpipes. |
| | | KPA 3 – LOCAL ECONOMIC DEVELOPMENT |
| LED-1 | Number of spatial planning programme implemented as per SPLUMA | Spatial planning is a process for Land Use transformation as guided by Spatial Planning and Land Use Management Act as adopted by National Cabinet. SPLUMA highlights various activities to be done for optimum land utilisation and transformation. Amongst activities that are key to direct land transformation and development includes 1. Appointment of Tribunal members facilitated for a period of five (5) years (2. Facilitating SPLUMA Tribunal Quarterly Sitting which looks into development initiatives by approving or disapproving them. Key to approve all the SPLUMA programmes is functional SPLUMA Tribunal that process all Land Development applications. 3. Implementation of proper land use management programmes and projects as guided by SDF. Process to follow: 1. LM's submit applications for consideration by Tribunal 2. Coordinate the sitting of the Tribunal. 3. Resolutions communicated with the LM's. Source documents: SDF, SPLUMA and the by-laws, Land Use Management Schemes) |
| LED -3 | Number of Agriculture programmes implemented | Agriculture programmes that improve agricultural livelihood of our communities. 1. Poverty Alleviation Agricultural Programme, 2. Livestock improvement and Infrastructure development Programme, 3. Dry land cropping programme (RAFI), |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|---|--|
| | | 4. Irrigation schemes programme(including small irrigation schemes). |
| LED - 3.1 | Number of Poverty Alleviation Programmes Implemented as per Concept document | Poverty Alleviation are Non-income generating projects providing support to small scale poultry, piggery and homestead garden projects in order to provide relief in poverty per request from local municipalities. Poverty Alleviation will be implemented in Local municipalities as per the concept document. The programme will be monitored on a quarterly basis. The process followed is as follows: 1. The request for support is received from the project beneficiaries through local municipalities 2. The requests are assessed by the responsible project officer 3. The Concept document is then developed in preparation for the support 4. The request for quotations is submitted to SCM 5. The project is supported through the RFQ process 6. Once the support is rendered, project monitoring on a monthly basis is done. The monthly and quarterly progress reports are provided. |
| LED -3.2 | Number of livestock improvement and infrastructure development programme implemented as per SLA with CHDA | Livestock Improvement: It's an animal health programme which includes Inoculation and Dosing of livestock in all local municipalities. The Livestock improvement programme will be implemented in all Local municipalities through the signing of an SLA with CHDA. The programme will be monitored on a quarterly basis. The process followed is as follows: 1. The SLA is entered into with the CHDA; 2. Funds are transferred to CHDA; 3. CHDA implements the programme on behalf of CHDM, in consultation with the responsible CHDM official; 4. CHDA and CHDM undertake project monitoring on a monthly basis; 5. The quarterly progress reports are provided by CHDA. |
| LED -3.3 | Number of Dry land cropping programme (RAFI) implemented as per SLA with CDC | Rural Agri industries and Finance Initiative(RAFI). These programme are aimed at agro-processing from crop and livestock. The programme will be implemented through Cooperative Development Centre (CDC), the programme is implemented in the identified local municipalities for production of cash crops. The programme will be monitored on a quarterly basis. The process flow is as follows: 1. The SLA is entered into with the CDC; 2. Funds are transferred to CDC; 3. CDC implements the programme on behalf of CHDM, in consultation with the responsible CHDM official; 4. MOU is also in place between CDC, CHDA and CHDM specifically for RAFI rollout programme; 5. The parties undertake project monitoring on a monthly basis; 6. The quarterly progress reports are provided by CDC to CHDM. |

| Indicator Code | KPI | Indicator Descriptions |
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| LED - 3.4 | Number of irrigation schemes programme implemented as per SLA with CHDA | Irrigation Schemes is an arena where crops or plants are grown through irrigation systems. The Irrigation Schemes programme will implemented at Enoch Mgijima and Intsika Yethu local municipalities through the signing of an SLA with CHDA. The programme will be monitored on a quarterly basis. The process flow is as follows: 1. The Annual SLA is entered into with the CHDA; 2. Funds are transferred to CHDA; 3. CHDA implements the programme on behalf of CHDM, in consultation with the responsible CHDM official; 4. CHDA and CHDM undertake project monitoring on a monthly basis; 5. The quarterly progress reports are provided by CHDA. |
| LED-4 | Number of SMME programmes Implemented | SMME programmes entail both financial and non-financial support (financial support for both Enterprise and Industrial development projects, and non-financial support in the form of capacity building and mentorship for enterprises) to enterprises throughout the district. The funds available are not enough for enterprise and industrial support. The following process will be undertaken: 1. An SLA will be entered into with Chris Hani Development Agency for Partnership for funding of SMME programmes; |
| LED-5 | % of budget spent on local businesses as per Preferential Procurement regulation monitored | Monitoring the implementation of PPPFA regulation. The monitory process will be done on quarterly base informed by reports from finance departments. The process is as follows: 1. CHDM SCM compiles the report on 30% budget spent; 2. The report is submitted by SCM to IPED for analyse; 3. Once analysed, IPED submits the report to the Council. |
| LED - 8 | Number of work opportunities created through EPWP | Expanded Public Works Programme is created for the purposes of creating Jobs and addressing Unemployment and fighting Poverty. These are done amongst others by service delivery departments i.e. IPED, Engineering, Health and Community Service, Corporate Services departments within CHDM and are implemented on various projects that were undertaken. Stipend is paid to beneficiaries that are identified by various project beneficiaries and as well by relevant Councillors with the district. Stipend is paid on a Monthly basis to beneficiaries as per the signed contract between the CHDM and those beneficiaries for the agreed period. 2. Method of calculation = Sum =1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter |
| FN4) / O | N of D | KPA 4 – FINANCIAL MANAGEMENT AND VIABILITY |
| FMV – 2 | Number of Revenue Enhancement programmes implemented | The programme is implemented to ensure that revenue is improved. The programmes to be implemented are the following; 1. Data collection in 6 Municipalities. 2. Develop and Implement debt collection plan. 3. Review and Implemented indigent register for 2021 / 2022 - 2023/2024 (2022/2023) |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|--|---|
| FMV - 2.1 | Number of Data cleansing activities completed in 6 Local Municipalities. | Data cleansing process: The process of data collection has been revised and will mainly involve the collection of information from Local Municipalities which will be used to update the billing data base. This will entail the collection of property ownership, category, debtor type linked with the applicable tariff and meter information. The information collected will be matched with the municipality's billing system to check for differences. 1. The method of collecting the data will be in the form of collecting the following information from Local Municipalities; (i) General Valuation Rolls, (ii) Billing reports, and (iii) The databases of electricity vending systems. Correction of the billing database - will entail the following; -Forwarding the information collected to the Systems unit / BCX to match against the billing database and generate difference which. - Further analysing the differences and checking them against the DEEDS registry. - Systems unit / BCX to systematically update confirmed results to update / correct billing system |
| FMV-2.2 | Number of Debt collection and Credit control plans implemented | Debt collection and credit control entails the following; Select accounts identified for collection for a particular period / month and from age analysis report (a report that details the period for which the debt has been outstanding), Confirm that billing is up to date. Send reminders to consumers with overdue balances in terms of the policy. The debt collection plan will entail identifying key accounts for Government, Municipalities, Business, Municipal employees, Councillor and household and allocate them to the Credit Control Officer to contact and send reminders. |
| FMV - 2.3 | Number of Updated Indigent register submitted to Council for approval | The indigent register is reviewed and or updated annually to confirm whether the indigent beneficiaries are still indigent. The purpose of the indigent register is to list customers / households that cannot afford to pay for municipal services so that they can receive subsidy on the accounts. The review involves confirming whether the status is still the same. The indigent register update will entail; Inviting members of the community to visit CHDM satellite and LM indigent offices to complete applications for indigent support. Applications to be received by indigent coordinator at the offices and verified for required supporting documents. Application forms to be captured onto draft registers by indigent coordinator. Final register to be submitted to Indigent Steering Committee for review and Council for approval. |
| FMV - 3 | Number of SCM Compliance programmes implemented | The SCM Programme entails implementation of the Procurement Plan, Deviation management, Contracts Management, irregular expenditure management. Procurement plan is required as per MFMA Circular 62 to assist municipalities with proper planning that will lead to minimization of irregular expenditure and deviations if complied with. Contract management consists of the process that enables the Municipality, as a party to a contract, to protect its own interests |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|---|---|
| | | and to ensure that it complies with its duties, as agreed upon in the contract. Establishment of procurement committee systems for competitive bidding. Source document: SCM Policy |
| FMV - 3.1 | Number of Procurement plan developed and implemented. | Procurement plan is required as per MFMA Circular 62 to assist municipalities with proper planning that will lead to minimization of irregular expenditure and deviations if complied with. Once the plan is developed all departments are expected to comply with the plan. The process to be followed: 1. To circulate procurement plan template by the 2nd week of March every year for inputs and give departments at least two weeks to respond. 2. Consolidate all the inputs after closing date. 3. Send the draft consolidated procurement plan to all departments to add if some departments did not submit in the initial submission and for review to those who initially submitted and this is done on the second week of April and give another week for final inputs. 4. On the third week of April all inputs are considered final. 5. The SCM unit reviews the document and attach bid committee dates on it and this usually takes two weeks. 6. On the second week of May the draft plan is submitted to CFO for reviewal and to be submitted to Council approval during budget period. 7. After adoption by the council, the MM will approve it. 8. After approval by MM, it is then sent to all departments. 9. The source document will be the correspondence sent to departments, draft procurement plan, approved procurement plan with the council resolution. |
| FMV - 3.2 | Number of Deviations registers compiled and submitted. | Deviations are made up of the following: 1. Emergency 2. Single or sole provider 3. Acquisition of special works of art or historical objects where specifications are difficult to compile 4. Where it is impractical or impossible to follow the official procurement processes as per Par 36 and SCM regulation 36. The deviation register is submitted quarterly to council committees. |
| FMV - 3.3 | Number of Irregular expenditure reports compiled and submitted. | Irregular expenditure comprises of expenditure, other than unauthorised expenditure incurred in contravention of or that is not in accordance with a requirement of any applicable legislation. The report is submitted on quarterly basis to council committees. 1. Identify the irregular expenditure. 2. On the first week of every month, the Contract office check on the system the payments made to the service providers. 3. The unit identifies all payments made to service providers irregularly. 4. The register is then updated. 5. On quarterly basis the expenditure is reported to the relevant structures of the municipality. 6. The source documents will be the irregular register and quarterly reports |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|---|--|
| FMV - 3.4 | Number of Contract management register compiled and submitted | Contract management consists of the process that enables the Municipality, as a party to a contract, to protect its own interests and to ensure that it complies with its duties, as agreed upon in the contract. Contract management register is an obligation by the municipality to pay the appointed service provider on the work done. After paying then the reconciliations are performed. The process is as follows: 1. Continues updating of Contract Management Register. 2. General ledger will be the source document for updating contract management register. |
| FMV - 3.5 | Number of bid committees reports compiled and submitted | The accounting officer shall establish a procurement committee system for competitive bids consisting of at least the following committees, a bid specification committee, bid evaluation committee and a bid adjudication committee. The functionality of bid committees sittings are as per council calendar. It is reported on quarterly basis to council committees. 1. The Municipal Manager reviews the committees each financial year. 2. The municipal manager will give the names of the office 3. Appointment letters are then developed by the contracts office for Municipal Manager to sign. 4. Once the appointment letters are approved, they are delivered to all the appointees. 5. The source documents will be the meeting schedules as per council calendar, reports on the actual sittings of the meetings |
| FMV - 3.6 | Number of SCM reports compiled and submitted. | The accounting officer must within 10 days of end of each quarter, submit a report on the implementation of the supply chain management policy to the mayor of the municipality or the board of directors of the municipal entity, as the case may be. 1. The Officers submit their monthly reports to the manager/s. 2. The manager/s then consolidate all the monthly reports into quarterly reports with attachments. 3. The consolidated quarterly report is then forwarded to the CFO for approval and submission to relevant structures for reporting through email. 4. The source documents will be the Irregular expenditure, progress report on the implementation of procurement plan, contract management register. Procurement plan |
| FMV-6 | Number of GRAP Compliant Annual Financial Statement prepared and submitted | The application of standards of GRAP, with the appropriate selection of accounting policy and additional disclosures, where necessary, will result in Financial Statements that achieve fair presentation e.g. GRAP17 is a standards that prescribe the accounting treatment for Property Plant and Equipment (PPE). The municipality must prepare AFS that fairly present the state of affairs of the municipality at the end of the financial year and these must be submitted to AG within two months after end of the financial year. Process entails the following: Prepare AFS Preparate plan and circulate to all stakeholders 1. Analyse the general ledger and the trial balance 2. Passing of journals for correcting errors in the system facilitated |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|--|---|
| Code | | Mapping the trial balance to CaseWare software Review CaseWare vs trial balance Produce AFS. Request information from the CHDA (CaseWare version and draft AFS) Analyse the CaseWare version vs the CHDS AFS. Passing of intercompany journals Producing consolidated AFS |
| | | KPA 5 – GOOD GOVERNANCE AND PUBLIC PARTICIPATION |
| GGPP - 1 | Number of Communication programmes implemented | The Unit will implement two programmes namely; External communication management and Internal communication management. The two programmes aim at facilitating exchange of developmental information with municipal stakeholders whilst encouraging active citizen participation. |
| GGPP 1.1 | Number of External Communication Management Programmes implemented | Facilitation of External Communication entails support to awareness campaigns, stakeholder engagements, IDP Processes, Mayoral outreaches, project launches / showcasing, public participation programs, civic education as per Integrated Communication Strategy. This will result in sharing information with the public through various platforms. Facilitation of Media Engagement activities entails radio talk shows, interviews and radio advertisements, media releases to inform communities, District Media monitoring for improved municipal image and media relations and also facilitation of Website & social media activities entails uploading of mandatory information in compliance with the MFMA; events and notices, requests for quotes, vacancies for information sharing with the public. Process to follow (facilitation process): Receive notifications, concept documents, project profiles etc from various directorates. Source content from various directorates Attend awareness campaigns and stakeholder engagements Compile a communication plan Design a newsletter Submit it for approval Distribute. Process to follow (media engagement): Drawing media plan Source media platform 3 Prepare talking points Daily media monitoring Receive and respond to media inquiries |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|--|--|
| | | 6) Hold media briefings. 5. Process to follow (social media and website/intranet management) 1) daily monitoring of social media sites, municipal website and intranet 2) Uploading of information 3) Annual review of the municipal website |
| GGPP - 3 | % Complaints resolved as per Norms and Standards for the Municipal Compliant Management System monitored | Customer Care Management programmes are aimed at creating a reciprocal relationship between the municipality and the community. The process for resolving Complaints is outlined as per the service level agreement, Customer Care Policy and Service Charter and it will be implemented as follows; 1. Receive and register all customer complaints. 2. Refer complaints to relevant directorates for actioning 3. Monitor the resolution of complaints. 4. Escalate complaints that have exceeded the customer care charter 5. Communicate the progress of the complaint with the complainant 6. Ascertain the level of satisfaction and/or dissatisfaction in resolving the complaints 7. Produce a consolidated customer complaints on a monthly basis. Method of calculation = Customer complaints resolved in line with the customer care charter/Customer complaints received x 100 Source documents = Service level agreement, Customer Care Policy and Service Charter, Received and registered customer complaints, Report on Refer and resolve complaints, Customer satisfaction and/or dissatisfaction report and Consolidated monthly customer complaints report |
| GGPP-11 | Number of Functional Inter Governmental Relations (DDM) and Functional International Relations Programmes implemented | The Intergovernmental Relations Strategy states that intergovernmental relations means relationships that arise between different government departments and entities with an objective to conduct their affairs in terms of improving service delivery. These engagements take place in the form of conducting quarterly forums for the purpose of reporting. South African local government participates extensively in international associations; and as a result a wide range of international cooperation arrangements between municipalities from South Africa and other countries have been established. The municipality has entered in to an agreement with District of Cordoba in Argentina and GIZ. |
| GGPP - 11.1 | Number of functional DDM Coordinated | This programme is aimed at coordinating DDM activities throughout the district to ensure development of one district development plan. The process for the coordination of the functional DDM will be as follows: (1) convene DMM forum (the CHDM DDM guides that quarterly DDM forums should sit. there is a flow of reporting between these forum (the IGR and the DIMAFO) being the highest structure; DDM forum stakeholders are the workstreams, sector departments, local municipalities and government entities and parastatals) |

| Indicator Code | KPI | Indicator Descriptions |
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| Couc | | (2) Method of calculation = 1 programme will be implemented with different activities as stipulated in the business plan/proposal each quarter. (3) Source documents = DDM Guide (Circular) and IGR Framework |
| GGPP - 11.2 | Number of Functional International Relations Programmes implemented | These programme is aimed at coordinating International Relations activities throughout the district. The process for the implementing a functional International Relations will be as follows; 1. Coordinate integrated support offered by International Partners (The Unit investigates and explore the prospects of partnerships/relationships and their developmental impact on the municipality. In some cases, the institution receives invitations to participate in an exchange programme or a visit with intentions for twinning agreements with a particular country. A plan for municipal international relations to support the initiative is then developed. A quarterly report is submitted to relevant council structures to report on the implementation of the MOU/Agreement 2. Method of calculation = Sum =1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter 3. Source documents = quarterly report |

4. OPERATIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2022/2023

ANNUAL PERFORMANCE REPORT - OPERATIONAL SERVICE AND BUDGET IMPLEMENTATION PLAN

| | | 1ST DI | RAFT | ANNUAL PER | RFORMANCE REPO | ORT - OPERATION | | T MUNICIPALITY LIVERY AND BUDGET IM | PLEMENTATION PL | AN | |
|-------|-------------|------------------|----------------|------------------------------------|---|-----------------------|-------------------------|--|---|---|-----------|
| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Р | erformance Reportir | ng | |
| | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| PA 1: | MUNICIPAL 1 | TRANSFORM | //ATRI | ON AND INST | ITUTIONAL DEVEL | OPMENT | | Weight: 20% | | | |

| | Measurable | KPI | | - | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|----------------------|---|---|----------------|------------------------------------|---|---|--|--|---|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| Resources Management | To Attract, Retain and Build a productive workforce | Number of Integrated Human Resource Managem ent programm es implement ed | MTOD - 1 | | 03 Integrated Human Resource Management Programmes by 30 June 2022 | Refer to MTOD 1.1 - 1.4 for actual achievement | 03 Integrated Human Resource Management Programmes by 30 June 2023 | Refer to MTOD - 1.1 to MTOD 1.3.4 for actual performance | Refer to MTOD - 1.1 to MTOD 1.3.4 for actual performance | Refer to MTOD - 1.1 to MTOD 1.3.4 for actual performance | Corporate Services |
| Integrated Human F | | Number of Skills Developme nt Programm es implement ed | MTOD - 1.1 | 1 500 000,00 | 1 Skills Development Plan Developed and implemented by 30 June 2022 | 1 Skills Development Plan Developed and implemented by 30 June 2022 | 1 Skills Development Plan Developed and implemented by 30 June 2023 | Achieved. 3 work plan activities (training implemented) | | | Corporate Services |

| | Measurable | KPI | | Programm | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|------------|--|----------------|--|--|---|--|--|---|-----------|--------------------|
| Priority Area | Objectives | | Indicator Code | e Budget Allocation Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian | |
| | | Number of Labour Relations Programm e implement ed | MTOD - 1.2 | 200 000,00 | 1 Labour Relations Programme implemented by 30 June 2022 | 1 Labour Relations Programme implemented (Awareness on workplace Discrimination & Standard of conduct, Managing absenteeism in the workplace and Workplace discipline and incapacity conducted) | 1 Labour Relations Programme implemented by 30 June 2023 | Achieved - 2 LR projects implemented Q1 - Discrimination in the workplace . Q2 - Standard of Conduct Q3 - awareness on Management of absenteeism in the workplace implemented. Awareness conducted at Intsika Yethu and Emalahleni on 13 & 14 February 2023 Q4 - Workplace discipline and incapacity | | | Corporate Services |
| | | Number of Local Labour Forums implement ed | MTOD-1.2.1 | | 4 Local Labour Forums implemented by 30 June 2022 | Achieved. 10 Local Labour Forums implemented by 30 June 2022 | 4 Local Labour Forums implemented by 30 June 2023 | Achieved 4 LLF meetings convened on 07 September 2022, 15 November 2022, 13 March 2023 and 09 May 2023 | | | Corporate Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Pe | erformance Reportin | ıg | |
|---------------|------------|---|------------|---|---|---|--|---|---|---|--------------------|
| Priority Area | Objectives | | | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Human Resource Managem ent programm e implement ed | MTOD - 1.3 | 1 Human Resource Managem ent programm es implement ed by 30 June 2022 | 1 Human Resource Management programmes implemented by 30 June 2022 | Refer to MTOD 1.3.1 to 1.3.4 for actual achievement | 1 Human Resource Management programmes implemented by 30 June 2023 | Refer to MTOD - 1.3.3 to MTOD - 1.3.4 for actual performance | Refer to MTOD - 1.3.3 to MTOD - 1.3.4 for actual performance | Refer to MTOD - 1.3.3 to MTOD - 1.3.4 for actual performance | Corporate Services |
| | | Number of department al engageme nt held on review of job description s and developme nt of new | MTOD-1.3.3 | OPEX | 6 directorates supported on review and writing of job descriptions by 30 June 2022 | Achieved: 6 directorates supported on review and writing of job descriptions by 30 June 2022. Assessment Report on number of job descriptions written/reviewed. Awareness | 6 directorates supported on review and writing of job descriptions by 30 June 2023 | Achieved. Assessment Report on number of job descriptions written/reviewed. Awareness conducted on job description writing. 6 directorates supported on job | | | Corporate Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|--|---|--|--|---|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | job description s | | | | conducted on job description writing & 2 directorates supported on the job descriptions written/reviewed. 4 directorates supported on the job descriptions written/reviewed, 2 directorates supported on the job descriptions written/reviewed written/reviewed | | descriptions written and reviewed | | | |
| | | Number of Provisional Outcomes Report submitted to Provincial Audit Committee | MTOD-1.3.4 | OPEX | 04 Provisional Outcomes Report submitted to Provincial Audit Committee by 30 June 2022 | Achieved: 04 Provisional Outcomes Report submitted to Provincial Audit Committee by 30 June 2022 | 04 Provisional Outcomes Report submitted to Provincial Audit Committee by 30 June 2023 | Achieved. 04 Provisional Outcomes Report submitted to Provincial Audit Committee | | | Corporate Services |

| | Measurable | KPI | | D | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|--|----------------|------------------------------------|---|---|---|--|---|---|---|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Middle Managers Individual Performan ce Assessme nt and/or review reports compiled and submitted | MTOD-1.4 | OPEX | 01 Middle Managers Individual Performance Assessment and; 3 review reports compiled and submitted by 30 June 2022 | Not Achieved. 1. Accountability Agreements (55): The following submission were done by directorates: SMS - 19, Engineering - 13, BTO - 9, Health and Community Services - 4, IPED - 2, Corporate Services - 8. Assessment tools (53): SMS (19), Corporate Services (8), IPED (2), BTO (9), Engineering (13), IPED (2). 100% for the assessment of managers was not achieved | 01 Middle Managers Individual Performance Assessment and; 3 review reports compiled and submitted by 30 June 2023 | Not Achieved. 100% performance on the level of managers and below managers has not been achieved. | | | Director: Strategic Management Services |

| | Measurable | KPI | | D | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|------------|--|----------------|------------------------------------|--|--|--|---|---|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Occupation al Health and Safety Programm es implement ed | MTOD 2.2 | | 1 Occupational Health and Safety management programmes implemented by 30 June 2022 | Refer to MTOD - 2.3.1 to 2.3.4 for actual achievement | 1 Occupational Health and Safety management programmes implemented by 30 June 2023 | Refer to MTOD - 2.2.1 to MTOD - 2.2.3 for actual performance | Refer to MTOD - 2.2.1 to MTOD - 2.2.3 for actual performance | Refer to MTOD - 2.2.1 to MTOD - 2.2.3 for actual performance | Corporate Services |
| | | Number of Occupation al Health and Safety education & awareness conducted | MTOD 2.2.1 | | 4 Occupational Health and Safety education & awareness conducted by 30 June 2022 | Achieved. 04 Occupational Health and Safety education & awareness conducted (1 Occupational Health and Safety education & awareness (COVID 19) at Whittlesea, Molteno, Sterkstroom satellite | 4 Occupational Health and Safety education & awareness conducted by 30 June 2023 | Achieved: 5 Occupational Health and Safety management programmes implemented (SHE Reps, Revenue and Meter Readers employees); education and awareness on hygiene in the workplace conducted for water services and cleaners from the 11 | Overachievement due to service delivery demands | | Corporate Services |

| | Measurable | | | | Comparison | of Performance | SDBIP Annual | Pe | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|---|--|--|---|--|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | workplace, Revenue Services and Supply Chain Management Services (BTO), Intsika Yethu satellite workplace, prevention and management Injury On duty/ Occupational illnesses for managers, supervisors, shop stewards and administrators) | | October -06 December 2022, on fire and evacuation plan for municipal offices in Komani implemented form the 17 January - 01 February 2023 and for municipal offices in satellite offices, was implemented from the 04-19 May 2023 | | | |
| | | Number of Medical assessmen ts and Vaccinatio n initiatives implement ed | MTOD - 2.2.2 | 250 000,00 | 1 Medical surveillance and Vaccination programme implemented by 30 June 2022 | Achieved: 1 Medical surveillance and Vaccination programme implemented at Engcobo and Intsika Yethu | 1 Medical surveillance, Vaccination and Education programme implemented by 30 June 2023 | Not achieved: 1 medical surveillance, vaccination and education programme implemented at Engcobo and Intsika Yethu (high risk) | At Emalahleni water services medical surveillance, and education was implemented, vaccination could not be | | Corporate Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|------------|--|----------------|------------------------------------|--|--|---|--|--|--|---------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | satellite workplaces & 1 Medical surveillance and Vaccination programme Implemented at Sakhisizwe and Emalahleni satellite workplaces, 1 Medical surveillance and vaccination programme implemented for Inxuba Yethemba and Enoch Mgijima satellite workplaces | | water services satellite workplaces, Sakhisizwe water services satellite workplaces. | implemented due to unavailability of vaccines from Department of Health. | | |
| | | Number of positions exposed to high risk hazard provided with Personal Protective Clothing | MTOD 2.2.3 | 1 300 000,00 | 6 Satellite Offices provided with Personal Protective Clothing and hygiene consumables by 30 June 2022 | Not Achieved: 6 Satellite Offices provided with Personal Protective Clothing and hygiene consumables. Waders were distributed to | 14 positions exposed to high risk hazard provided with Personal Protective Clothing by 30 June 2023 | Not Achieved: Identification and prioritization of high risk positions facilitated, SCM processes were facilitated, Service provider appointed and awaiting delivery of PPE. Partial | Delays in procurement processes that resulted in non-provision of PPE. | The PPE will provided in the next financial year 2023 - 1st quarter | Director: Corporate Services |

| | Measurable | KPI | | D | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|-----|----------------|------------------------------------|---|--|---------------------------------|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | Enoch Mgijima in the first quarter. A service provider was appointed in November 2021 (Ifeanyi) for the waders for other satellite offices but delivery will be done in phases (December 2021 and January2022) due to holiday recess period, closing of some suppliers and limited sizes in stock from suppliers. | | delivery was done for fire fighters. | | | |

| | Measurable | KPI | F | Programm | Comparison | of Performance | SDBIP | Р | erformance Reportir | ng | |
|---------------|------------|----------------|---|--------------------------|------------|---|-------------------------------|--|---|---|-----------|
| Priority Area | Objectives | Indicator Code | | e Budget Allocation 2021 | | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | Procurement of PPE (overalls) was not achieved .Procurement processes were initiated through the RT 64 contract. No service provider has been appointed due to slow response from service providers. PPE distributed for water services Enoch Mgijima, Emalahleni, Sakhisizwe , Inxuba YeThemba, Ngcobo, Intsika Yethu and meter readers. PPE for Fire fighters was not provided due to procurement processes | | | | | |

| | Measurable | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | | |
|------------------|---|--|----------------|------------------------------------|---|---|---|--|---|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | To ensure effective Management of Municipal vehicles. | Number of Municipal vehicles managed | MTOD - 3 | Opex | 172 Municipal Vehicles Managed by 30 June 2022 | Refer to MTOD 3.1 - 3.2 for actual achievement | 173 Municipal Vehicles Managed by 30 June 2023 | Refer to MTOD - 3.1 to MTOD - 3.2 for actual performance | Refer to MTOD - 3.1 to MTOD - 3.2 for actual performance | Refer to MTOD - 3.1 to MTOD - 3.2 for actual performance | Corp Services |
| Fleet Management | | Percentag e of Municipal vehicles maintained as per dealer specificatio n and on request by user | MTOD 3.1 | | 100% Municipal vehicles maintained as per dealer specification and on request by user by 30 June 2022 | Achieved. 100% Municipal vehicles maintained as per dealer specification and on request by user | 100% Municipal vehicles maintained as per dealer specification and on request by user by 30 June 2023 | Achieved: 100% Municipal vehicles maintained as per dealer specification and on request by user | | | Corporate Services |
| | | Number of Municipal Vehicles acquired | MTOD 3.2 | | 5 Municipal Vehicles acquired by 30 June 2022 | Not Achieved: Achieved Acquisition of 2 Municipal vehicles. Acquisition of 3 Municipal | 5 Municipal Vehicles acquired and delivered by 30 June 2023 | Achieved. 5 Municipal Vehicles acquired and delivered. 2 vehicles were delivered in Q1 and 3 Municipal | - | - | Corp Services |

| | Measurable | KPI | Progran | D | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|------------------------|--|---|----------------|------------------------|---|---|---|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | Vehicles was unsuccessful. Quotations were sourced from accredited RT57 service providers. Unfavourable responses from all were received. Challenges with the stock levels in the country, budget & Contractual issues on transversal contract. Vehicles to be delivered in the 1st quarter of the next financial year. | | vehicles were delivered in quarter 3 | | | |
| Facility management | To ensure effective maintenance of municipal buildings | Number of Facility Manageme nt Plans developed and | MTOD - 5 | 5 000 000,00 | 01 Facility Management Plan implemented by 30 June 2022 | Achieved- Facility Management Plan has been implemented by 30 June 2022. ICT Server Room; | 01 Facility Management Plan developed and implemented | Achieved - Facility Management Plan has been implemented. | | | IPED |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|-----------------|--|--|----------------|------------------------------------|---|---|---|--|---|--|------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | implement ed | | | | Disaster Management Centre and BTO Kitchen door has been repaired. Electricity at the Mayoral Residence has been maintained and upgraded. Electricity at Disaster Management Centre, Cottages has been maintained. Boom Gate at Disaster Management Centre has been repaired. Grass cutting and clearing of bushes has been done at Fleet Workshop. | by 30 June 2023 | | | | |
| Asset Manage | To ensure effective safeguarding | Number of Cluster Security Manageme | MTOD - | 58 000 000,00 | 04 Cluster Security Management Plans developed | Not Achieved. The terms and conditions of the contracts with the | 04 Cluster Security Management Plans | Not Achieved. Finalisation of Contracts with Service Providers | The service level agreements are yet to be finalised, and the service | Persuade the SCM team to finalise the service level agreements, while | Corp Services |

| | Measurable | KPI | qe | | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|---|---|----------------|------------------------------------|---|--|---|--|---|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | of Municipal assets. | nt Plans developed and implement ed | | | and Implemented by 30 June 2022 | security management providers were not finalised; security management plans were not developed. Security management plans to be developed after the terms and conditions of contracts have been finalised. | developed and Implemented by 30 June 2023 | facilitated, 4 Security risk assessments facilitated | providers have yet to finalise the security management plans. | also persuading the service providers to finalise the security management plans | |
| ICT | To provide effective ICT Services | Number of ICT Programm es Implement ed | MTOD - 7 | | 01 ICT programmes implemented by 30 June 2022 | Refer to MTOD - 7.1 | 02 ICT programmes implemented by 30 June 2023 | Refer to MTOD - 7.2 to MTOD - 7.2.1 | Refer to MTOD - 7.2 to MTOD - 7.2.1 | Refer to MTOD - 7.2 to MTOD - 7.2.1 | Corporate Services |

| | Measurable | KPI | Prog | _ | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|----------------------------------|---|---|----------------|------------------------------------|---|-----------------------|--|--|--|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Wide area network (WAN) connectivit y and cloud Private Branch Exchange (PBEx) telephone systems upgraded | MTOD - 7.2. | R8 000 000,00 | | | 1 Wide area network (WAN) connectivity and cloud Private Branch Exchange (PBEx) telephone systems upgraded by 30 June 2023 | Not Achieved: SCM process were facilitated | Wide area network (WAN) connectivity and cloud Private Branch Exchange (PBEx) telephone systems could not be upgraded owing to budgetary constraints | The project has been budgeted for and approved for implementation in the 2023/2024 financial year | Corporate Services |
| Information and Communication | To ensure effective Management of Municipal assets. | Number of server infrastructu re upgraded | MTOD-7.2.1 | | | | 1 server infrastructure upgrade implemented by June 2023 | Achieved: SCM procurement process facilitated and 1 server infrastructure upgrade implemented | | | Corporate Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|----------------|--|--|----------------|------------------------------------|---|--|---|--|---|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | To ensure effective administratio n support and legal services | Number of Administr ation Support and Legal Services Programm es implement ed | MTOD - 8 | | 01 Administration support and 01 Legal Services Programmes implemented by 30 June 2022 | Refer to MTOD - 8.1 to MTOD - 8.3 for actual achievement | 01 Administratio n support and 01 Legal Services Programmes implemented by 30 June 2023 | Refer to MTOD - 8.1 to MTOD - 8.2.2 for actual performance | Refer to MTOD - 8.1 to MTOD - 8.2.2 for actual performance | Refer to MTOD - 8.1 to MTOD - 8.2.2 for actual performance | Corporate Services |
| Administration | | Number of Secretariat Administrat ion support projects implement ed | MTOD - 8.1 | | Secretariat Administration support projects implemented to all scheduled (and on request by convenor) meetings of Council Structures convened by 30 June 2022 | Achieved: Secretariat Administrative support projects implemented to all scheduled (and on request by convenor) to meetings convened by Council Structures | Secretariat Administration support projects implemented to all scheduled (and on request by convenor) meetings of Council Structures convened by 30 June 2023 | Achieved: Secretariat Administrative support projects implemented to all scheduled (and on request by convenor) to meetings convened by Council Structures | | | Corporate Services |

| | Measurable KPI Objectives | KPI | | | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|---------------------------|---|----------------|------------------------------------|--|---|--|---|--|---|--------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Record Manageme nt projects implement ed | MTOD - 8.2 | OPEX | 02 Record Management projects implemented by 30 June 2022 | Refer to MTOD 8.2.1 - 8.2.2 for actual achievement | 02 Record Management projects implemented by 30 June 2023 | Refer to MTOD 8.2.1 - 8.2.2 for actual achievement | Refer to MTOD 8.2.1 - 8.2.2 for actual achievement | Refer to MTOD 8.2.1 - 8.2.2 for actual achievement | Corp Services |
| | | Number of File Plan Awareness campaigns conducted | MTOD - 8.2.1 | OPEX | 06 File Plan Awareness campaigns conducted by 30 June 2022 | Achieved: 06 File Plan Awareness campaigns conducted | 06 File Plan Awareness campaigns conducted by 30 June 2023 | Achieved: 07 File Plan Awareness campaigns conducted | An ad-hoc request was submitted by the Directorate: Health & Community Services | | Corporate Services |
| | | Number of Records Disposal reports compiled and submitted | MTOD - 8.2.2 | OPEX | 04 Records Disposal reports compiled and submitted by 30 June 2022 | Achieved: 04 Records Disposal reports compiled and submitted (Identifying and Listing of Records for Disposal process, Disposal of Records, Identifying and Listing of Records for Disposal process, Disposal process, Disposal process, Disposal process, Disposal of Records) | 04 Records Disposal reports compiled and submitted by 30 June 2023 | Achieved. 4 Records Disposal reports compiled and submitted (Identifying and Listing of Records for Disposal process, Disposal of Records, Identifying and Listing of Records for Disposal process and Disposal of Records) | | | Corporate Services |

| | | | | | | CHRIS | HANI DISTRICT | MUNICIPALITY | | | |
|---------------|---|---|----------------|------------------------|---|---|--|--|---|---|------------------------------------|
| | | 1ST DR | AFT | ANNUAL PER | RFORMANCE REPO | ORT - OPERATIONAL | | VERY AND BUDGET IM | PLEMENTATION PL | AN | |
| | Managemahla | KDI | | | Campariaan | | | | aufarranaa Danauti | _ | |
| | Measurable Objectives | KPI | | Programm | | of Performance | SDBIP Annual | | erformance Reportir | _ | |
| Priority Area | A 2: BASIC SERVIC | | Indicator Code | e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| KPA | 2: BASIC SERV | ICE DELIVER | Y AN | ID INFRASTR | UCTURE DEVELO | PMENT | Weight: 20% | | | | |
| BRO | AD STRATEGIC | OBJECTIVE | 2 :Tc | ensure prov | ision of Municipal | Health, Environment | tal Management | and Basic Services in a | well-structured, effi | cient and integrated | |
| manr | | | ı | | | | | | | | _ |
| WSA | To ensure Universal coverage of Water and Sanitation by 2030 | Number of Full SANS Audit conducted on 16 Water Treatment Works systems | SDI - 4 | OPEX | 01 Full SANS Audit conducted in functional 16 Water Treatment Works systems by 30 June 2022 | Not Achieved 01 Full SANS Audit conducted in functional 16 Water Treatment Works systems by 30 June 2022. Procurement of a service provider to conduct FULL SANS audit facilitated. Audit conducted for 16 Water Treatment Works not achieved. Budget constraints National Treasury Moratorium. Plants where full SANS was conducted were prioritised for the | 01 Full SANS Audit conducted on 16 Water Treatment Works systems by 30 June 2023 | Achieved Audit conducted for 16 Water Treatment Works | | | Engineering and Technical Services |

| | Measurable KPI Objectives | | | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | | |
|---------------|---|---|----------------|------------------------------------|---|---|---|--|---|---|------------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| WSA | To ensure Universal coverage of Water and Sanitation by 2030 | Number of Process Audit review conducted on 16 Waste Water Treatment Works | SDI - 8 | OPEX | 01 Process Audit review conducted on 16 Waste Water Treatment Works Systems by 30 June 2022 | Not Achieved 01 Process Audit review conducted on 16 Waste Water Treatment Works Systems by 30 June 2022. 1. Assessment of functionality of waste water treatments works systems conducted. 2. Procurement of a service provider to conduct FULL SANS audit facilitated 3. Audit conducted for 16 Waste Water Treatment Works | 01 Process Audit review conducted on 17 Waste Water Treatment Works Systems by 30 June 2023 | Achieved 01 Process Audit review conducted on 17 Waste Water Treatment Works Systems by 30 June 2023 | | | Engineering and Technical Services |

| | Measurable | KPI | | D | Comparison | of Performance | SDBIP | Po | erformance Reportir | ng | |
|---------------|--|-----------------------------------|----------------|------------------------------------|--|---|---|--|---|---|------------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| WSA | To ensure Universal coverage of Water and Sanitation by 2030 | % reduction of non- Revenue water | SDI - 10 | OPEX | 20% reduction of Non- Revenue water by 30 June 2022 | Not Achieved 20% reduction of Non- Revenue water by 30 June 2022. 1. Assessment of the system to identify meters that require replacement or calibration. Comparison of the erven as per GIS with the CHDM billing information, 2. Comparison of the erven as per | 20% reduction of Non- Revenue water by 30 June 2023 | Achieved 20% reduction of Non- Revenue water by 30 June 2023 | | | Engineering and Technical Services |

| Priority Area | Measurable Objectives | КРІ | Indicator Code | Programm e Budget Allocation | Comparison of Performance | | SDBIP | Performance Reporting | | | |
|---------------|--------------------------|--|----------------|------------------------------------|--|---|--|--|---|---|---------------------------------------|
| | | | | | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | GIS with the CHDM billing information. Procurement processes to facilitate procurement of a service provider to conduct water balancing was not achieved owing to budgetary constraints. Water Balance calculations information not complete. | | | | | |
| | | Number of Consumer and Bulk water meter replaceme nt | SDI-11 | 700 000,00 | 02 Water Conservation and demand Management programmes implemented by 30 June 2022 | Refer to SDI 11.1 - 11.2 for actual achievement | 02 Water Conservation and demand Management programmes implemented by 30 June 2023 | Refer to SDI 11.1 - 11.2 for actual achievement | Refer to SDI 11.1 - 11.2 for actual achievement | Refer to SDI 11.1 - 11.2 for actual achievement | Engineering and Technical Services |

| | Measurable | Measurable KPI Objectives | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|---|---|---|--|---|---|------------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Consumer water meter replaceme nt Programm es implement ed | SDI-11.1 | OPEX | 1 Consumer water meter replacement Programmes implemented by 30 June 2022 | Not achieved 117 out of 400 Consumer meters were installed. The consumer meters are being replaced and installed when there is a request from the consumer or submitted damaged list from the revenue office so as to fix the meters. Shortage of material / fittings due to budgetary constraints. | 1 Consumer water meter replacement Programmes implemented by 30 June 2023 | Achieved 410 Consumer water meters replaced | | | Engineering and Technical Services |
| | | Number of Bulk water | SDI- | | 1 Bulk water meter | Not achieved 3 Bulk water | 1 Bulk water meter | Achieved 1 Bulk programme | | | Engi |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|------------|--|----------------|------------------------------------|--|--|---|--|--|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | meter replaceme nt Programm es implement ed | | | replacement Programmes implemented by 30 June 2022 | meters replaced out of the 32 that was planned (8 bulk water meters to be replaced per quarter). Shortage of material / fittings due to budgetary constraints. Budget adjustments to be able to purchase required material. | replacement Programmes implemented by 30 June 2023 | implemented, 39 bulk meters installed | | | |
| | | Number of food premises inspections conducted for compliance with Food, Cosmetics and Disinfectan ts Act 54 of 1972 as Amended | SDI 16.1 | OPEX | 2240 Food premises inspections conducted for compliance with Food, Cosmetics and Disinfectants Act 54 of 1972 as Amended by 30 June 2022 | Achieved. 2501 Food premises inspections conducted. Over achieved by 261 inspections due to operation Gqogqa programme. | 2400 Food premises inspections conducted for compliance with Food, Cosmetics and Disinfectants Act 54 of 1972 as Amended by 30 June 2023 | Achieved. 2676 Food premises inspections conducted,1139 complied and 1537 did not comply. | Over achieved by 276, due to random blitz operations (Operation Gqogqa). | | Health and Community Services |

| | Measurable | Measurable KPI Objectives | | - | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|--|--|--|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Funeral parlours & Mortuaries inspected for compliance in line with National Health Act 61 of 2003, section 32 | SDI - 16.2 | OPEX | 280 inspections conducted to 72 Funeral parlours & Mortuaries for compliance in line with National Health Act 61 of 2003, section 32 by 30 June 2022 | Achieved. 288 funeral parlours & Mortuaries inspected. Over achieved by 8 due to Funeral Parlours that were opened | 288 inspections conducted to 72 Funeral parlours & Mortuaries for compliance in line with National Health Act 61 of 2003, section 32 by 30 June 2023 | Achieved. Funeral parlours & Mortuaries inspected for compliance in line with National Health Act 61 of 2003, section 32 | Middelburg Forensic closure, TakaNoyoyo Funeral Parlor from Cacadu and Abaveleli Funeral Directors from Komani are temporarily closed due to renovations and Frontier Hospital Mortuary has been re- opened | | Health and Community Services |
| | | Number of sampled sanitation structures inspected in line with White Paper on Basic Household Sanitation of 2001 | SDI - 16.3 | OPEX | 120 sampled sanitation structures inspected in line with White Paper on Basic Household Sanitation of 2001 by 30 June 2022 | Achieved. 120 sampled sanitation structures inspected. | 160 sampled sanitation structures inspected in line with White Paper on Basic Household Sanitation of 2001 by 30 June 2023 | Achieved. 160 sampled sanitation structures inspected. | | | Health and Comm Services |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|------------------------------|---|---|----------------|------------------------------------|---|--|--|--|--|---|--------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of waste sites inspected in line with the District Wide Environme ntal Manageme nt Plan | SDI- 16.4 | OPEX | 14 Waste sites inspected in line with the District Wide Environmental Management Plan by 30 June 2022 | Achieved. 56 Waste site inspections conducted on 14 waste sites in line with the District Wide Environmental Management Plan | 14 Waste sites inspected in line with the District Wide Environmental Management Plan by 30 June 2023 | Achieved. 14 Waste Sites Inspected | | | Health and Comm Services |
| Disaster and Fire Management | To ensure effects of disaster and fire are prevented or minimised | Number of Disaster Risk Managem ent and District Fire Services Programm es implement ed as per DMP & DFSP | SDI-17 | OPEX | 02 Disaster Risk Management and District Fire Services Programmes implemented as per DMP & DFSP by 30 June 2022 | Refer to SDI 17.1.4 - 17.2.3 for actual achievement | 02 Disaster Risk Management and District Fire Services Programmes implemented as per DMP & DFSP by 30 June 2023 | Refer to SDI 17.1.4 - 17.2.3 for actual achievement | Refer to SDI 17.1.4 - 17.2.3 for actual achievement | Refer to SDI 17.1.4 - 17.2.3 for actual achievement | Health and Comm Services |

| | Measurable | KPI | | 2 | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|-------------------------|--|---|----------------|------------------------------------|--|---|---|--|---|---|-----------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| ses | To ensure effects of disaster and fire are prevented or minimised | Number of Disaster manageme nt ward- based risk assessmen ts conducted | SDI-17.1.4 | OPEX | 24 disaster management ward-based risk assessment conducted by 30 June 2022 | Achieved. 24 disaster management ward-based risk assessment were conducted in all 6 local municipalities. | 24 disaster management ward-based risk assessment conducted by 30 June 2023 | Achieved. 24 disaster management ward-based risk assessment conducted | | | Health & Comm Serv |
| ter Management Services | | Number of disaster manageme nt ward- based plan developed | SDI-17.1.5 | OPEX | 24 disaster management ward-based plan developed by 30 June 2022 | Achieved. 24 disaster management ward-based plan developed | 24 disaster management ward-based plan developed by 30 June 2023 | Achieved. 24 disaster management ward-based plan developed | | | Health & Comm Serv |
| Disaster | | Number of Fire Services Trainings conducted | SDI-17.2.1 | OPEX | 1 Basic Fire Services Training conducted by 30 June 2022 | Achieved. 1 Basic Fire Services Training conducted | 2 Basic Fire Services Trainings conducted to fire personnel nominated by local municipalities by 30 June 2023 | Achieved. 2 Basic Fire Services Trainings conducted to fire personnel nominated by local municipalities | | | Health & Comm Serv |

| | Measurable | KPI | | D | Comparison | of Performance | SDBIP | Po | erformance Reportir | ng | |
|-----------------------------|--|--|----------------|------------------------------------|--|--|--|--|---|---|-----------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Fire Services Inspections conducted to sampled high risk business premises | SDI-17.2.2. | OPEX | 48 Fire Services Inspections conducted by 30 June 2022 | Achieved. There were 51 fire services inspections conducted | 96 Fire Services Inspections conducted in high risk business premises by 30 June 2023 | Achieved. 120 Fire Services Inspections Conducted in high risk business | Over achieved by 24 inspections due to high demand | | Health & Comm Serv |
| | | % Response to veld fire services incidents reported | SDI-17.2.3 | OPEX | 100% of Response to Fire services incidents reported by 30 June 2022 | Achieved. 100% of Response to Fire services incidents reported. | 100% of Response to veld Fire services incidents reported by 30 June 2023 | Achieved. 100% of Response to Fire services incidents reported | | | Health & Comm Serv |
| Environmental Management | To promote functional ecosystems and healthy environmen t for all citizens | Number of Environm ental Programm es implement ed as per District Wide Environm ental Plan | SDI-18 | 900 000 | 02 Environmental Programmes implemented as per District Wide Environmental Management Plan by 30 June 2022 | Refer to SDI 18.1 - 18.2 for actual achievement | 03 Environmenta I Programmes implemented as per District Wide Environmenta I Management Plan by 30 June 2023 | Refer to SDI 18.1 - 18.2 for actual achievement | Refer to SDI 18.1 - 18.2 for actual achievement | Refer to SDI 18.1 - 18.2 for actual achievement | Health and Comm Serv |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|--|----------------|------------------------------------|--|--|---|---|---|---|--------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Waste manageme nt programm e implement ed in 2 local municipaliti es | SDI-18.1 | 900 000 | 1 Waste management programme implemented in 2 local municipalities by 30 June 2022 | Achieved. The project is currently being implemented and monitored in accordance with the business plan. Engagements were conducted with Enoch Mgijima and Inxuba Yethemba LM's on the 14th July 2021 and 05 August 2021. The project was implemented and monitored in accordance with the business plan | 1 Waste management programme implemented in 2 local municipalities (Engcobo and Intsika Yethu LM) by 30 June 2023 | Achieved: 1 Waste management programme implemented in 2 local municipalities (Engcobo and Intsika Yethu LM) by 30 June 2023 | | | Health and Comm Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Р | erformance Reportir | ng | |
|---------------------------|------------|--|----------------|------------------------------------|--|---|--|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| Municipal Health Services | | Number of Air Quality manageme nt programm e implement ed | SDI 18.3 | OPEX | Air Quality management programme implemented by 30 June 2022 | Achieved. 8 inspections conducted in Eight (8) places and were found compliant with the legislative prescripts. Dukathole Brickworks and Tau Pele Asphalt & Emulsion plant, Queenstown Clay Bricks & Greens Sawmill, Rolfs Laboratories in Middleburg and H&I Construction at Ntibaneni (R61) and Super Bricks & Blocks Company in Khowa and Mayongo Bricks, Poly location in Cofimvaba were found compliant with the legislative prescripts. | 1 Air Quality management programme implemented by 30 June 2023 | Achieved. 11 inspections conducted in accordance with air quality management act and air quality management plan | | | Health and Community Services |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | Р | erformance Reportir | ng | |
|--------------------------|--------------|---|----------------|------------------------------------|---|--|--|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| Environmental Management | | Number of Climate change programm es implement ed | SDI-18.2 | | 1 Climate change programmes implemented by 30 June 2022 | Achieved. 1 Climate change programme on Rural Sustainable Villages and small-scale wind- water pumping project. has been implemented. The Rural Sustainable Villages Project in 5 Local Municipalities. and small-scale wind- water pumping project in 2 local municipalities was implemented and monitored. | 1 Climate change programmes implemented by 30 June 2023 | Achieved. 1 Climate change programmes implemented by 30 June 2023 | | | Health and Community Services |
| KPA: | 3: LOCAL ECO | NOMIC DEVE | LOPI | MENT | | | | Weight: 20% | | | |
| BRO | AD STRATEGIC | OBJECTIVE | 3: To | ensure deve | lopment and imple | mentation of region of scale and social | al economic stra | tegies and effective Sp | atial Planning and L | and Use | |
| <u> </u> | | KPI | appro | aciles as univ | | of Performance | Corresion. | Р | erformance Reportin | ng | |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | P | erformance Reportin | na | |
|---------------|---|--|----------------|------------------------------------|---|--|--|---|--|---|-------------------------------|
| Priority Area | Objectives | .w. | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | Measurable Objectives | | | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | SDBIP Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| TOWN PLANNING | To ensure provision for the inclusive, development al, equitable and efficient spatial planning by 2030 | Number of Small town revitalizatio n programm es implement ed | LED-2 | R2 500 000 | 01 Small Town Revitalization programmes implemented by 30 June 2022 | Achieved. Small Town Revitalisation programme implemented. Project completed as per ToR and Project implementation Plan. Engagements with Intsika Yethu regarding the Tsomo project were held and the business plans | 01 Small Town Revitalization programmes implemented by 30 June 2023 | Not Achieved. Process of procurement is proceeding as Business Plans from the 3LMs has been submitted to CHDM, ToR developed and awaiting SCM for BSC to be presented. ToRs were submitted to BSC for procurement however advised to by CFO to put them on hold due to Budget | Implementation of the Programme delayed due CHDM Financial challenges. | BSC to prioritise sittings and look into Specifications | Strategic Management Services |

| | Measurable | KPI | | D | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|--------------------|---|---|----------------|------------------------------------|---|--|--|---|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | were submitted; procurement not yet facilitated. Hofmeyer project; procurement has been facilitated, the process is incomplete owing to budget related constraints; ultimately the target was adjusted owing to budget constraints | | Constraints. Hofmeyer STR Terms of Reference presented to BSC and next is advertising as this was delayed by Budget Constraints | | | |
| TOURISM & HERITAGE | To Contribute to economic development and growth in the district as envisaged in the NDP 2030 | Number of Tourism developm ent & Heritage Preservati on programm es | P-G-P- | | 02 Tourism development & Heritage Preservation programmes implemented by 30 June 2022 | Refer to LED 6.1 - 6.2 for actual achievement | 02 Tourism development & Heritage Preservation programmes implemented by 30 June 2023 | Refer to LED 6.1 - 6.2 for actual achievement | Refer to LED 6.1 - 6.2 for actual achievement | Refer to LED 6.1 - 6.2 for actual achievement | IPED |

| | Measurable | easurable KPI bjectives | | | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|------------|--|----------------|---|---|---|---|--|--|--|-----------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | implement ed | | | | | | | | | |
| | | Number of Tourism developme nt programm es implement ed | LED-6.1 | R 1 000 000,00 | 1 Tourism development programmes implemented 30 June 2022 | Achieved. 1 Tourism development programmes implemented through the implementation of the SLA with CHARTO | 1 Tourism development programmes implemented 30 June 2023 | Not Achieved. Funding could not be transferred to Charto because of non-accountability by Charto on funds transferred the previous year. Target will be adjusted midyear to support Local Tourism Organizations directly not via Charto. | Engagements with the LTO'S could not be finalised | Target is going to be implemented in quarter 1 of the 2023/2024 financial year | IPED |
| | | Number of Heritage Preservatio n programm es implement ed | LED-6.2 | R5 300 000 (Sabalele: R1 000 000) (Chris Hani month: R4 000 000) (Preservati on of Heritage | 1 Heritage Preservation programmes implemented 30 June 2022 | Achieved:1 Heritage Preservation programmes implemented. SLA implemented 2.Stakeholder engagements conducted. Quarterly report on implementation of the SLA | 1 Heritage Preservation programmes implemented 30 June 2023 | Not achieved. Heritage stakeholder engagement was held through Technical Reference Group meeting. 3. Implementation of the CHDM Month concept document continues till March 2024. | Implementation of the SLA was not achieved, funds to IYLM were not transferred. The ownership of the Centre is not clear | | IPED |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Р | erformance Reportir | ng | |
|---------------|------------|-----|----------------|------------------------------------|---|---|-------------------------------|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | site: R300 000) | | compiled and submitted. (1. SLA with Intsika Yethu for Sabalele is in place. 2. Stakeholder engagement in the form of Reference Group meeting was held (Meeting was held on the 23rd of November 2021, 31st March and 02 June 2022). 3. SLA for Sabalele implemented 4. Concept document on Chris Hani month developed, presented to Council for adoption, adopted and implemented. | | | | | |

| | Measurable KPI Objectives | | D | Comparison | of Performance | SDBIP | Po | erformance Reportir | ng | | |
|----------------------|---------------------------|--|----------------|------------------------------------|---|---|---|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Forestry programm es implement ed | 2 - GЭN | | 02 Forestry programmes implemented by 30 June 2022 | Refer to LED 7.1 - 7.2 for actual achievement | 01 Forestry programmes implemented by 30 June 2023 | Refer to LED 7.1 - 7.2 for actual achievement | Refer to LED 7.1 - 7.2 for actual achievement | Refer to LED 7.1 - 7.2 for actual achievement | IPED |
| FORESTRY DEVELOPMENT | | Number of Charcoal programm es supported | LED - 7.1 | R 800 000,00 | 1 Charcoal support programmes implemented by 30 June 2022 | Not Achieved. The SCM process for the acquisition of the tractor was started and followed. 2.Target achieved. SCM referred the process to Fleet Office to purchase the tractor according to their process. The fleet management Office is attending to the matter. There were challenges that were encountered on the procurement processes of the Tractor by BTO | 1 Charcoal support programmes facilitated for implemented by 30 June 2023 | Achieved. Implementation of the project has been facilitated and monitored. | | | IPED |

| | Measurable | KPI | | D | Comparison | of Performance | SDBIP | Po | erformance Reportir | ng | |
|---------------|----------------|---|----------------|------------------------------------|---|--|---|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Nursery programm es supported | LED - 7.2 | R 600 000,00 | 1 Nursery programmes supported by 30 June 2022 | office. The challenges resulted on the support for Charcoal programme not being implemented. The programme to be reviewed for 2022-2023 FY. Achieved. 1 Nursery programmes supported through the signing, implementation and monitoring of the SLA with Intsika Yethu LM (SLA has been signed with Intsika Yethu for the Nursery project, implemented and monitoring conducted | 1 Nursery programmes supported by 30 June 2023 | Not Achieved. Implementation of the project has been facilitated and monitored. | | | IPED |
| KPA | 4: FINANCIAL I | MANAGEMEN | T AN | D VIABILITY | | | | Weight: 20% | | | |

CHRIS HANI DISTRICT MUNICIPALITY 1ST DRAFT ANNUAL PERFORMANCE REPORT - OPERATIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN 2022/23 FINANCIAL YEAR KPI Measurable **Comparison of Performance SDBIP Performance Reporting Objectives** Programm Annual **Revised SDBIP** Actual (1.Please indicate Variances In case of none Budget Target Indicator Code **Annual Target Performance** Achieved or Not (Reason for Non. achievement Allocation 2022/2023 **Priority Area** under/Over 2021/2022 **Achieved** provide Remedial Custodian 2. Indicate below Achievement) (Corrective Action) that what you have **Achieved or under** Achieved) Broader Objective 5: To Ensure an Efficient and Co-ordinated Financial Management that Enables CHDM to deliver its Mandate Achieved, Roll Achieved-Number of 1 Funded 1 Funded over adjustment Funded budget compiled budget Submission of the compiled and budget and approved budget application roll-over application to Council, the approved compiled by 30 June 2022 has been approved by and approved by 30 June 2023 roll over will be approved Council on 25 included in the adjustment budget. August 2021; Roll **Budget and Treasury Office** over application Council resolution for letter was sent to Adjustment Budget and Draft Budget and Provincial and National Treasury approval of the -1. Budget on 30 August FΜV 2021; draft Budget compiled and proof of submission to EM. Final budget presented to Council and approved

| | Measurable | | | Comparison | of Performance | SDBIP | Р | erformance Reportii | ng | | |
|---------------|------------|---|----------------|------------------------------------|--|--|---|--|---|---|----------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of MFMA Monitoring reports compiled and approved | FMV - 1.2 | | 1 MFMA Monitoring report compiled and approved by 30 June 2022 | Refer to FMV - 1.2.1 to FMV - 1.2.3 for actual performance | 1 MFMA Monitoring report compiled and submitted by 30 June 2023 | Refer to FMV - 1.2.1 to FMV - 1.2.3 for actual performance | Refer to FMV - 1.2.1 to FMV - 1.2.3 for actual performance | Refer to FMV - 1.2.1 to FMV - 1.2.3 for actual performance | Budget and Treasury |
| | | Number of Section 71 reports compiled and submitted | FMV - 1.2.1 | | 1 MFMA Monitoring report compiled and approved by 30 June 2022 | Achieved. MFMA Monitoring reporting implemented. 12 section 71 reports, Section 72 report and 4 Section 52 (d) reports compiled and submitted as per the requirements of the act and regulations | 12 Section 71 reports compiled and submitted by 30th June 2023 | Achieved. 12 Section 71 reports compiled and submitted | | | Budget and Treasury Office |
| | | Number of Section 52 (d) reports compiled and approved | FMV - 1.2.2 | | 1 MFMA Monitoring report compiled and approved by 30 June 2022 | Achieved. MFMA Monitoring reporting implemented. 12 section 71 reports, Section 72 report | 4 Section 52(d) MFMA reports compiled and approved by 30 June 2023 | Achieved. 4 Section 52(d) MFMA reports compiled and approved | | | Budget and Treasury |

| | Measurable | KPI | | 2 | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|--|--|---|--|---|---|----------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | and 4 Section 52 (d) reports compiled and submitted as per the requirements of the act and regulations | | | | | |
| | | Number of Section 72 reports compiled and approved | FMV - 1.2.3 | | 1 MFMA Monitoring report compiled and approved by 30 June 2022 | Achieved. MFMA Monitoring reporting implemented. 12 section 71 reports, Section 72 report and 4 Section 52 (d) reports compiled and submitted as per the requirements of the act and regulations | 1 Section 72 report compiled and approved by 30 June 2023 | Achieved. 1 Section 72 report compiled and approved | | | Budget and Treasury Office |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|---|--|--|--|---|---|----------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Updated GRAP compliant Asset Registers reconciling to the General ledger | FMV - 5.1 | OPEX | 1 Updated GRAP compliant Asset Registers reconciling to the General ledger compiled by 30 June 2022 | Achieved, 1. All quarter additions and reconciliation to the GL have been done and submitted in all quarters 2. An updated Registers Reconciling to the GL has been submitted in quarter 1 for the Annual Target 30 June 2022. (Please note that the updated Registers for the year ending 30 June 2022 will be submitted in the First quarter 2022/23 | 1 Updated GRAP compliant Asset Registers reconciling to the General ledger compiled by 30 June 2023 | Not Achieved | | | Budget and Treasury Office |

| | Measurable | KPI | | - | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|--|--|---|--|---|---|----------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of GRAP Compliant Inventory Registers implement ed | FMV - 5.2 | OPEX | 01 GRAP Compliant Inventory Registers implemented by 30 June 2022 | Achieved. 1 GRAP Compliant Inventory Registers implemented (annual inventory register and Inventory count conducted, 2. inventory recons updated, 3. Purchases(GL) 4. Inventory count conducted , 5. Monthly inventory Purchases (GL) and reconciliation submitted | 01 GRAP Compliant Inventory Registers implemented by 30 June 2023 | Achieved. | | | Budget and Treasury Office |

| | Measurable | KPI | - D. | _ | Comparison | of Performance | SDBIP | P | erformance Reportii | ng | |
|---------------|------------|---|----------------|------------------------------------|--|---|--|---|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of MSCOA version 6.6 implement ed | FMV - 7.1 | OPEX | 1 MSCOA version 6.5 implemented by 30 June 2022 | Achieved. 1 MSCOA version 6.5 implemented. 1. MSCOA Compliant 21/22 budget and Rollover adjustment budget uploaded 2. Monthly Data Strings to National Treasury before the 10th working day of the month submitted. | 1 MSCOA version 6.6 implemented by 30 June 2023 | Achieved. 1. Uploading of MSCOA Compliant adjustment budget 2022/232. Submission of Monthly and adjusted data Strings to National Treasury before the 10th working day of the month | | | Budget and Treasury Office |
| | | Number of Pay day system integration s conducted | FMV - 7.2 | OPEX | 12 Pay day system integrations conducted by 30 June 2022 | Achieved. 12 Pay day system integrations conducted. Payday integrations and SARS PAYE. 1 SARS PAYE submitted, Integrating Pay | 12 Pay day system integrations conducted by 30 June 2023 | Achieved - Integrations and SARS | | | Budget and Treasury Office |

| | Measurable KPI Comparison of Performance SDBIP Performance Reporting | | | | | | | | | | | | |
|---------------|--|--|----------------|------------------------------------|---|---|--|--|---|---|----------------------------|--|--|
| | | KPI | | _ | Comparison | of Performance | | P | erformance Reporti | ng | | | |
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian | | |
| | | | | | | day with Financial system 2. SARS PAYE annual submissions | | | | | | | |
| | | Number of Solar modules activated | FMV - 7.3 | OPEX | 4 Solar modules activated by 30 June 2022 | Achieved. All modules activated (Creditor's and; Inventory, Fixed Asset Management and contracts management Modules) All modules activated, training not done | 5 Solar modules activated by 30 June 2023 | Not Achieved. | | | Budget and Treasury Office | | |
| | NO- 5 GOOD G | | | | - | | | | | Weight: 20% | | | |
| BRO | AD STRATEGIC | | 4: To | create an Ef | ficient, Effective, A | ccountable and Perf | formance-oriente | ed Administration | | | | | |
| ₽ - | | KPI | _ | | Comparison | of Performance | | P | erformance Reporti | ng | | | |

| Objectives | KPI | | | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | | |
|----------------|--|--|----------------|------------------------------------|--|--|--|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | Measurable Objectives | | | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | SDBIP Annual Target | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | To empower Citizens through Communicati on, Public Participation and | Number of Communic ation programm es implement ed | GGPP - 1 | OPEX | 2 Communication Programmes implemented by 30 June 2022 | Refer to GGPP- 1.2 for actual achievement | 2 Communicatio n Programmes implemented by 30 June 2023 | Refer to GGPP-1.2 for actual achievement | Refer to GGPP- 1.2 for actual achievement | Refer to GGPP-1.2 for actual achievement | Strategic Management |
| Communications | stakeholder engagement. | Number of Internal Communic ation Manageme nt Programm e implement ed | GGPP 1.2 | OPEX | 1 Internal Communication Management Programme implemented by 30 June 2022 | Achieved: 181 information sharing emails circulated to staff; 12 Newsflashes produced; 47 Weekly diaries produced; 12 Inner View newsletters produced; 25 events supported; 302 posters and leaflets produced; Branding material | 1 Internal Communicatio n Management Programme implemented by 30 June 2023 | Achieved. 1 Internal Communication Management Programme implemented | | | Strategic Management Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|-------------------------|---|--|----------------|------------------------------------|---|---|--|--|---|---|----------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | produced: 1000 Wall Calendars; 1000 Faces of Council; 300 Desk Calendars 2 wall banners, 2 pull up banners, 2 tear drop banners. | | | | | |
| AGEMENT | To empower Citizens through Communica tion, Public Participatio n and stakeholder | Number of Citizen Empower ment Programm es implement ed | GGPP - 2 | OPEX | 01 Citizen Empowerment Programme implemented by 30 June 2022 | Refer to GGPP - 2.1 to 2.17.7 for actual achievement | 01 Citizen Empowermen t Programme implemented by 30 June 2023 | Refer to GGPP - 2.1 to 2.17.7 for actual achievement | Refer to GGPP - 2.1 to 2.17.7 for actual achievement | Refer to GGPP - 2.1 to 2.17.7 for actual achievement | Strategic Management |
| STAKE HOLDER MANAGEMENT | engagement | Number of Stakeholde r engageme nt activities implement ed | GGPP - 2.1 | | 8 Stakeholder engagement activities implemented by 30 June 2022 | Achieved. 08 Stakeholder engagements were conducted. (1. Stakeholder engagement with Public Participation Committee of the ECLeg was implemented.2. Stakeholder | 8 Stakeholder engagement activities implemented by 30 June 2023 | Achieved. 8 Stakeholder engagement activities implemented | | | Strategic Management Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|-----|----------------|------------------------------------|---|--|-------------------------------|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | engagement on tourism and Heritage month was implemented. Preparation meeting for 16days of activism held on the 10th November 2021 with the office of the Premier, Emalahleni LM. An internal stakeholder management meeting on Disaster Mitigation in preparation international day for disaster reduction held on the 12th October at Disaster Management Offices | | | | | |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|------------------|------------|--|----------------|------------------------------------|---|---|--|---|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| Communications | | Number of District Communic ation Coordinati on Forums conducted | GGPP - 2.2 | OPEX | 4 District Communication Forums coordinated by 30 June 2022 | Achieved: 4 District Communication Forums conducted and 1 Training of Councillors conducted (District Communication Forum coordinated on 16 September 2021, 13 December 2021, 11th January 2022 and 16 May 2022 | 4 District Communicatio n Forums coordinated by 30 June 2023 | Achieved: 4 District communication Forum conducted on 18 August 2022, 01 November 2022, 2 March 2023 and 2 March 2023 | | | Strategic Management Services |
| Speaker's Office | | Number of District Speaker's Forums conducted | GGPP - 2.3 | OPEX | 4 District Speaker's Forums conducted by 30 June 2022 | Not Achieved. District Speaker's forum could not sit in quarter 2 (District Speakers forum conducted on the 15 September 2021, | 4 District Speaker's Forums conducted by 30 June 2023 | Achieved. 4 District Speaker's Forums conducted (07 September, 09 November, March 2023 and 01 June 2023) | | | Strategic Management |

| | Measurable | KPI | | Б | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|-------------------|------------|---|----------------|------------------------------------|--|--|--|---|---|---|----------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | 09 March 2022 and 24 May 2022) | | | | | |
| Municipal Support | | Number of IGR Forums conducted | GGPP - 2.4 | OPEX | 4 IGR Forums conducted by 30 June 2022 | Achieved. All 4 IGR meetings were conducted (05th August 2021, 11th November 2021, 22nd February 2022 and 17th May 2022) | 4 IGR Forums conducted by 30 June 2023 | Achieved: 5 IGR Forums conducted on the 04th August 2022 and 14 November 2022. 01 Special Technical IGR Forum On the 23 March 2023. 01 Technical JOC conducted on the 15th February 2023. 01 Social and Economic Social | | | Strategic Management Services |

| | Measurable | KPI | | D | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|----------------|------------|--|----------------|------------------------------------|--|---|--|--|--|---|-------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | Focus Group meeting conducted on the 22 Feb 2023. 01 Economic Development Focus Group conducted on the 22 Feb 2023. Special Technical IGR Forum convened on the 04th April 2023 virtually at 10:00. Technical JOC convened virtually on the 08th May 2023 at 15:00. Special Technical IGR convened virtually on the 23rd May 2023 at 08:00 | | | |
| Mayor's office | | Number of DIMAFO Forums conducted | GGPP - 2.5 | OPEX | 4 DIMAFO Forums conducted by 30 June 2022 | Achieved. 4 DIMAFO Forums conducted. DIMAFO Forum conducted on the 03rd of September and 14th of December | 4 DIMAFO Forums conducted by 30 June 2023 | Not Achieved: 02 DIMAFO's conducted on the 25th August 2022 and 24 November 2022 | Forums were postponed due to other important Council matters | | Strategic Management |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|------------------------------|------------|---|----------------|------------------------------------|---|--|---|--|---|---|----------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | 2021, 10th of March and 26th of May 2022 (Virtual). | | | | | |
| Waste Management | | Number of District Waste Manageme nt Forum conducted | GGPP 2.6 | OPEX | | | 4 District Waste Management Forum conducted by 30th June 2023 | Achieved. District Waste Management Forums conducted at Dr AB Xuma LM on the 28 Sept. 22; Sakhisizwe LM on the 01 Dec. 2022; Intsika Yethu LM on the 13th March 2023 and at Enoch Mgijima LM on the 22nd June 2023 | | | Health and Community Services |
| Municipal Health Services | | Number of District Funeral Parlour's Forum conducted | GGPP - 2.7 | OPEX | | | 4 District Funeral Parlour's Forum conducted 30th June 2023 | Achieved. 4 District Funeral Parlour's Forum conducted virtual on 30 August 2022, 22 Nov. 2022, 21 February 2023 and a physical meeting on the 20 June 2023 at Thobi Kula Side Hall, EMLM | | | Health and Community Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------------------------------|------------|---|----------------|------------------------------------|---|--|---|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| Fire Services | | Number of District Fire coordinatio n forums conducted | GGPP - 2.8 | OPEX | | | 4 District Fire Coordination Forum conducted by 30th June 2023 | Achieved, 4 District Fire Coordination Forum was held virtual on the 22 September 2022, the 16 November 2022, 15 March 2023 and 27 June 2023, physical meetings. | | | Health and Community |
| Disaster and Environmental Management | | Number of Environme nt and climate change forum conducted | GGPP-2.9 | OPEX | 4 Disaster advisory, Environment and climate change forum conducted by 30 June 2022 | Achieved. The CHDM Disaster Management Advisory, Environment and Climate Change Forum were held via Microsoft Teams due to COVID-19 Restrictions and were held on 14th of September and 11th of November 2021 and 18th May 2022 via Microsoft Teams due to COVID-19 Restrictions | 4 Disaster advisory, Environment and climate change forum conducted by 30 June 2023 | Achieved. 4 Disaster advisory, Fire Services, Environment and climate change forums were held on the 22 September 2022, 17th November, 09 March 2023 and 26 June 2023 via Microsoft Teams. | | | Health and Community Services |

| | Measurable | Measurable KPI Objectives | | D | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|---|--|---|--|---|---|----------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| LED | | Number of Human Settlement forums conducted | GGPP - 2.10 | OPEX | 4 Human Settlement forums conducted by 30 June 2022 | Achieved. All 4 Human Settlement forums were conducted. Forum held on the 02nd September 2021, 09th December 2021, 15th March and 09th June 2022 | 4 Human Settlement forums conducted by 30 June 2023 | Achieved: 4 Human Settlements Forum meetings held on the 13 September, 18 November 2022, 7th of March 2023 and on the 7th of June 2023 | | | IPED |
| | | Number of LED forums conducted | GGPP - 2.11 | OPEX | 4 LED forums conducted by 30 June 2022 | Achieved. 4 LED Forums conducted. The LED Forum session was held on the 12 August 2021, 21 October 2021, 14 March and 14 June 2022 | 4 LED forums conducted by 30 June 2023 | Achieved: 4 LED Forums held on 28 July, 22 November 2022, 01 March 2023 and 01 June 2023 | | | Director: IPED |
| PLANNI | | Number of Spatial Planning | GGPP - | | 4 Spatial Planning forums conducted by 30 June 2022 | Achieved. 4 Spatial Planning forums conducted. Forums | 4 Spatial Planning forums | Achieved. 4 Spatial Planning Forums conducted on the 13 September 2022, 15 | | | SMS |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|--|--|--|--|--|---|---------------------|
| Driority Aros | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | forums conducted | | | | conducted for the term virtually on the 02nd September and 07th December 2021, 15th March and 09th June 2022 | conducted by 30 June 2023 | November 2022, 07 March 2023 and 07 June 2023 | | | |
| | | Number of IDP Rep forums conducted | GGPP - 2.13 | OPEX | 4 IDP Rep forums conducted by 30 June 2022 | Achieved. 4 IDP Rep forums conducted. IDP/Budget/PMS Rep Forum set on the 30th Sept 2021, 14th December 2021, 10th March and 26th May 2022 Virtually | 4 IDP Rep forums conducted by 30 June 2023 | Not Achieved. 3 IDP Rep Forums were conducted Forum on 08 September 2022, 24 November 2022 and 25th May 2023. | The forum meeting scheduled for the quarter 3 was postponed owing to other council matters | | SMS |
| | | Number of Technical Managers forums conducted | GGPP - 2. | | 4 Technical Managers Forum conducted by 30 June 2022 | Not Achieved. Only 2 Technical Manager's Forum meetings were conducted in the | 4 Technical Managers Forum conducted by 30 June 2023 | Not Achieved 3 Technical Managers Forum conducted | due to unavailability of Sector Department | meeting scheduled for 2 November 2022 | Engineerin g and |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|------------|--|----------------|------------------------------------|---|---|--|--|---|--|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | 2nd and 3rd quarter (31st March 2022), Clashing with other priorities of the Council. To be held in the first quarter. Awaiting date from DWS | | | (COGTA) for the 1st Quarter. | | |
| | | Number of Chief Financial Officers Forums conducted | GGPP - 2.15 | | | | 4 Chief Financial Officers Forums conducted by 30 June 2023 | Not achieved | Non availability of CFO's from LM's | The forum will sit in Q1 of the 2023/2024 | Budget and Treasury Office |
| | | Number of Chief Whips Forums conducted | GGPP - 2.16 | | | | 4 Chief Whips Forum conducted by 30 June 2023 | Not Achieved. 2 Chief Whips Forum conducted in Q1 and Q4 | None response from Chief Whips at Local Level | Visits to Local Municipalities by Chief Whip in the next Quarter to encourage participation | Strategic Management |

| | Measurable | KPI | | 1 | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|------------------|------------|---|----------------|------------------------------------|---|---|--|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| Speaker's Office | | Number of MPAC meetings convened | GGPP - 2.17 | | 4 District MPAC Forums conducted by 30 June 2022 | Not Achieved. Support from GIZ on matters relating to MPAC was solicited from GIZ, and an indication was that a service provider was solicited to support municipality revive the District MPAC Forum. TOR Not yet developed due to unavailability of COGTA and SALGA assistance. | 4 MPAC meetings convened by 30 June 2023 | Achieved. 4 MPAC quarterly meeting | | | Strategic Management Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Po | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|--|---|---|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Women Caucus activities implement ed | GGPP - 2.18 | | 2 Women caucus activities implemented and 4 Quarterly meeting convened by 30 June 2022 | Not Achieved - 2 woman month programmes implemented at Inxuba YeThemba on 11 August 2021 and Enoch Mgijima on 27 August 2021. Only 2 quarterly meeting implemented on the 22 July 2021 and 04th May. 1. Induction of Women Caucus conducted on 14 June 2022. (i.e. Women' and s Induction) 2. Women's Seminar conducted on 23 24 June 2022. | 2 Women caucus activities implemented by 30 June 2023 | Achieved. 4 Quarterly meetings. 2 women month activities conducted. Quarterly Meeting were held on the 30/09/2022 2. Engagements with Maria Louw High School on the 07/09/2022 and Visit to LMs 14/09/2022 and GBV Victim at Enoch Mgijima LM on the 21/09/2022. Extended Women Caucus Meeting was held on the 15/11/2022. Quarterly Meeting held on the 13/12/2022 and 2 quarterly meetings conducted on 05/06/2023 and 23/06/2023. | | | Strategic Management Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Pe | erformance Reportii | ng | |
|---------------|------------|---|----------------|------------------------------------|---|---|---|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Moral Regenerati on Movement activities implement ed | GGPP - 2.19 | | 1 Moral Regeneration Movement activities implemented and 4 quarterly meetings by 30 June 2022 | Achieved - 1. MRM month of handing over of blankets to elderly at Inxuba YeThemba on 27 August 2021, Enoch Mgijima and Emalahleni conducted on the 31 July 2021 and Revival of Sakhisizwe local structure on 06 September 2021. 2. MRM meeting held on the 18 August 2021 Launch of the Structure on 11 March 2022 & Prayer at Inxuba Yethemba on 31 March 2022 2. 4 Quarterly meetings 18 August 2021, 10 May 2022 and 22 June 2022 | 1 Moral Regeneration Movement activities implemented and 4 quarterly meetings by 30 June 2023 | Achieved. 1. Collaboration of Mandela Day with senior citizens of John Voster Old Age Home on 18/07/2022 2. Prayer Day at Dr AB Xuma LM at Qutubeni Location 31/07/2022 3. Prayer Day at Indwe, Emalahleni LM on the 23/08/2022. 1.Quarterly meeting on the 08 November 2022. 2. MRM District Prayer and Dialogue held on the 07/12/2022. Quarterly meeting conducted on the 20/02/2023. MRM meeting on 17 May 2023. MRM Executive meeting on 24 May 2023. | | | Strategic Management Services |

| | Measurable | KPI | | D | Comparison | of Performance | SDBIP | Po | erformance Reportir | ng | |
|---------------------------------------|--|--|----------------|------------------------------------|---|--|---|---|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of District Initiation activities implement ed | GGPP - 2.20 | | 2 District Initiation activities Implemented. 4 Quarterly meetings convened by 30 June 2022 | Achieved - Covid 19 Compliance monitoring and 1 quarterly meeting conducted on the 10 August 2021, 03 May 2022 and 08 June 2022. Bush Tracking and Awareness campaigns conducted | 2 District Initiation activities Implemented. 4 Quarterly meetings convened by 30 June 2023 | Achieved. Winter Initiation Season Meeting on the 25/08/2022 2. District Initiation Forum Meeting for the preparation of Summer Initiation Season 2022 on the 14/09/2022. Summer Initiation Season Meeting on the 03/11/2022. Initiation Committee Meeting. Workshops and Training of Working Committees. | | | Strategic Management Services |
| Speaker's Office, Municipal Health | To empower Citizens through Communicati on, Public Participation and stakeholder engagement. | Number of Community Educationa I initiatives implement ed | GGPP - 2.21 | OPEX | 7 Community Educational initiatives implemented by 30 June 2022 | Refer to GGPP 2.17.1 - 2.17.7 for actual achievement | 7 Community Educational initiatives implemented by 30 June 2023 | Refer to GGPP 2.21.1 - 2.21.8 for actual achievement | Refer to GGPP 2.21.1 - 2.21.8 for actual achievement | Refer to GGPP 2.21.1 - 2.21.8 for actual achievement | Strategic Management |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|------------------|------------|-----------------------------|----------------|------------------------------------|---|--|---|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of | | | 4 Quarterly | Aphiound 4 | 4 Quartarly | Achieved 4 | | | |
| Speaker's Office | | Number of petitions managed | GGPP - 2.21.1 | | 4 Quarterly meetings facilitated on Petitions. 3 Capacity building initiatives implemented. 1 Civil education conducted by 30 June 2022 | Achieved. 4 Quarterly reports on petitions facilitated 2. 3 Capacity building programs for Councillors 3. 5 Public education programs implemented targeting Ward Committees. | 4 Quarterly meetings facilitated on Petitions. 1 public education conducted by 30 June 2023 | Achieved. 4 Quarterly meetings facilitated on 12 Petitions facilitated. 1 public education conducted | | | Strategic Management Services |

| | Measurable | KPI | 9 | 5 | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|--|----------------|------------------------------------|--|--|--|---|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of MPAC | | OPEX | Achieved. 4 Quarterly | Achieved. 4 Quarterly reports | 2 Capacity building | Achieved. Training Conducted on the | | | Se |
| | | Capacity building initiatives implement ed | GGPP - 2.21.2 | | reports on petitions facilitated 2. 3 Capacity building programs for Councillors 3. 5 Public education programs implemented targeting Ward Committees. | on petitions facilitated 2. 3 Capacity building programs for Councillors 3. 5 Public education programs implemented targeting Ward Committees. | initiatives implemented by 30 June 2023 | 31st of October 2022. Anoyher capacity building initiative was conducted by CoGTA on UIFW investigations on the 15 June 2023 for MPAC members. The invitation was to all 6 LM's as well | | | Strategic Management Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|------------------|------------|---|----------------|------------------------------------|--|--|--|--|---|---|----------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| Services | | Number of Health and hygiene awareness campaigns conducted | GGPP 2.21.3 | OPEX | 80 health and hygiene awareness campaigns conducted by 30 June 2022 | Achieved. 80 health and hygiene awareness campaigns conducted | 100 health and hygiene awareness campaigns conducted by 30 June 2023 | Achieved. 109 health and hygiene awareness campaigns conducted. | | | Health and Community Services |
| Municipal Health | | Number of Awareness campaigns provided to food handlers | GGPP 2.21.4 | OPEX | 4 Awareness provided to food handlers by 30 June 2022 | Achieved. 1 awareness was provided to Wilhem Stall Hospital Food Handlers, Middleburg; Jamma Boer Farm Food Handlers, Dordrecht and Andre Butchery Food Handlers, Khowa, | 8 Awareness provided to food handlers by 30 June 2023 | Achieved. 8 Awareness provided to food handlers | | | Health and Community Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|--|--|---|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Environme ntal Health calendar Days observed | GGPP 2.21.4.1 | OPEX | 4 Environmental Health calendar Days observed by 30 June 2022 | Achieved. 4 Environmental Health days observed. (2 Build -up Environmental Health days observed in Komani and Sada, Enoch Mgijima LM, Nonibe Primary School, Komani, Enoch Mgijima LM, 5 National Water Week Awareness's were observed at Cofimvaba, Intsika Yethu LM, Ngcobo LM, Cacadu, Emalahleni LM, Whittlesea, Enoch Mgijima LM, Cradock, Inxuba | 4 Environmental Health calendar Days observed by 30 June 2023 | Achieved. 12 Environmental Health calendar Days observed by 30 June 2023 | | | Health and Community Services |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|-----------------------------|------------|--|----------------|------------------------------------|---|---|--|---|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | YeThemba LM. Sanitation Week at Tembeni Primary School in Ngcobo. | | | | | |
| ENVIRONMENTAL MANAGEMENT | | Number of Environme ntal calendar Days observed | GGPP 2.21.4.2 | OPEX | 3 Environmental calendar Days observed by 30 June 2022 | Achieved. 3 Environmental Calendar Days observed. The programme was celebrated on the 08th September 2021, 22nd February 2022, 09 June 2022 | 3 Environmental calendar Days observed by 30 June 2023 | Achieved. 4 Environmental calendar Days observed (Arbor Day) at Manzezulu SSS, Machibini in EMLM, 2 x (Wetlands Day) at Maqanda SSS, Qotha Village in DR. AB Xuma LM and (World Environment Day) at Lusaka Community Hall in Inxuba Yethemba LM | | | Health and Community Services |
| DISAST | | Number of Disaster awareness programm | GGPP - | OPEX | 72 Disaster awareness campaigns | Achieved. 111 Disaster awareness campaigns were | 80 Disaster awareness campaigns | Achieved, 137 Disaster awareness campaigns conducted in LMs. | Over achieved due to high demand | | Health |

| | Measurable | KPI | <u>o</u> | D | Comparison | of Performance | SDBIP | Р | erformance Reportir | ng | |
|---------------|------------|--|-----------------|------------------------------------|---|--|---|--|---|---|-------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | es conducted | | | conducted by 30 June 2022 | conducted In LMs. This was Over Achieved by 39 Awareness's, we are still in the National State of Disaster due to COVID-19 and awareness programmes are in demand. | conducted by 30 June 2023 | | | | |
| | | Number of IDDR days observed | GGPP - 2.21.5.1 | | 1 IDDR days observed by 30 June 2022 | Achieved, 1 IDDR day observed | 1 IDDR days observed by 30 June 2023 | Achieved, 1 IDDR day observed on the 03 November 2022at Qutsa Village, Ward 7 Intsika Yethu local municipality. | | | Health and Community |
| FIRE | | Number of fire services awareness | GGPP - | OPEX | 48 Fire Services Awareness campaigns | Achieved. 98 Fire Service awareness campaigns | 80 Fire Services Awareness campaigns | Achieved. 144 Fire Service awareness campaigns conducted | | | Health |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reporti | ng | |
|-----------------------------|------------|---|----------------|------------------------------------|---|---|---|--|---|---|-----------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | campaigns implement ed | | | implemented by 30 June 2022 | implemented in Local Municipalities in Q1 - 24, Q2 - 24, Q3 - 25 and Q4 - 25 | implemented by 30 June 2023 | | | | |
| Environmental Management | | Number of Environme ntal manageme nt awareness campaigns conducted | GGPP - 2.21.7 | OPEX | 16 Environmental management awareness campaigns conducted by 30 June 2022 | Achieved, 17 Environmental management awareness programmes conducted | 24 Environmental management awareness campaigns conducted by 30 June 2023 | Achieved. 48 Environmental Management Awareness programmes conducted by 30th June 2023 | | | Director: Health and Community |
| Customer Care | | Number of Customer Education and awareness campaigns conducted | GGPP - 2.21.8 | OPEX | 28 Social facilitation activities on Customer Care implemented by 30 June 2022 | 34 Social facilitation activities on Customer Care implemented by 30 June 2022. 6 more social facilitation activities were conducted due urgent matters relating vandalism emerged. | 32 Social facilitation activities on Customer Care implemented by 30 June 2023 | Achieved. 39 Social facilitation activities on Customer Care implemented | | | Strategic Management Services |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|----------------|--|--|----------------|------------------------------------|--|---|---|--|---|---|-------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | To enhance communicat ion, stakeholder Managemen t and customer care | Number of Customer Care Managem ent Programm es implement ed | GGPP - 4 | OPEX | 01 Customer Care Management Programme Implemented by 30 June 2022 | Refer to GGPP - 4.1 for actual achievement | 01 Customer Care Management Programme Implemented by 30 June 2023 | Refer to GGPP - 4.1 for actual achievement | Refer to GGPP - 4.1 for actual achievement | Refer to GGPP - 4.1 for actual achievement | Strategic Management |
| | | Number of Customer satisfaction reports developed and submitted | GGPP-4.1 | | 1 Customer satisfaction report developed and submitted to the AO for actioning by 30 June 2022 | Achieved. 558 complaints not resolved. | 1 Customer satisfaction report developed and submitted to the AO for actioning by 30 June 2023 | Not Achieved. Quartely report on the progress of customer satisfaction survey developed | The survey took longer than expected due to other council business. | The target is extended to 1st quarter of 20223/24 FY | Strategic Management |
| Internal Audit | To ensure clean administratio n and accountable governance | Number of Risk based Internal Audit Plan developed and Implement ed | GGPP - 5 | 250 000,00 | 01 Risk based internal audit plan developed and implemented by 30 June 2022 | Achieved. 01 Risk based internal audit plan developed and implemented. 1 Risk Based Internal Audit Plan developed and approved by the | 01 Risk based internal audit plan developed and implemented by 30 June 2023 | Achieved. 01 Risk based internal audit plan developed and implemented (1 Risk Based Plan developed and approved by Audit Committee on the 19th of July 2022, 6 | | | Strategic Management |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|------------|--|----------------|------------------------------------|--|---|--|--|---|---|-------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | Audit Committee on the 22nd of July 2021. 1 Risk Based Audit and Mandatory Audit Assignment completed: Namely 1. Water Losses Management Audit 2. Risk Management Audit. 2 projects implemented as per the approved risk based internal audit plan. SCM and Asset Management . Q3 Audit of Performance Measures | | Projects implemented as per the approved risk based internal audit plan) | | | |
| Risk | | Number of Risk Managem ent Programm es implement ed | GGPP - 6 | | 01 Risk Management Programmes Implemented by 30 June 2022 | Refer to GGPP - 6.1 to 6.4 for actual achievement | 01 Risk Management Programmes Implemented by 30 June 2023 | Refer to GGPP - 6.1 to 6.4 for actual achievement | Refer to GGPP - 6.1 to 6.4 for actual achievement | Refer to GGPP - 6.1 to 6.4 for actual achievement | Strategic Management |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|--|--|--|---|---|---|----------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Risk Manageme nt Monitoring reports compiled and submitted. | GGPP - 6.1 | | 4 Risk Management Monitoring report compiled and submitted by 30 June 2022 | Achieved. Four risk management monitoring reports have been compiled and submitted | 4 Risk Management Monitoring report compiled and submitted by 30 June 2023 | Achieved. 4 Risk Management Monitoring report compiled and submitted | | | Strategic Management |
| | | Number of Anti-fraud and Corruption initiative conducted | GGPP - 6.2 | | 1 Anti-fraud and Corruption initiative conducted by 30 June 2022 | Achieved. Anti- fraud and Corruption risk workshop conducted | 1 Anti-fraud and Corruption initiative conducted by 30 June 2023 | Achieved. 1 Anti- fraud and Corruption initiative conducted (Anti-fraud and Corruption risk awareness conducted; Database on the Disclosures of financial interest developed) | | | Strategic Management Services |
| | | Number of Risk Assessme nts conducted | GGPP - 6.3 | | 1 Risk Assessments conducted by 30 June 2022 | Achieved. 1 Risk Assessments conducted | 1 Risk Assessments conducted by 30 June 2023 | Achieved. 1 Risk Assessments conducted | | | Strategic Managemen |
| | | Number of compliance monitoring reports | - GGPP | | 2 Compliance monitoring reports compiled | Achieved. Compliance monitoring reports in Q1 and Q3 | 2 Compliance monitoring reports compiled and | Achieved. 2 Compliance monitoring reports | | | Strategi c |

| | Measurable | | | _ | Comparison | of Performance | SDBIP | Pe | erformance Reportin | ng | |
|---------------|------------|---|----------------|------------------------------------|---|--|--|--|--|---|----------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | compiled and submitted | | | and submitted by 30 June 2022 | compiled and submitted. | submitted by 30 June 2023 | compiled and submitted | | | |
| | | Number of PMS Programm es Implement ed | GGPP - 7 | | 01 Organisational Performance Management Programmes Implemented by 30 June 2022 | Refer to GGPP - 7.1.1 to GGPP - 7.1.3 for actual achievements | 02 PMS programmes implemented by 30 June 2023 | Refer to GGPP - 7.1 to GGPP - 7.2 for actual achievements | Refer to GGPP - 7.1 to GGPP - 7.2 for actual achievements | Refer to GGPP - 7.1 to GGPP - 7.2 for actual achievements | Strategic Management |
| PMS | | Number of Organisati onal Performan ce Managem ent Programm es Implement ed | GGPP - 7.1. | | 01 Organisational Performance Management Programmes Implemented by 30 June 2022 | Refer to GGPP - 7.1.1 to GGPP - 7.1.3 for actual achievements | 01 Organisation al Performance Management Programmes Implemented by 30 June 2023 | Refer to GGPP - 7.1.1 to GGPP - 7.1.3 for actual achievements | Refer to GGPP - 7.1.1 to GGPP - 7.1.3 for actual achievements | Refer to GGPP - 7.1.1 to GGPP - 7.1.3 for actual achievements | Strategic Management Services |
| | | Number of Quarterly Performan ce Reviews conducted | GGPP - 7.1.1 | | 4 Quarterly Performance Reviews conducted by 30 June 2022 | Achieved. 4 Quarterly Performance Reviews conducted. Section 52(d), Mid-Year | 4 Quarterly Performance Reviews conducted by 30 June 2023 | Achieved. 4 Quarterly Performance Reviews conducted | | | Strategic Management |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | Pe | erformance Reportii | ng | |
|---------------|------------|---|----------------|------------------------------------|--|---|--|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | performance reviews conducted and a Section 72 report presented to Council structures (PAC, Mayoral Comm, IDP Rep Forum) and Council for compliance | | | | | |
| | | Number of SDBIP developed and submitted | GGPP - 7.1.2 | | 2 SDBIP developed and submitted by 30 June 2022 | Achieved. 2 SDBIPs developed and submitted (1st one presented to Council and approved in March, 30; 2022 and the other on the 29th June 2022) | 2 SDBIP developed and submitted by 30 June 2023 | Achieved. 1 Reviewed SDBIP developed, submitted to Council for approval on the 29th March 2023. Final draft SDBIP was prepared, a draft was presented to the Executive Mayor for noting 14days after the approval of the IDP and Budget; presented to the Mayoral Committee on the 21st May and approved by the EM | | | Strategic Management Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|--|--|---|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | on the 22 June 2023. Same was presented to Council for noting on the 28 June 2024 | | | |
| | | Number of Statutory performanc e reports compiled and submitted | GGPP - 7.1.3 | | 2 statutory performance reports compiled and submitted by 30 June 2022 | Achieved. Sec 72 and Annual Reports presented to Council and approved in January 2022 | 2 statutory performance reports compiled and submitted by 30 June 2023 | Achieved. 2 statutory performance reports compiled and submitted. (Draft Annual Performance report and draft annual report was prepared, presented to Council structures and council for noting and as well submitted to AG for compliance; Sec72 Performance Report and Annual report approved by council on the 25th January 2023) | | | Strategic Management Services |
| | | Number of Individual Performan ce | GGPP - | | 1 Individual Performance Management Programmes | Not Achieved. Delays in the sitting of formal assessment | 1 Individual Performance Management Programmes | Achieved. 1. Signing of Performance Agreements by HOD's facilitated and | | | Strategi c |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|---|---|----------------|------------------------------------|---|---|--|---|---|---|----------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Manageme nt Programm es Implement ed | | | Implemented by 30 June 2022 | panels. Delays in sitting of the panel for the assessments that were scheduled for Q3 affected the sessions that were scheduled for the performance reviews in Q4. Assessment dates included in the institutional calendar for prioritization | Implemented by 30 June 2023 | concluded in July 2022 2. Performance Reviews for Directors (Quarterly 1, mid- year, annual 2021/2022, and quarter 3) conducted | | | |
| SPECIAL | To facilitate and coordinate integrated Special Programmes | Number of Special Programm es implement ed | GGPP - 8 | 1 300 000,00 | 03 Special programmes implemented in line with the revised the strategy by 30 June 2022 | Refer to GGPP - 8.1 to GGPP - 8.3 for actual achievement | 03 Special programmes implemented in line with the revised the strategy by 30 June 2023 | Refer to GGPP - 8.1 to GGPP - 8.3 for actual achievement | Refer to GGPP - 8.1 to GGPP - 8.3 for actual achievement | Refer to GGPP - 8.1 to GGPP - 8.3 for actual achievement | Strategic Management Services |

| | Measurable | KPI | | - | Comparison | of Performance | SDBIP | Po | erformance Reportir | ng | |
|---------------|------------|--|----------------|------------------------------------|--|--|--|---|--|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of HIV,TB and STI's programm es implement ed as per SPU calendar and HIV,TB and STI's implement ation plan | GGPP - 8.1 | | 4 HIV,TB and STI's programme implementation as per SPU calendar and HIV,TB and STI's implementation plan by 30 June 2022 | Achieved. HIV,TB and STI Implementation Plan developed and submitted, 4 HIV, TB and STI programmes implemented as per SDBIP. District HIV, TB and STI programme conducted through COVID 19 Vaccination Pop Up site Launch held at Enoch Mgijima on the 02 September 2021. Provincial World AIDS Day held at WSU in | 4 HIV,TB and STI's programme implementatio n as per SPU calendar and HIV,TB and STI's implementatio n plan by 30 June 2023 | Achieved. HIV,TB and STI Implementation Plan developed and submitted, 6 HIV, TB and STI programmes implemented as per SDBIP | Partnership programmes with stakeholders afforded for CHDM to conduct 2 programmes | | Strategic Management Services |

| | Measurable | Objectives Program | D | Comparison | of Performance | SDBIP | Р | erformance Reportir | ng | | |
|---------------|------------|---------------------------|----------------|------------------------|---|---|-------------------------------|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | Whittlesea Enoch Mgijima on the 01 December 2021. STI & Condom Week held at Ikhala TVET College Campuses on 15- 17 February 2022. LGBTQI Rights awareness programme for LGBTQI Community from WSU and Ikhala TVET College in partnership with Office the Premier held at CDC Boardroom on 29 April 2022 | | | | | |

| | Measurable | ctives | | | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|--|---|--|---|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Mainstrea ming Programm es for Designated Groups implement ed as per SPU calendar | GGPP - 8.2 | | 4 Mainstreaming Programmes for Designated Groups implemented as per the mainstreaming plan by 30 June 2022 | Achieved. Mainstreaming implementation plan submitted and 6 SPU Mainstreaming programmes implemented. Women's Month Commemoration Memorial Lecture held at Ngcobo, Human trafficking programme at Ezibeleni on the 08 October 2021, and Provincial Launch of the 16 Days of activism on No violence against Women and Children at Ezinggqolweni village, Emalahleni on the 25 November 2021, GBV Prayer | 4 Mainstreaming Programmes for Designated Groups implemented as per the mainstreaming plan by 30 June 2023 | Achieved. Mainstreaming implementation plan submitted and 4 SPU Mainstreaming programmes implemented. District Older Persons Forum Election held at DSD Stone Building on the 29/05/2023 | | | Strategic Management Services |

| | Measurable | KPI | Programm | Comparison of | of Performance | SDBIP | Р | erformance Reportir | ng | | |
|---------------|------------|-----|----------------|------------------------|---|---|-------------------------------|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | against GBV held on the 27 Feb in McBride, Child Protection Week programmes in Cradock, on the 02 June 2022 and Graduation of Nyamukare DSD programme at Queens Primary School in Komani on the 13 June 2022 | | | | | |

| | Measurable | /es | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|--|--|--|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Youth developme nt programm es implement ed as per SPU calendar | GGPP - 8.3 | | 4 Youth development programmes implemented as per the Youth Development plan by 30 June 2022 | Achieved. 6 SPU Youth Development programmes implemented. 1 Youth Development Programme conducted in the form of a facilitation of Youth Development Funding Applications in partnership with the Office of the Premier. Sports programmes (Netball championships in Cape Town, Chris Hani Boxing Tournament and Support to Seven Stars FC, Training of 50 young | 1 Youth development programmes implemented as per the Youth Development plan by 30 June 2023 | Achieved. Draft Youth Development and implementation plan submitted and 6 SPU Youth Development programmes implemented | | | Strategic Management Services |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|----------------------------------|--|----------------|------------------------------------|--|---|--|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | people in partnership with NYDA on the 24 Nov 2021. NSFAS Mop-up Programme in Ikhala TVET College on 14 January 2022. Youth Business Indaba at Thobi Kula Sports Centre in Komani on the 10 June 2022 and Chris Hani Career and Business open day at Thobi Kula Indoor Sport Centre on the 24 June 2022 | | | | | |
| ISDM | To ensure integrated approach to | Number of Integrated Service Delivery | GGPP - | | 02 Integrated Service Delivery programmes | Refer to GGPP - 9.1 to GGPP - 9.2.2 for actual achievement | 02 Integrated Service Delivery programmes | Refer to GGPP - 9.1 to GGPP - 9.2.2 for actual achievement | Refer to GGPP - 9.1 to GGPP - 9.2.2 for actual achievement | Refer to GGPP - 9.1 to GGPP - 9.2.2 for actual achievement | Strateg |

| | Measurable KPI Objectives | | _ | Comparison | of Performance | SDBIP | P | erformance Reportii | ng | | |
|------------------|------------------------------|---|----------------|------------------------------------|--|---|--|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | service delivery | programm es implement ed | | | implemented by 30 June 2022 | | implemented by 30 June 2023 | | | | |
| | | Number of Ward War rooms Programm es supported as per Integrated Service Delivery Model | GGPP - 9.1 | | 01 Ward War rooms Programmes as per Integrated Service Delivery Model implemented by 30 June 2022 | Achieved. 05 War Room Programmes conducted as per Integrated Service Delivery Model implemented by 30 June 2022. High demand of community needs resulted to more programmes to be conducted | 01 Ward War rooms Programmes as per Integrated Service Delivery Model implemented by 30 June 2023 | Achieved. 1 Ward War rooms Programmes implemented as per Integrated Service Delivery Model | | | Strategic Management Services |
| Resear ch and | | Number of research and developme | GGPP - | | | | 1 research and development programmes | Not Achieved. 1 research project was submitted to the Accounting Officer | | | SMS |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|--|----------------|------------------------------------|--|---|--|--|---|---|---------------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | nt programm es conducted | | | | | conducted by 30 June 2023 | | | | |
| | | Number of Social facilitation Programm es implement ed as per Integrated Service Delivery Models | GGPP - 9.2 | R 24 141 695 | 1 Social facilitation Programmes implemented as per Integrated Service Delivery Models by 30 June 2022 | Refer to GGPP - 9.2.1 to GGPP - 9.2.2 for actual achievement | 1 Social facilitation Programmes implemented as per Integrated Service Delivery Models by 30 June 2023 | Refer to GGPP - 9.2.1 to GGPP - 9.2.2 for actual achievement | Refer to GGPP - 9.2.1 to GGPP - 9.2.2 for actual achievement | Refer to GGPP - 9.2.1 to GGPP - 9.2.2 for actual achievement | Engineering and Technical Services |
| QSI | | Number of MIG Social facilitation programm es implement ed | GGPP - 9.2.1 | | 01 MIG Social facilitation programmes implemented by 30 June 2022 | Achieved. 01 MIG Social facilitation programmes implemented | 01 MIG Social facilitation programmes implemented by 30 June 2023 | Achieved. 01 MIG Social facilitation programmes implemented | | | Engineering and Technical |
| | | Number of WSIG and RBIG Social facilitation programm es | GGPP - 9.2.2 | | 01 WSIG and 01 RBIG Social facilitation programmes implemented by 30 June 2022 | Achieved 01 WSIG and 01 RBIG Social facilitation programmes implemented | 01 WSIG and 01 RBIG Social facilitation programmes implemented | Achieved 01 WSIG and 01 RBIG Social facilitation programmes implemented | | | Engineering and Technical |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|-------------------|--|---|----------------|------------------------------------|---|---|---|---|--|---|------------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | implement ed | | | | | by 30 June 2023 | | | | |
| Municipal Support | | Number of Municipal Support programm es implement ed as per Municipal Support Model | 01- GGPP -10 | 100 000,00 | 01 Municipal support programme implemented as per Municipal Support Model by 30 June 2022 | Achieved. 01 Municipal support programme implemented as per Municipal Support Model | 01 Municipal support programme implemented as per Municipal Support Model by 30 June 2023 | Achieved: 01 Municipal Support programmes conducted as per the Municipal Support Model. Support was needed highly due the flooding incident in our local municipalities | | | Strategic Management Services |
| Planning | Development and implementati on of Credible Plans aligned to NDP 2030 | Number of Sector plans developed , reviewed and implement ed | GGPP-12 | | 8 Sector plans developed, reviewed and implemented by 30 June 2022 | Refer to GGPP - 12.1 to GGPP - 12.8 for actual achievements | 10 Sector plans developed, reviewed and implemented by 30 June 2023 | Refer to GGPP -12.1 to GGPP - 12.8 for actual achievements | Refer to GGPP - 12.1 to GGPP - 12.8 for actual achievements | Refer to GGPP -12.1 to GGPP - 12.8 for actual achievements | IPED/ S MS /Engin & Tech Serv / |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reporti | ng | |
|---------------|------------|--|----------------|------------------------------------|--|--|--|---|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number CHDM 2023-2024 IDP reviewed and adopted | GGPP-12.1 | R600 000 | 1 CHDM 2022- 2027 IDP developed and approved by 30 June 2022 | Achieved. Final 2022-2027 IDP was developed and approved by CHDM Council on the 25th May 2022. The IDP Development Process Plan and Framework were presented to the Council structures and was approved by Council on the 25th August 2021. Situational Analysis is being developed and Service Provider appointed for the latest information and software. Draft 2022-2027 IDP was adopted by CHDM Council on the 30 March 2022 | 1 CHDM 2023- 2024 IDP review developed and approved by 30 June 2023 | Achieved. 1 CHDM 2023-2024 IDP review developed and approved. IDP Framework Plan and IDP/Budget/PMS Process Plan adopted on the 31 August 2022, Situational Analysis report developed, Draft IDP Review for 2023-2024 adopted by Council on the 29 March 2023 and Final 2023-2024 IDP Review adopted on the 30 May 2023 | | | Strategic Management Services |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|-----------------------|------------|---|----------------|------------------------------------|--|---|---|---|--|--|------------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of | | OPEX | Consultation of | Not Achieved | 1 WSDP | Achieved. | | | |
| WSA | | Water Service Developme nt Plan reviewed and approved | GGPP-12.2 | OPEX | Stakeholders on development of WSDP conducted by 30 June 2022 - 2027 | Consultation of Stakeholders on development of WSDP conducted by 30 June 2022 - 2027. Collecting information and updating WSDP. Once updating of information is complete, draft WSDP will be available to engage internal Stakeholders. | reviewed and approved by 30 June 2023 | Final WSDP submitted to Council structures and council for approval | | | Engineering and Technical Services |
| INTERGRATE D HUMAN | | Number of integrated Human Settlement s plan reviewed and | GGPP-12.3 | | | | 1 Integrated Human Settlement Plan reviewed and Implemented | Not Achieved - ToR have been developed for review of Integrated Human Settlements Plan and submitted to SCM for Bid and Specification | Stakeholders have not been consulted for the review of sector plan. The service provider for the review of the | Due to delays on the procurement processes for the appointment of the service provider, the sector plan has not been reviewed as a | |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|------------------------|------------|---|----------------|------------------------------------|---|---|--|--|--|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | implement ed | | | | | | Committee. Facilitation on appointment of the Engineer has been conducted. | sector plan has not been appointed through SCM processes. | result the programme will be deferred to 2023-2024 FY for implementation. | |
| Stakeholder Management | | Number of Integrated Stakeholde r Manageme nt Plan reviewed and implement ed | GGPP-12.4 | OPEX | 01 Integrated Stakeholder Management Plan implemented by 30 June 2022 | Achieved. 1 Integrated Stakeholder Management Plan was implemented. Stakeholder engagements held on human traffic conducted with the NGO's, Hawks, SAPS and social development on the 05th October 2021. Preparation of inauguration of new council event | 01 Integrated Stakeholder Management Plan reviewed and implemented by 30 June 2023 | Not Achieved. Integrated Stakeholder Management Plan implemented | The plan could not be reviewed, owing to capacity related challenges | A manager has been appointed and commenced duty in May 2023 | Strategic Management Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|---|--|---|---|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | conducted on the 11th Nov 2021 | | | | | |
| | | Number of Protocol and Etiquette policies reviewed and implement ation plans Implement ed | GGPP-12.5 | OPEX | 1 Protocol and Etiquette policy and Implementation Plan implemented by 30 June 2022 | Achieved. 01 Protocol Policy Implemented. 2 Directive from the Office of the Presidency received in November 2021 (Nkosi Sipho Etwell Mahlangu and FW de Klerk respectively) on implementation of protocol and etiquette issues relating to hoisting of flags was implemented from the 17th - 23rd of November 2021. | 1 Protocol and Etiquette policy reviewed and Implementatio n Plan implemented by 30 June 2023 | Achieved. 1 Protocol and Etiquette policy reviewed and approved by Council Meeting of the 14th December 2022. The plan was implemented | | | Strategic Management Services |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | P | erformance Reportir | ıg | |
|-------------------------------|------------|--|----------------|------------------------------------|---|--|---|--|---|---|-------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | Implementation of Protocol orders- National Flag half must. Chief Ngangomhlaba Matanzima. | | | | | |
| Performance Management System | | Number of PMS Framework reviewed and approved | GGPP-12.6 | OPEX | 1 PMS Framework reviewed and approved by 30 June 2022 | Achieved. 1 PMS Framework reviewed and approved by 29th June 2022. The PMS Unit conducted a session to identify areas to be reviewed on the PMS Framework. Submissions from directorates collated during the assessments of managers were documented and | 1 PMS Framework reviewed and approved by 30 June 2023 | Achieved. Final Reviewed PMS Framework submitted to Council and approved. Stakeholder consultations on the review of the PMS Framework were held in the 3rd quarter with the SDBIP review sessions | | | Strategic Management Services |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | P | erformance Reportii | ng | |
|---------------|---|---|----------------|------------------------------------|---|---|---|--|---|---|----------------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | communicated via email to the PMS Committee in December 2021; to be discussed in a session to be held in January 2022. Draft PMS Framework presented to Council for noting. Final PMS Framework submitted and approved by Council on the 29th June 2022 | | | | | |
| | To ensure effects of disaster and fire are prevented or minimised | Number of CHDM Community Fire safety by- law developed and adopted by Council | GGPP - 12.7 | | 1 CHDM Community Fire safety by- law developed and adopted by Council by 30 June 2022 | Not achieved. The Draft Fire by-laws will undergo a District wide consultation process and the process will be concluded by the end of Q2 of the 2022/23 financial | 1 CHDM Community Fire safety by- law developed and adopted by Council by 30 June 2023 | Achieved. Consultation on the draft by-laws facilitated | | | Health and Community Services |

| | Measurable | KPI | | D | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|--|----------------|------------------------------------|---|---|---|---|--|--|-------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | year. Delay in the development of the process plan for the consultation process | | | | | |
| | | Number of water services by-laws approved and gazetted | GGPP - 12.8 | | | | 1 Water Services By- Law approved and gazetted by 30 June 2023 | Not Achieved Gazetting of the by- law facilitated | Draft by-laws were presented to June Council meeting and approved | Gazetting of the by- law will be facilitated and completed in Q4 of 2023/24 Financial year | Engineering Services |
| | | Number of Infrastructu re Asset Manageme nt Plans developed | GGPP - 12.9 | | | | 1 Infrastructure Asset Management Plan developed by June 2023 | Not Achieved. Procurement of a service provider to develop the plan facilitated Development of the plan monitored | Service provider was not appointed for the development of the plan and Monitoring of verification of assets throughout the District by BTO (Asset Unit) was completed and outcomes are detailed in the list assets verified extracted from SAM | Procurement of a service provider will be implemented in the 2023/2024 Financial year. | Engineering Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|---------------|------------|---|----------------|------------------------------------|---|-----------------------|---|---|---|---|-------------------------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of water conservati on and demand manageme nt strategies reviewed | GGPP - 12.10 | | | | 1 Water Conservation and Demand Management Strategy reviewed and approved by 30 June 2023 | Achieved Final Draft Reviewed Strategy presented to Council for approval | | | Engineering Services |
| | | Number of water safety plan developed and implement ed | GGPP - 12.11 | | | | 16 water safety plans developed and implemented by 30 June 2023 | Not Achieved 8 Wastewater risk abatement plan developed and implemented | | | Engineering Services |
| | | Number of wastewater risk abatement plan developed and implement ed | GGPP - 12.12 | | | | 14 wastewater risk abatement plan developed and implemented by 30 June 2023 | Not Achieved Procurement of a service provider facilitated; Consultation with stakeholders on the draft 8 wastewater risk abatement plan plans. Wastewater risk abatement plans are reviewed inhouse. | | | Engineering Services |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|-------------------|--|--|----------------|------------------------------------|---|-----------------------|--|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | Number of Agricultural Sector Plans Reviewed and Implement ed | GGPP - 12.13 | | | | 1 Agricultural Sector Plan Reviewed and Implemented by 30 June 2023 | Not achieved. Draft Agricultural sector plan developed. Stakeholder engagement held on 11 May 2023 | | | IPED |
| | | Number of Forestry Sector Plans reviewed, adopted and Implement ed | GGPP - 12.14 | | | | 1 CHDM Forestry Sector Plan reviewed, adopted and implemented by Council by 30 June 2023 | Not achieved. Stakeholder engagement held on 11 May 2023 | | | IPED |
| Executive Support | Ensuring integration, coordination and functionality of executive support function | Number of executive support programm es developed, coordinate d and implement ed | GGPP - 13 | | | | 4 Executive Support Programmes Developed, coordinated and implemented by 30 June 2023 | Refer to GGPP - 13.1 to GGPP - 13.4 for actual performance | Refer to GGPP - 13.1 to GGPP - 13.4 for actual performance | Refer to GGPP - 13.1 to GGPP - 13.4 for actual performance | SMS |

| | Measurable | KPI | | | Comparison | of Performance | SDBIP | Pe | erformance Reportir | ng | |
|-------------------------------|------------|---|----------------|------------------------------------|---|-----------------------|--|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | - Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| Office of the Speaker | | Number of council support activities coordinate d and implement ed | GGPP - 13.1 | | | | 2 Council Support activities coordinated and implemented by 30 June 2023 | Achieved. 2 Council Support activities coordinated and implemented | | | SMS |
| Office of the Executive Mayor | | Number of Mayoral support programm es coordinate d and implement ed | GGPP - 13.2 | | | | 1 Mayoral support program coordinated and implemented | Achieved: 5 Mayoral and 7 Executive Support programs coordinated and implemented viz: Ordinary Mayoral Committee and Special Mayoral Committee meetings held on 24 May and 31 May 2023 respectively, 1 combined Extended DiMAFO & IDP Rep Forum held on 25 May 2023, Implementation of | Overa achievement was due to compliance requirements. | | SMS |

| | Measurable | KPI | | _ | Comparison | of Performance | SDBIP | P | erformance Reportir | ng | |
|-----------------------------|------------|--|----------------|------------------------------------|---|-----------------------|---|--|---|---|-----------|
| Priority Area | Objectives | | Indicator Code | Programm e Budget Allocation | Revised SDBIP Annual Target 2021/2022 | Actual Performance | Annual Target 2022/2023 | (1.Please indicate Achieved or Not Achieved 2. Indicate below that what you have Achieved or under Achieved) | Variances (Reason for Non, under/Over Achievement) | In case of non- achievement provide Remedial (Corrective Action) | Custodian |
| | | | | | | | | Council Resolution of Council of 29 March 2023, Speaking notes for Executive Mayor for Executive Programs for(d) and Section 72 Reports to MPAC, Signing of Section 71 Report. | | | |
| Municipal Public | | Number of MPAC reports compiled and submitted | - dd99 | | | | 4 MPAC reports compiled and submitted by 30 June 2023 | Achieved. 4 MPAC Reports compiled and submitted to Council | | | SMS |
| Office of the Chief Whip | | Number of Whippery support programm es coordinate d and implement ed | GGPP - 13.4 | Opex | | | 1 Whippery support programme coordinated and implemented by 30 June 2023 | Not Achieved. Whippery support programme coordinated and implemented for quarter 3 and 4 | | | SMS |

Below is a list of indicator descriptions per KPA in the Operational Service Delivery and Budget Implementation Plan

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|---|---|
| MTOD - 1 | Number of Integrated Human Resource Management programmes implemented | Integrated Human Resource Management programmes – seeks to improve organization performance and developing a culture that foster innovation to help the organisation to achieve its performance. These programme will be implemented through the following programmes 1. Skills Development 2. Labour Relations 3. Human resources Management. 4. Individual Performance Management |
| MTOD - 1.1 | Number of Skills Development Programmes implemented | Skills Development Plan focus on identifying skills gaps, and developing or sharpening of those skills. This plan will be implemented through the Work Place skills plan which entails trainings conducted for staff members. These trainings takes place on quarterly basis The process for the implementation of Skills Development will be as follows; 1. Approved WSP submitted to LGSETA 2. Implementation of training programmes on approved WSP and in line with the policy. Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter Source documents = Approved Workplace Skills Plan |
| MTOD - 1.2 | Number of Labour Relations Programme implemented | Labour Relations is entrusted with harmonising working relations between the employer and employees. To achieve this target, two projects will be convened and implemented in line with relevant prescripts. The first project will be implemented through convening of Local Labour Forum meetings. Local Labour Forum ensures sound employer and employee relations within the district municipality. These forum are conducted on quarterly basis and as when required The second Labour Relations project will be conducted through capacity building and awareness campaigns that will capacitate managers and supervisors with knowledge, skills and performance improvement within their respective departments in order to create a conducive working environment and well-disciplined institution. The second project entails the following: 1. 1 Labour Relations Project in Q1 [Awareness on impact of COVID-19 - Employee rights and responsibility during COVID-19 dispensation] 2. 1 Labour Relations Project in Q2 [Code of Conduct for Municipal Employees] 3. 1 Labour Relations Project in Q3 [Initiating and Chairing Disciplinary Hearing] 4. 1 Labour Relations Project in Q4 [Conflict Management in the Workplace] Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter Source documents = LRA, BCEA, SALGBC Collective Agreement |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|--|---|
| MTOD - 1.2.1 | Number of Local Labour Forums implemented | Labour Relations is entrusted with harmonising working relations between the employer and employees. LLF ensures sound employer and employee relations within the district municipality. The sitting of the forum is on a quarterly bases and as when required. The process for the implementation of the LLF meeting will be as follows; 1. Convene Local Labour Forum 2. Source documents = LRA, SALGBC Main Collective Agreement |
| MTOD - 1.3 | Number of Human Resource Management programme implemented | These Human Resources Management Programme entails the implementation of four activities namely; 1. Review of the Staff Establishment 2. Filling of Vacant funded positions filled and implementation of Employment Equity 3. CHDM Job Descriptions writing 4. Submission of Provisional Outcomes Report to Provincial Audit Committee 5. Individual Performance Management |
| MTOD - 1.3.3 | Number of departmental engagement held on review of job descriptions and development of new job descriptions | Job Descriptions writing is informed by new and existing Job Descriptions (JD's) that are in the approved staff establishment. It is the municipality's responsibility to write and review job descriptions for all posts that are in the staff establishment. The process for the facilitating of Descriptions review and writing will be as follows; 1. Assessment report on the number of job descriptions written and reviewed to determine the outstanding number of JD's to be reviewed or written 2. OD and JE unit will then review submitted drafts and send comments back to Directorates. 3. Directorates will consider the comments from OD and JE unit and resubmit. 4. The final draft JD will then be signed by the Directorate. 5. The signed JD's will be submitted for grading by OD and JE unit to the District Job Evaluation Committee. Method of calculation = Sum = number of departmental engagement held. Source documents = Approved Structure, New Position, Reports and Attendance register. |
| MTOD - 1.3.4 | Number of Provisional Outcomes Report submitted to Provincial Audit Committee | Provisional Outcomes reports are reports of all evaluated job descriptions submitted by Chris Hani District Municipality and all local municipalities to the Provincial Audit Committee. It is compiled after each evaluation session and submitted to the Provincial Audit Committee which has a responsibility to audit these provisional outcomes. The process for grading of JD's by the District Job Evaluation Committee will be as follows; 1. Submission of signed JD's to District Job Evaluation Committee 2. The District Job Evaluation Committee will then evaluate the submitted JD's and give comments where necessary. The committee will then compile the Provisional Outcomes report (POR) on the evaluated JD's 3. District Job Evaluation Committee will submit the Provisional Outcomes report to the Provincial Audit Committee for auditing. 4. Provincial Audit Committee will audit the POR and compile a Final Outcomes report. |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|---|--|
| | | 5. The Provincial Audit Committee will send the Final Audited Outcomes report to municipality for implementation Method of calculation = Sum =1 POR will be submitted to the Provincial Audit Committee each quarter. 1x4 =Total for the year = 4 Reports Source documents = f signed JD's, Provisional Outcomes report, Proof of submission to Provincial Audit Committee, Final Audited Outcomes report. |
| MTOD - 1.4 | Number of Middle Managers Individual Performance Assessment and/or review reports compiled and submitted | Individual Performance Management empowers employees to use their skills and knowledge to perform their jobs in a productive manner. These assessments will start with the compilation and completion of the performance Accountability Agreement and the bi-annual assessments and bi-annual reviews will be conducted by HOD's and Middle Management. Process to be followed: 1. An approved top layer and operational SDBIP will be prepared and submitted to Council structures and council for approval towards the end of the financial year and after the approval of the IDP 2. An approved SDBIP will be submitted to all directorates for each to prepare and align performance agreements and accountability agreement with SDBIP and sign before the end of the 1st month of the 1st quarter. 3. Copies of the signed agreements will be solicited from directorates for record keeping, compilation of report on the implementation of the council approved PMS Framework. 4. Assessment tool will be prepared and circulated to all directorates with the actual deadlines on when the reviews/assessments should be completed and reported in line with the approved reviewed PMS Framework |
| MTOD - 2 | Number of Integrated Health, Wellness Mainstreaming and Occupational Health and Safety Programmes implemented | Integration of Health, Wellness Mainstreaming and Safety Programmes that educates about wellness, health and safety of employees, councillors, traditional leaders, managers and their families. |
| MTOD - 2.2 | Number of Occupational Health and Safety Programmes implemented | Occupational Health and Safety Programmes are programmes aimed at promoting a healthy and safe work environment through protection of employees against hazards to their health and safety arising out of the work they perform as well as protection of any other person who may be exposed to hazards in the work place environment. This programme will be implemented through the following activities; 1. Occupational Health and Safety education & awareness 2. Medical assessments and Vaccination 3. Provision of Protective Clothing and hygiene consumables |
| MTOD - 2.2.1 | Number of Occupational Health and Safety | Occupational Health and Safety education & awareness process is informed by the OHS Act, regulations and OHS Strategy. The awareness educates employees on how to keep safe in a workplace and how to identify, report and |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|--|--|
| | education & awareness conducted | control the workplace hazards. The process for the implementation of Occupational Health and Safety education & awareness will be as follows; 1. OHS education and awareness on injury on duty, occupational diseases, hygiene as well as fire and evacuation activities will be implemented. 2. Method of calculation = 4 OHS education & awareness will be implemented during this financial year in Q1, Q2, Q3 & Q4 3. Source documents = programme plan |
| MTOD - 2.2.2 | Number of Medical assessments and Vaccination initiatives implemented | Medical surveillance is conducted in compliance with Section 8(1) of Regulations for Hazardous Biological Agents. Medical assessments is a planned programme or periodic examination conducted by Occupational health practitioner or Occupational Medical Practitioner aimed at establishing whether employees have been exposed to hazardous biological agents. Vaccinations are provided to employees to prevent them from contracting occupational diseases such as Hepatitis and others. Employees who are exposed biological agents are prioritised for medical surveillance and vaccinations. Medical assessments and vaccinations are conducted annually. The process for the implementation of Medical surveillance and Vaccination initiatives will be as follows; 1. Medical assessments and vaccinations will be conducted for water services employees in two satellite workplaces in Quarter 1 & Quarter 2, and one satellite workplace in Q3 and one satellite workplaces in Q4. 2. Source documents = medical assessments and vaccinations report |
| MTOD - 2.2.3 | Number of positions exposed to high risk hazard provided with Personal Protective Clothing | Personal Protective Equipment are provided to employees in terms of Section 2(2) of General Safety Regulations. PPE are provided to the employees by the employer as one of the control measures taken by the employer to mitigate against the risk of exposure to hazards in the workplace environment. The process for providing Personal Protective Clothing will be as follows; 1. Identification of high risk positions 2. Facilitation of SCM Process 3. Provision to the identified high risk positions. 3. Source documents = List of all high risk position and their prioritization, nature of jobs performed, type of PPE required sizes. |
| MTOD – 3 | Number of Municipal vehicles managed | Municipal vehicles managed will focus on acquisition of municipal vehicles and maintenance, daily repairs, fitment, servicing and licencing of existing municipal vehicles as per manufacturers specification and on request by user. |
| MTOD - 3.1 | Percentage of Municipal vehicles maintained as per | Municipal vehicles Maintenance will focus on services, repairs, fitment of accessories and licensing of vehicles. The process focuses on ensuring that all vehicles are roadworthy at all time and on the following process: DAILY REPAIRS, FITMENT & SERVICE 1. The user reports the faults and damages on vehicles for repairing. |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|---|--|
| Code | dealer specification and on request by user | Log a maintenance call to the Service Provider stating vehicle details, faults (Annual Service), acquire reference number and name of the merchant. SP forwards the Clearance for approval, clearance get signed and SP provides Authorisation letter. Once vehicle is done, the office signed the repair invoice. The vehicle is released from the repairs. |
| | | LICENCING: this can be done Annually or based on kilometre travelled or whichever comes first. Licence renewal are done monthly depending if there are any. The users reports vehicle licences that has expired or expiring or Traffic department provide us with the list of due registration monthly. The office compiles memo with the list of all vehicles and total cost for payment. Arrange Certificate of Fitness (COF) first for Trucks before the new licence can be issued. Once the money has been received, we go to traffic department for vehicle renewals.6. Drivers come to collect the new disc. |
| | | 2. Method of calculation = Total no of Maintained vehicles + Service + Licencing / (Total Actual Maintained vehicles + Service + Licencing done) X 100 = 100% per quarter. 3. Source documents = 1. Maintanance & Service: Request from users, Johnson Service Intervals/ Service book |
| | | 3. Source documents = 1. Maintenance & Service: Request from users, Job card, Service Intervals/ Service book, Clearance. 2. Licencing: Registration Certificates, Licence disc. |
| MTOD - 3.2 | Number of Municipal Vehicles acquired | Municipal vehicles will focus on acquisition of municipal vehicles. CHDM is participating on National Treasury Transversal Contract RT57 for procurement of vehicles, this means that Fleet do not follow the SCM internal processes. The process for acquiring Municipal vehicles will be as follows; 1. The office draft /compile vehicle as per the type of vehicle needed. 2. Requesting of quotation by sending specification top the RT57 list of manufacturers as per the ranking and Conditions of contracts. 3. Once quotation has been received, office compile memo requesting to purchase to Procurement Manager. 4. PM checks the quotations and document for compliance by the manufacture. 5. the document is then submitted to Director C/S, CFO & MM for approval. 6. Document is submitted to SCM for further processing and issuing of order. 7. The manufacturer delivers the vehicles, signs delivery note. 8. The manufacturer submits invoices for payment processing. 2. Method of calculation = Number of vehicles acquired per quarter = Total number of vehicle (order + delivery note) 3. Source documents = Invoices, Vehicle order, Delivery note |

| Indicator Code | KPI | Indicator Descriptions |
|-------------------|--|--|
| MTOD – 5 | Number of Facility Management Plans developed and implemented | Facility Management Plan (FMP) will address amongst other aspects the maintenance of municipal buildings which generally seeks to keep all building systems and components operating efficiently and effectively and to ensure a safe and accommodating environment. As maintenance is most often associated with repairs and refurbishment, the FMP will detail on how implementation will be carried out as per request of user departments and assessment. 1. Development of the FMP presented to the HoD for approval. Implementation of the FMP as per identified required maintenance e.g. emergency (adhoc), routine maintenance, and periodic preventive maintenance. 2. Quarterly Reports on the implementation of the FMP submitted to the HoD's for consideration and noting |
| MTOD – 6 | Number of Cluster Security Management Plans developed and implemented | The Municipality has undertaken a cluster approach in the provision of security management services. The sites shall be clustered as follows: Komani, Whittlesea, Sterkstroom, Molteno and Tarkastad; Cofimvaba, Tsomo and Ngcobo; Cacadu, Dordrecht, Indwe, Cala and Khowa; and Hofmeyer, Cradock and Middelburg. The Municipality has appointed 4 (four) service providers that shall be responsible for provision of security management services to the abovementioned 4 (four) clustered sites. It is a requirement that the service providers conduct security risk assessments in all the sites, in consultation with the Water Services Provisioning: Area Manager or delegated officials that will enable them to develop security management plans; As soon as security risk assessments have been undertaken, security risk assessment reports shall be prepared, submitted to the Municipality, and thereafter security management plans shall be developed together with the implementation plans for submission to the Municipality as basis upon which the security management services shall in each cluster of sites be provided; and The 4 (four) security management plans shall be implemented and be monitored with comprehensive reports on a monthly and quarterly basis. It is expected that there will be 4 (four) Implementation reports submitted to the Municipality on a monthly and quarterly basis. Method of calculation: 1 x 4 Security Management Plans developed Output: 4 Security Management Plans Developed and Implemented |
| MTOD – 7 | Number of ICT Programmes Implemented | To identify, provide, support and maintain, business systems and solutions and IT Infrastructure and to provide sound governance on management of ICT. The process for the Implementation of the ICT Programmes will be as follows; 1. Establishment of ICT Infrastructure 2. Implementation of information security management |

| Indicator Code | KPI | Indicator Descriptions |
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| MTOD - | Number of Wide area | 3. Establishment of Disaster Recovery Site. 2. Method of calculation: Sum = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter A wide area network (WAN) connection allows devices to connect over a wide geographic area without utilising public |
| 7.2 | network (WAN) connectivity and cloud Private Branch Exchange (PBEx) telephone systems upgraded | internet. Without a WAN, information can only travel within the local area network (LAN), such as in one office and a Cloud PBX telephone systems, also known as hosted PBEx or virtual PBEx, is an IP-based PBEx solution that's provided and accessed completely through the internet. Instead of hosting software on a server the way digital systems do, cloud PBEx hosts all software and data in the cloud. The WAN and Cloud PBEx will be implemented as follows: 1. Facilitation of SCM processes 2. Appointment of service provider 3. Project inception meeting 4. Signing of SLA 5. Implementation of WAN connectivity and Cloud PBEx telephone systems upgrade 6. Monitoring and reporting of the project Method of calculation = Sum =1 programme will be implemented with different activities as stipulated in the SDBIP each quarter |
| MTOD - 7.2.1 | Number of server infrastructure upgraded | Server infrastructure upgrade is replacing the existing servers and basically designing a new data centre that will allow the user to have an advanced IT environment. Upgrading an server infrastructure allows users to have a better-centralized server platform. The server infrastructure project will be implemented as follows: 1. Facilitation of SCM Processes 2. Appointment of service provider 3. Project inception meeting 4. Signing of SLA 5. Implementation of Server Infrastructure Upgrade. 6. Monitoring and reporting of the project Method of calculation = Sum =1 programme will be implemented with different activities as stipulated in the SDBIP each quarter |
| MTOD – 8 | Number of Administration Support | The Legal Services and Administration Unit has two components, which are the Legal Services and Administration. Firstly, Legal Services proactively manages the litigation risk of the Municipality by implementing the Litigation |

| Indicator Code | KPI | Indicator Descriptions |
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| | and Legal Services Programmes implemented | Management Strategy. The strategy aims to create awareness on issues that might pose a risk of litigation to the Municipality such as PAIA requests, decision-making (PAJA), legislative/ policy development (and drafting) and drafting of contracts, and also provides for ways of responding to litigation and PAIA matters as ana when they arise. |
| | | Secondly, the Administration component provides support not only to management but also to political offices. While the records management section is a custodian of Municipal archives and records, the Council Support Unit provides secretariat support to Council structures such as Council, Mayoral Committee and standing committees. Awareness's campaigns with various directorates on file plans, records disposal and other records management controls are provided on a quarterly basis, while secretarial support is also given to Council structures by means of preparation of agendas, minutes, attendance registers and resolutions. |
| MTOD - 8.1 | Number of Secretariat Administration support projects implemented | The Council Support sub-unit within the Legal Services & Administration Unit has a duty to provide secretariat duties to Council and other related structures. Council, Mayoral Committee, Standing committees, Municipal Public Accounts Committee, Risk Management & Anti-Fraud Committee, Audit & Performance Audit Committee, Policy Advisory Committee, Budget Steering Committee, District Legal Advisors Forum, Local Labour Forum, Assets Management Committee (incorporating Fleet, ICT, Records Management, Water Services Provisioning and Facilities Management) are the structures, amongst others, to which secretariat support is mainly being provided. In order to provide secretariat support service to the Council structures, the sub-unit in liaison with the offices of chairpersons of council and various committees prepare agendas, maintain records of meetings (such as minutes, resolutions and attendance registers). In addition, the sub-unit ensure that all reports are stored appropriately and that systems are in place for tracking implementation of decisions. Furthermore, the sub-unit strive to maintain relations between political offices and management on governance and secretariat issues to improve information exchange and understanding of the role of Council and its structures. Council has adopted Institutional Annual Calendar, purpose of which is to provide a schedule of activities and meetings that the Municipality will priorities in its operations. The process of development of the Council Calendar involve a consultation process of various stakeholders and documents which are as follows: a) IDP Process Plan of the Council; b) MFMA Calendar; c) Office of the Speaker; d) Office of the Executive Mayor; e) Oversight bodies (Sec 79 Committees); f) Local Municipalities (Speaker's offices, MM's offices and other directorates); g) Management of the District Municipality |

| Indicator Code | KPI | Indicator Descriptions |
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| | KPI | 3. In consultation with the relevant chairpersons of council structures, the management make a decision about reports that must be submitted to a certain structure; 4. As soon as reports are prepared, Management submit Agenda items together with the reports to the Council Support sub-unit for the purposes of the preparation of the Agenda; 5. Each item that has been submitted to the Council Support sub-unit is given an Item Number, which is sequential in nature, and thereafter accordingly listed as one of the Agenda items; 6. The Agenda contains the signatures of the chairpersons and delegated responsible support to such a structure. For example: Council: Speaker co-signed by the Municipal Manager; Executive Mayor co-signed by the Municipal Manager; and Chairperson of the Committee and/ or co-signed by either the Municipal Manager, or the delegated official In addition, the Agenda contains the dates, venues (whether physical or virtual) and times of the meetings together with the lists of items to be considered by a particular structure 8. Upon completion of the Agenda, the Council Support sub-unit submits same to the chairperson of a particular structure and the manager with delegated powers (be it either the Municipal Manager or section 56 Manager or chairperson of the Committee) for the purposes of signature; 9. Upon the signing of the Agenda, it is circulated to all the members and the technical support officials of a particular structure; 10. On the day of the meeting, if there is physical attendance, the Council Support team ensures that all attendees in the meeting sign the attendance register, while the chairperson of the meeting device such as the computer screen and/ or any other electronic device; 11. Upon the declaration of the opening of the meeting, the Council Support team mechanically record proceedings for the purposes of producing minutes and resolutions at the end of the Meeting; 12. After the meeting, the Council Support team prepare minutes and resolutions for the purposes of confirmation, |
| | | signatures and implementation by the delegated functionaries; 13. Upon confirmation of resolutions and minutes, the Council Support team file same, and thereafter circulate them to all the directorates for implementation purposes; 14. Before the next council/committee meeting, an update/report should be compiled and submitted to the relevant structure on the implementation of its Resolutions. |
| | | Output: □ Quarterly Reports; □ Notices and Agendas; |

| Indicator | KPI | Indicator Descriptions |
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| Code | | |
| | | □ Attendance register |
| MTOD - | Number of Record | Record Management projects focuses on the implementation of the policies to ensure that the information of the |
| 8.2 | Management projects implemented | municipality is safe guarded. The two following activates will be implemented, File Plan Awareness campaigns and Records Disposal reporting. |
| MTOD - | Number of File Plan | The File Plan Awareness campaigns will focus on ensuring that all directorates file documents in accordance with the |
| 8.2.1 | Awareness campaigns conducted | approved File plan. These campaigns will be conducted on quarterly bases to different department. |
| MTOD - | Number of Records | Records Disposal entails identification of records for the purpose of transfer either to Provincial Archives or |
| 8.2.2 | Disposal reports compiled and submitted | Destruction of Ephemeral records. A report will be compiled which will show which document were disposed, when were they disposed and in terms of which disposal authority. This reports will be conducted on a quarterly base. |
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| Indicator | KPI | Indicator description |
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| | | KPA 2 – SERVICE DELIVERY INFRASTRUCTURE |
| SDI - 4 | Number of Full SANS Audit conducted on 16 Water Treatment Works systems | Water Treatment Works systems are process systems that receives raw water and process it through application of flocculants, coagulants and disinfectants in line with set limits to make the water suitable for human consumption. The Drinking Water Standards list the determinants and corresponding limits that need to be measured in order to determine that the quality of drinking water is safe to drink. SANS 241 report will be issued by an accredited laboratory for each of the 16 functional WTWs. Processes to be followed: 1. Annual assessment of functionality of water treatments works systems conducted 2. Procurement of service provider to conduct FULL SANS audit facilitated. 3. An appointed service provider conducts the audit. |
| | | Source documents - preliminary report and database of all water treatment works, ToR, audit report from the service provider. |
| SDI - 8 | Number of Process Audit review conducted on 16 Waste Water Treatment Works | Wastewater treatment is a process used to remove contaminants from wastewater or sewage and convert it into an effluent that can be returned to the water cycle with minimum impact on the environment, or directly reused. Audit represents a comprehensive performance evaluation to review and determine whether there are design issues, deficiencies in the operation and maintenance procedures or equipment malfunctions and to propose solutions to overcome identified deficiencies, if any. Process Audit Reports will be issued for all 17 Wastewater Treatment Works. Processes to be followed: |

| Indicator Code | KPI | Indicator description |
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| | | Annual assessment of functionality of water treatments works systems conducted Procurement of service provider to conduct FULL SANS audit facilitated. An appointed service provider conducts the audit. Source documents - preliminary report and database of all waste water treatment works, ToR, audit report from the service provider. |
| SDI - 10 | % reduction of non- Revenue water | The input volume of water received at the treatmentment works will be calculated and read at the bulk meter. When the water received has been treated and put into distribution that water will be exposed to 2 losses. The Real losses and Apparent losses. Real losses are physical losses like leaks and Apparent losses are meter under-registration, theft, billing errors and unbilled water. This indicator seeks to establish these two types of losses and thereafter provide a report to that effect which will then be analysed and implemented to reduce the percentage of losses. The target is now to reduce the losses by 20% per each year. The baseline Non-Revenue Water (NRW) is at 68.2% at an estimated cost of R182 114 932.52. Process to follow: Assess the system and quantify all meters that require replacement or calibration. Comparison of the erven as per GIS with the CHDM billing information. |
| SDI - 11 | Number of Consumer and Bulk water meter replacement | The programme will focus on the replacement of Consumer and Bulk water meters as well as fixing of leaks on the pipelines in order to quantify input volume against water put into distribution that got billed, unbilled and losses incurred in order to ascertain distribution losses |
| SDI - 11.1 | Number of Consumer water meter replacement Programmes implemented | The programme will focus on the replacement of Consumer water meters as well as fixing of leaks on the pipelines in order to quantify input volume against water put into distribution that got billed, unbilled and losses incurred in order to ascertain distribution losses |
| SDI - 11.2 | Number of Bulk water meter replacement Programmes implemented | The programme will focus on the replacement of Bulk water meters as well as fixing of leaks on the pipelines in order to quantify input volume against water put into distribution that got billed, unbilled and losses incurred in order to ascertain distribution losses |
| SDI - 16 | Number of Municipal Public Health | Municipal Public Health comprises of the following programmes namely; 1. Food Premises 2. Funeral Parlours & Mortuaries 3. Sanitation structures |

| Indicator Code | KPI | Indicator description |
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| | Programmes implemented. | 4. Waste Sites These programmes are relevant in terms of the National Health Act 61 of 2003 which provides a framework for a structured uniform health system within the republic, taking into account the obligation imposed by the Constitution and other laws on the national, provincial and local governments regards to health services |
| SDI 16.1 | Number of food premises inspections conducted for compliance with Food, Cosmetics and Disinfectants Act 54 of 1972 as Amended | Food Premises Inspections for compliance within CHDM where food is being produced, processed, stored, prepared and sold for public human consumption. Process to follow: 1. A database of premises is compiled and updated regularly to capture new and closing food premises and conducting regular inspections. 2. Inspections are conducted. The source document for compiling the report is the inspection checklist and the database. |
| SDI - 16.2 | Number of Funeral parlours & Mortuaries inspected for compliance in line with National Health Act 61 of 2003, section 32 | To monitor Funeral Undertakers/Parlours/Mortuaries for compliance within CHDM through inspections of privately owned pallor's and state mortuaries. This KPI is relevant in terms of the National Health Act 61 of 2003, section 32. Process to be followed: 1. A database of funeral parlour and/or mortuary premises is compiled and updated regularly to capture new and closing premises and conducting regular inspections. The source document for compiling the report is the inspection checklist and the database. |
| SDI - 16.3 | Number of sampled sanitation structures inspected in line with White Paper on Basic Household Sanitation of 2001 | To monitor sanitation structures (public ablutions and households) for compliance within CHDM through inspections in line with White Paper on Basic Household Sanitation of 2001. The inspection of sanitation structures is conducted to promote health and hygiene amongst public institutions and communities to prevent possible spread of communicable diseases spread by bacteria and viruses. The source document for compiling the report is the inspection checklist. |
| SDI- 16.4 | Number of waste sites inspected in line with the District Wide | To monitor and advise local municipalities on compliance and improvement on Waste Sites within CHDM through inspection process. The inspection of waste sites is conducted to promote compliance and technical support to local municipalities on managing their waste sites for public health and environmental protection. The source document for compiling the report is the inspection checklist and compliance notices to send to municipalities |

| Indicator Code | KPI | Indicator description |
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| | Environmental Management Plan | |
| SDI-17 | Number of Disaster Risk Management and District Fire Services Programmes implemented as per DMP & DFSP | Disaster management incidents- all disaster related incidents reported from the local municipality to the district call centre. District Fire Services Programmes aimed at capacitating and developing the District fire Services and to make the public aware of fire danger and how to combat these dangers. |
| SDI-17.1.4 | Number of Disaster management ward- based risk assessments conducted | The disaster management centre must conduct a comprehensive risk assessment within the municipal area of jurisdiction and in accordance with national and provincial criteria and supporting guidelines for disaster risk assessment. Process to be followed: 1. Assess disaster risks at ward base level 2. Risk and hazard mapping conducted 3. Ward-based risk assessment report compiled and shared with relevant stakeholders |
| SDI-17.1.5 | Number of disaster management ward- based plan developed | The disaster management centre must develop and implement minimum criteria for disaster risk management planning in the CHDM area of jurisdiction which is consistent with the national guideline to ensure adoption of uniform methodology to achieve integrated, holistic and coordinated planning. Process to be followed: 1. Review risk assessment report 2. Develop plans according to the outcomes of the risk assessment. 3. Conduct consultation at ward level 4. Consolidate ward-based disaster management plan. Source documents - CHDM and National policy framework, Disaster Management Act, Approved disaster management plan, ward based assessment report and share with the relevant stakeholders |
| SDI-17.2.1 | Number of Fire Services Trainings conducted | Firefighters at local level to be trained in firefighting according to the MSA. Act 117 0f 1998. a) The indicator description should state how performance of that indicator will be measured in terms of how data will be collected and which process will be undertaken to arrive to the source document. (1) This program is based on a legal requirement(municipal structure act 84(1)(j). (2) Fire Staff who are not trained in basic fire program will be nominated by the local municipality who will attend the basic fire services program. |

| Indicator Code | KPI | Indicator description |
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| | | (3) The content of the course will be developed internally and the attendance register of the staff attending the basic training and a report will be written by the manager of the fire services. |
| SDI - 17.2.2. | Number of Fire Services Inspections conducted to sampled high risk business premises | To monitor sampled high risk business premises for compliance with fire safety legislation in the CHDM area. This KPI is relevant in terms of the MSA and Fire brigade act. Process to be followed: 1. Premises will be inspected on a regularly. The source document for compiling the report is the inspection checklist. Inspections to be conducted in public places to prevent the outbreak of fires. |
| SDI - 17.2.3 | % Response to veld fire services incidents reported | Fire services response - all fire related incidents are reported from the local municipality to the district call centre. The process for responding to fire services incidents will be as follows; 1. Upon receiving the reported incident the response team will be dispatched to the scene. 2. Fire investigation report is compiled and reported Source documents = call centre printouts, investigation report Method of calculation number of incidents responded to /total number of incident reported as per the log sheet * 100) |
| SDI - 18 | Number of Environmental Programmes implemented as per District Wide Environmental Plan | Environmental Programmes seeks to minimise negative impacts on the environment and promote sustainable environmental practices. Enhance community involvement in environmental management and reduce effects of Climate Change. The programme will be implemented through two programme namely; Waste management and Climate change |
| SDI - 18.1 | Number of Waste management programme implemented in 2 local municipalities | The project brings a contribution to the overall sustainability of the area and will assist in the improvement of overall waste management in the area. To ensure the protection of the environment through effective waste management measures. The project will be implemented as follows; 1. Development of Business plan for the project 2. Engagements with the 2 Local Municipalities 3. Procurement of project equipment 4. Recruitment of project beneficiaries 5. Installation and placing of Waste equipment 6. Monitor project implementation Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter Source documents = Business plan, Resolution register of Engagements, Attendance register, Appointment letter or Orders and Monitoring report. CHDM Integrated Waste Management Plan |

| Indicator Code | KPI | Indicator description |
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| SDI - 18.2 | Number of Climate change programmes | The Climate Change Strategy seeks to provide a District Approach on how to reduce the impacts and effects of Climate Change. Promote awareness in the District with matters relating to climate change. |
| | implemented | This Climate change programme consist of a Rural Sustainable Village and Small scale wind-water pumping project that is made up of different components that are outlined in the Business Plan and terms of reference. The process for the implementation of Climate change will be as follows; |
| | | Monitor the implementation of the project business plan. Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/terms of reference each quarter |
| | | Source documents = monitoring reports |
| SDI - 18.3 | Number of Air Quality | This program is conducted in line with the air quality management act, 2004 (Act 39 of 2004) and the CHDM AQMP to monitor compliance to all the facilities within the district. Process to follow – |
| | management | 1. Inspection of facilities |
| | programme | 2. Monitoring of license conditions from the licensed facilities |
| | implemented | 3. compliance notice generated and served |
| | | 4. Report compiled and submitted to council structures |
| | T | KPA 3 – LOCAL ECONOMIC DEVELOPMENT |
| LED-2 | Number of Small town revitalization programmes implemented | The Small Town Revitalisation involves identification of catalytic interventions to promote economic development in the area. STR is based on in-depth analysis of the current socio-economic landscape of the larger area which will accommodate future infrastructural developments holistically and within the parameters of the local environment. Amongst projects identified by STR Strategy includes Paving, Street Furniture, Hawker Stalls, Greening & Beautification, direction signage, Drainage and Earth Works, Street Lights etc. Process to follow - Requests and business plans received from LM's for support on small town revitalisation projects. Provide feedback to LM's on the status of requests submitted. Project implementation plan developed and communicated with relevant LM's. Project implemented. Source document - STR Strategy, Vision 2030, EC-Provincial Infrastructure Master Plan |
| LED-6 | Number of Tourism development & Heritage Preservation programmes implemented | Tourism programmes seeks to identify, develop and market tourism opportunities for economic develop for the district. Heritage programmes seeks to identify and preserve liberation heritage sites within the district. This programme will be implemented through Tourism development and Heritage Preservation. |

| Indicator Code | KPI | Indicator description |
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| LED - 6.1 | Number of Tourism development programmes implemented | The programme is implemented in partnership with LTOs that are active in local municipalities: 1. Assessment of their business plans to identify areas of support. 2. Monitoring performance of the support provided. |
| LED - 6.2 | Number of Heritage Preservation programmes implemented | These programme will be implemented through three initiatives namely: Sabalele Support, Preservation of Heritage sites, Heritage and Chris Hani Month. Sabalele Support refers to the continuous support CHDM provides for the operationalisation of the Multi-purpose Centre at Sabalele, Intsika Yethu LM). The other project planned is the support to other Liberation Heritage site as determined through stakeholder sessions held with LM's and other heritage development stakeholders. In respect of Sabalele Project: the SLA will be entered into with Intsika Yethu and budgeted amount will be transferred to Intsika Yethu LM; the Municipality oversees the implementation of the project and then provides quarterly reports to CHDM. In respect of the other sites: support provided for the identified sites. For Heritage Month (September 2022) and Chris Hani Month (April 2023): The Concept documents will be developed with the list of activities and programmes to be implemented; where applicable the committees will be formed to carry out the tasks; the service providers (when required) are outsourced for the execution of the complex projects such as Jazz Festival in September and Freedom Marathon in April. |
| LED - 7 | Number of Forestry programmes implemented | Forestry programmes aims at supporting and upgrading local community project to enable their projects into business enterprises that will grow economy. This programme will be implemented through Charcoal and Nursery programmes. |
| LED - 7.1 | Number of Charcoal programmes supported | Provision of support for the implementation charcoal programme at Engcobo LM. The activities include the following : facilitation of stakeholder engagement sessions; facilitate Development of project implementation plan, Monitoring |
| LED - 7.2 | Number of Nursery programmes supported | Provision of support for the implementation of Vusi Sizwe (KwaJO) tree-nursery project. The process is as follows: 1. There is service level agreement in place between CHDM and Intsika Yethu LM; The project coordinator employed through the SLA is responsible for day-to-day management of the project; CHDM project officer monitors the project on a monthly basis; quarterly reports are provided by the project coordinator as per the SLA between CHDM and Intsika Yethu LM. 2. 2 Facilitate Procurement processes for the refurbishment of the Nursery infrastructure |
| | | KPA 4 - FINANCIAL MANAGEMENT AND VIABILITY |
| FMV - 1 | Number of Funded budgets and MFMA Monitoring reports | Council approved funded budgets and financial budget reports that are submitted council and treasury In terms of the following MFMA sections; 1) Section 16(2), which state that the Mayor of a municipality must table an annual budget at a Council meeting at least 90 days before the start of the budget year. |

| Indicator Code | KPI | Indicator description |
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| | compiled and approved | Section 71 which states that the accounting officer of a municipality must by no later than 10 working days after the end of each month submit to the Mayor of the municipality and the relevant provincial treasury, the statement in the prescribed format on the state of the municipality's budget performance. Section 52(d) which states that the Mayor of a municipality must, within 30 days of the end of each quarter, submit a report to the Council on the implementation of the budget and the financial state of affairs of the municipality. |
| FMV - 1.1 | Number of Funded budget compiled and approved | Municipal Finance Management Act 56 of 2003 Section 16 prescribes that the Council of a Municipality must for each financial year approve an Annual Budget for the municipality before the start of the financial year. Section 16 of the Local Government Municipal Finance Management Act (MFMA) prescribes that the council of a municipality must for each financial year approve an annual budget for the municipality before the start of the financial year. Section 68 of the MFMA assigns the Accounting Officer the responsibility of assisting the Mayor in performing the budgetary functions assigned to the latter in terms of Chapters 4 and 7. In terms of the MFMA, section 16(2), the Mayor of a municipality must table an annual budget at a Council meeting at least 90 days before the start of the budget year. Section 17(1) of the MFMA further states that an annual budget must be a schedule in a prescribed format and further outlines the contents that should be included in such annual budget. The prescribed format is outlined in regulation 9 of the MBRR, which states that "the annual budget and supporting documentation of a municipality must be in a format specified in Schedule A and include all the required tables, charts and explanatory information". The latter paragraph is also supported by regulation 14(1) of the MBRR to ensure that municipalities table in Council a budget in a prescribed format, that is credible and realistic. The budget brought to the attention of the Mayoral Committee, recognises the funding streams of Council that have remained the same as in the previous budget years being mainly service charges for water and sanitation services and grant funding from both National Treasury and Provincial State Departments. Other revenue in addition to above is interest on investments and outstanding debtors, and sundry revenue. The expenditure of the municipality is as a result of employee related costs, councillors allowances, expenditure on operating and capital grants, transfers and grants to the municipal e |
| | | Prepare A Schedule; Conduct Budget Technical Committee meeting to discuss the budget; |

| Indicator Code | KPI | Indicator description |
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| | | Conduct Budget Steering Committee meeting to discuss the budget; |
| | | Submit the budget to Provincial Treasury for funding assessment; |
| | | Prepare budget item for Mayoral Committee for recommendations to the Council; |
| | | Prepare budget item for Council meeting to approve the budget, |
| | | Submit the approved budget and all the necessary documentation to both Provincial and National Treasury |
| FMV - 1.2 | Number of MFMA Monitoring reports compiled and approved | 12 Reports, Section 71 Reports, Section 52(d) C-Schedule for all three monthly reports. Reports and Section 72 Reports. Sec 71(1) of the MFMA states; "the accounting officer of a municipality must by no later than 10 working days after the end of each month submit to the Mayor of the municipality and the relevant provincial treasury, the statement in the prescribed format on the state of the municipality's budget performance. Reporting section follow the below process: Request Trial Balance from system section; Prepare journals for all grants to recognise expenditure, Prepare C Schedule and Executive Summary for Submission to Treasury. Prepare C Schedule and Executive Summary for Audit Committee, Mayoral and Council Meeting. The MFMA's Municipal Budget and Reporting Regulations Sec 28 states "The monthly budget statement of a municipality must be in the format specified in Schedule C and include all the required tables, charts and explanatory information, taking into account any guidelines issued by the Minister in terms of section 168(1) of the act." The MFMA's Budget and Reporting Regulations sec 29 states "the Mayor may table in the municipal council a monthly budget statement submitted to the Mayor in terms of sec 71(1) of the Act. If the Mayor does so, the monthly budget statement must be accompanied by a Mayor's report in a format set out in Schedule C." Sec 52(d) of the MFMA states; "the Mayor of a municipality must, within 30 days of the end of each quarter, submit a report to the Council on the implementation of the budget and the financial state of affairs of the municipality." |
| | | The MFMA's Municipal Budget and Reporting Regulations Sec 31 states "The quarterly budget statement of a municipality must be in the format specified in Schedule C and include all the required tables, charts and explanatory information, taking into account any guidelines issued by the Minister in terms of section 168(1) of the act." |
| FMV - 1.2.1 | Number of Section 71 reports compiled and submitted | 12 Reports, Section 71 Reports, Schedule for all three monthly reports. Sec 71(1) of the MFMA states; "the accounting officer of a municipality must by no later than 10 working days after the end of each month submit to the Mayor of the municipality and the relevant provincial treasury, the statement in the prescribed format on the state of the municipality's budget performance. Reporting section follow the below process: Request Trial Balance from system section; Prepare journals for all grants to recognise expenditure, Prepare C Schedule and Executive Summary for Submission to Treasury. |
| | | Prepare C Schedule and Executive Summary for Audit Committee, Mayoral and Council Meeting. |

| Indicator Code | KPI | Indicator description |
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| | | The MFMA's Municipal Budget and Reporting Regulations Sec 28 states "The monthly budget statement of a municipality must be in the format specified in Schedule C and include all the required tables, charts and explanatory information, taking into account any guidelines issued by the Minister in terms of section 168(1) of the act." The MFMA's Budget and Reporting Regulations sec 29 states "the Mayor may table in the municipal council a monthly budget statement submitted to the Mayor in terms of sec 71(1) of the Act. If the Mayor does so, the monthly budget statement must be accompanied by a Mayor's report in a format set out in Schedule C." |
| FMV - 1.2.2 | Number of Section 52 (d) reports compiled and approved | Sec 52(d) of the MFMA states; "the Mayor of a municipality must, within 30 days of the end of each quarter, submit a report to the Council on the implementation of the budget and the financial state of affairs of the municipality." The MFMA's Municipal Budget and Reporting Regulations Sec 31 states "The quarterly budget statement of a municipality must be in the format specified in Schedule C and include all the required tables, charts and explanatory information, taking into account any guidelines issued by the Minister in terms of section 168(1) of the act. "Reporting section follow the below process: Request Trial Balance from system section; Prepare journals for all grants to recognise expenditure, Prepare C Schedule and Executive Summary for Submission to Treasury. Prepare C Schedule and Executive Summary for Audit Committee, Mayoral and Council Meeting. |
| FMV - 1.2.3 | Number of Section 72 reports compiled and approved | Reports and Section 72 Reports. Reporting section follow the below process: Request Trial Balance from system section; Prepare journals for all grants to recognise expenditure, Prepare C Schedule and Executive Summary for Submission to Treasury. Prepare C Schedule and Executive Summary for Audit Committee, Mayoral and Council Meeting. |
| FMV - 4 | Percentage adherence to 30 days payment period in line with the regulatory framework | All municipalities should adhere to sec 65 of MFMA, which states that all invoices should paid within 30 days on receipt of correct information. The process for adherence to 30 days payment of valid invoices by the due date will be as follows; 1. All invoices received are recorded in an invoice register and captured in the system 2. monthly reconciliations are prepared from the invoices registration, capturing and payment of beneficiaries |
| FMV - 4.1 | Number of capital grant expenditure reports reconciled and submitted | The process involves reconciliation of the general ledger with proof of payments for capital projects and report for the following grants: Municipal Infrastructure Grant (MIG), Regional Bulk Infrastructure Grant (RBIG), Water Services Infrastructure Grant (WSIG) and Rural Roads Asset Management Grant (RRAM). |

| Indicator Code | KPI | Indicator description |
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| FMV - 4.2 | Number of Fruitless and Wasteful Expenditure reports compiled and submitted. | Fruitless and Wasteful Expenditure is expenditure that should have been avoided should all reasonable steps were taken. It is reported on quarterly basis to council committees. 3. On quarterly basis fruitless and wasteful expenditure is reported to the relevant structures. 4. The source documents will be the fruitless and wasteful register and quarterly reports |
| FMV - 5 | Number of accurate and complete asset register that is GRAP compliant maintained | For the asset register to be GRAP compliant, assets in the register must meet the definition of an asset, recognition & derecognition criteria. The register must be free from material errors and should be made up of prior years and current year movements. The information in the register validated through the asset verification. The process is explained in detail in the sub-indicators 2. Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter 3. Source documents = Inventory Management comprises of inventory recognition inventory counts or verification as means of validating inventory data and controls. The plan serves as a tool meant to provide guidance on assigning responsibilities pertaining to |
| | | procurement of inventory / orders, issues, recording, safeguarding & disposal of inventory and periodic/annual financial reporting there to. The implementation of the plan will be measured by the periodic reports prepared as per the inventory management activities contained in the plan. |
| FMV - 5.1 | Number of Updated GRAP compliant Asset Registers reconciling to the General ledger | The programme deals with the compilation a new asset register for all moveable and immoveable assets in accordance with the accounting practises as prescribed by the Minister of Finance (GRAP). Reconcile the new updated asset register with the general ledger and resolving of all variances. The process for the reconciliation of GRAP compliant Asset Registers reconciling to the General ledger will be as follows; 1. Obtain the general ledger and the updated quarterly additions and disposals 2. Reconcile all the information and prepare corrective journals 3. Process relevant journals and update the asset registers accordingly Source documents = general ledger, contracts management register, retention register, WIP register, capture sheets |
| FMV - 5.2 | Number of GRAP Compliant Inventory Registers implemented | Inventory Management comprises of inventory recognition, inventory counts or verification as means of validating inventory data and controls. The process for the implementation Inventory Management programmes will be as follows; 1. conduct inventory counts and update all the current year movement in the inventory management register 2. prepare quarterly reconciliation reports |

| Indicator Code | KPI | Indicator description |
|-------------------|---|---|
| | | 3. Source documents - general ledger, purchase invoices, inventory count sheets |
| FMV - 7 | Number of GRAP and MSCOA Compliant Financial Management Systems implemented | The GRAP is an accounting standard/principle that the municipal finance should comply with and MSCOA is municipal standard chart of accounts that is regulated by Treasury all institutions when recording and finance transaction. |
| FMV - 7.1 | Number of MSCOA version 6.6 implemented | In compliance with mSCOA, on a monthly basis the municipality uploads or submits Data Strings to National Treasury for assessment and; Treasury sends back a report on any errors identified on the assessment. The errors are corrected by the municipality and resubmitted to Treasury. The unit ensures that the uploaded 22/23 budget is MSCOA Compliant. Proof of submission and uploading is provided as evidence |
| FMV - 7.2 | Number of Pay day system integrations conducted | Pay day upgrade entails the aliment of line items on payday to the financial systems. The process for the integration Pay day system will conducted as follows; 1. Run a report from Pay day that generates file and dumps it to SOLAR 2. Run a report to Upload the file to SOLAR PAYE process 1. Collect EMP201's from Expenditure and capture to CHDM easy file account 2. For Annual submission - generate IRP5 and EMP 501 |
| FMV - 7.3 | Number of Solar modules activated | Solar modules are module that are on the Solar system which needs to be activated for users. This activation will take place in a form of providing training on those Solar models for users. The process for the activation of Solar modules will be as follows; 1. Request information from user departments 2. On receipt of information, it is uploaded on SOLAR 3. information is tested on the test database 4. if correct, to be shipped to live database for implementation Source documents (contracts management register, inventory management register, creditors statements, fixed asset register, annual financial statement module) |
| | | KPA 5 – GOOD GOVERNANCE AND PUBLIC PARTICIPATION |
| GGPP - 1 | Number of Communication programmes implemented | The Unit will implement two programmes namely; External communication management and Internal communication management. The two programmes aim at facilitating exchange of developmental information with municipal stakeholders whilst encouraging active citizen participation |

| Indicator Code | KPI | Indicator description |
|-------------------|---|---|
| GGPP - 1.2 | Number of Internal Communication Management Programme implemented | 1.Internal communication management entails sharing information on various municipal initiatives affecting Internal stakeholders, through emails newsflash's, newsletters, weekly diaries and intranet. 2. Branding entails a) Branding materials production (Produce branding material such as posters, calendars, diaries) to enhance visibility of the municipality. Process to follow (internal communication): 1) Source content from various directorates 2) Attend internal events 3) Compile an article 4) Design a newsletter 5) Submit it for approval 6) Distribute Process to follow (branding) 1) Procurement facilitated 2) Provide content to service provider |
| GGPP - 2 | Number of Citizen Empowerment Programmes implemented | Stakeholder engagements - Internal and External, District Communication Coordination Forum, Speaker's Forum, IGR Forum, DIMAFO Forum, Disaster advisory forums, Environment and climate change forum, Town Planners forum, LED forums, IDP Rep forums, Human Settlement forums, MPAC, Woman Caucus, MRM, District Initiation programme, Citizen Empowerment Programme. |
| GGPP - 2.1 | Number of Stakeholder engagement | Internal and External Stakeholder engagements - entails panel discussions, round tables, business breakfast or dinner sessions, meetings and Mayoral Imbizos. The process for the implementation of Stakeholder engagement activities will be as follows; |

| Indicator Code | KPI | Indicator description |
|-------------------|----------------------------|---|
| | activities | Source issues from various department and directorates |
| | implemented | 2. Coordinate internal stakeholders |
| | | 3. Facilitate sitting of internal meetings |
| | | 4. Agenda and programme developed for stakeholders meeting |
| | | 5. Report is prepared and submitted to the Head of Department |
| 0000 | N | Source documents = Correspondence from stakeholders, events guidelines |
| GGPP - | Number of District | The District Communicators (DCF) Forum is a platform for all communication specialists within the district coordinated as part |
| 2.2 | Communication Coordination | of strategizing for communication to promotes collaboration for effective communication across the district. |
| | Forums conducted | This entails conducting meetings, workshops with all Communicators across the district both from LMs and Sector Departments including Entities and Parastatals. |
| | Forums conducted | Departments including Entitles and Farastatals. |
| | | Capacity building sessions are organised for municipal communicators to empower them with skills in different disciplines, |
| | | namely; dealing with the media, management of events, website and social media platforms, graphic design, editing and |
| | | proofreading, videography etc. |
| | | 2. DCF sits on a quarterly basis (invitation is issued to all LM's in the district, draw up an agenda, prepare reports on the |
| | | operations of the DCF for the technical IGR and DiMAFO) |
| | | 3. Resolution register, attendance register, minutes |
| GGPP - | Number of District | The District Speaker's Forum is a platform for all 6 LM's for Council Speaker's to communicate programs from their respective |
| 2.3 | Speaker's Forums | municipalities for uniformity and alignment. The process flow involves: |
| | conducted | 1. Convene officials from all 6 municipalities located in the offices of Council Speaker's, relevant officials from EC- CoGTA, |
| | | Officials from IEC, Representatives of the MRM, Representatives of the Initiation forum, etc. |
| | | 2. Preparation of the issues/programmes to be discussed in the Speaker's forum |
| CCDD | Number of ICD | 3. Liaise with the District Speaker so as to prepare for District Speaker's forum. |
| GGPP - 2.4 | Number of IGR | This programme is aimed at coordinating Inter Governmental Relations activities throughout the district to ensure |
| 2.4 | Forums conducted | development of 1 district development plan. The process for the implementing a functional Inter Governmental Relations will be as follows: |
| | | 1. Convene Technical IGR Forum (The CHDM IGR Strategy guides that quarterly, IGR Forums should sit. The Technical IGR |
| | | supersedes the sitting of the Political DIMAFO. |
| GGPP - | Number of | The District Mayor's Forum is coordinated at least 4 quarters through the Municipal Support unit. Representatives from local |
| 2.5 | DIMAFO Forums | municipalities, sector departments and parastatals in the district are invited to partake in the forum by making presentations |
| | conducted | where applicable and engage on matters of mutual interests |
| GGPP - | Number of District | Establish a district waste management forum in consultation with local municipalities, |
| 2.6 | Waste | 2. Convene 04 District Waste Management Forum meeting. |

| Indicator Code | KPI | Indicator description |
|-------------------|---|---|
| | Management Forum conducted | Reports of the forum emanate from the activities implemented in the CHDM on waste management issues. Representatives from relevant Sector Departments, government entities, parastatal, NGO's, CBO's, Business Sector and Local Municipalities are invited to be part of the forum. |
| GGPP - 2.7 | Number of District Funeral Parlour's Forum conducted | Convene 04 District Funeral Parlour's forum. Reports of the forum emanate from the activities implemented by the District as it relates to the funeral parlours in the district. Representatives from funeral parlours are invited to be part of the forum |
| GGPP - 2.8 | Number of District Fire coordination forums conducted | Establish a district Fire Coordination in consultation with local municipalities, Convene 04 District Fire Coordination forum. Reports of the forum emanate from the activities implemented in the CHDM on fire services issues. Representatives from relevant Sector Departments, government entities, parastatal and Local Municipalities are invited to be part of the forum. |
| GGPP - 2.9 | Number of Environment and climate change forum conducted | Convene 04 Disaster Advisory, Environment and Climate Change forum. Reports of the forum emanate from the activities implemented in the CHDM on disaster, environmental and climate change issues. Representatives from relevant Sector Departments, government entities and parastatals; and Local Municipalities are invited to be part of the forum |
| GGPP - 2.10 | Number of Human Settlement forums conducted | Convene 04 Human Settlement forums. Reports of the forum emanate from the activities implemented in the CHDM on human settlement issues. Representatives from relevant Sector Departments, government entities and parastatals; and Local Municipalities are invited to be part of the forum |
| GGPP - 2.11 | Number of LED forums conducted | Convene 04 LED forums. Reports of the forum emanate from the activities implemented in the CHDM on LED related issues. Representatives from relevant Sector Departments, government entities and parastatals; and Local Municipalities are invited to be part of the forum |
| GGPP - 2.12 | Number of Spatial Planning forums conducted | Convene 04 Spatial Planning forums. Reports of the forum emanate from the activities implemented in the CHDM on spatial planning related issues. Representatives from relevant Sector Departments, government entities and parastatals; and Local Municipalities are invited to be part of the forum |
| GGPP - 2.13 | Number of IDP Rep forums conducted | Convene 04 IDP Representative forums. Reports of the forum emanate from the activities implemented in the CHDM on IDP, Performance and Budget related issues. |

| Indicator Code | KPI | Indicator description |
|-------------------|---|---|
| | | Representatives from relevant Sector Departments, government entities and parastatals; and Local Municipalities, civic and political organisations as well as general members of the community are invited to be part of the forum |
| GGPP - 2. 14 | Number of Technical Managers forums conducted | Convene 04 Technical Managers forums. Reports of the forum emanate from the activities implemented in the CHDM area on technical and/or engineering services related issues. Representatives from relevant Sector Departments, government entities and parastatals; and Local Municipalities are invited to be part of the forum. |
| GGPP - 2.15 | Number of Chief Financial Officers Forums conducted | invited to be part of the forum Convene 04 Chief Financial Officers forums. Reports of the forum emanate from the activities implemented in the CHDM area on Financial viability and management related issues. Representatives from relevant Sector Departments, government entities and parastatals; and Local Municipalities are invited to be part of the forum |
| GGPP - 2.16 | Number of Chief Whips Forums conducted | The forum is constituted by whips of the local municipalities in the district. It is convened by the Chief Whip in the District at least once a quarter |
| GGPP - 2.17 | Number of MPAC meetings convened | MPAC is an oversight committee that reviews, analyse and make recommendations on the reports dealing with compliance issues to ensure Good governance. Process to follow: a. Develop and present terms of reference for MPAC aligned to the term of Council. b. Annual work plan is developed and submitted to Council for approval before the end of the financial year. Attached to the annual work plan is a project visit plan for infrastructural related project. c. The MPAC oversight committee sits on quarterly bases to unpack the issues at hand which include adhoc projects. Reports are compiled and submitted to Council for consideration |
| GGPP - 2.18 | Number of Women Caucus activities implemented | Women Caucus - it's a section 79 of MSA 117 of 1998 committee that deals with women's issues across the district. This committee further improves and develops women capacity by way of conducting programmes and meeting on a quarterly bases. Process flow: a. Convene then district woman caucus meetings b. Convene the Woman Caucus Chairpersons from Local Municipalities c. Identify areas of intervention for implementation d. Prepare and submit a report to Council on the woman caucus activities (Imbizo, awareness campaigns, summit/Indaba/seminar, workshops) |
| GGPP - 2.19 | Number of Moral Regeneration Movement | Moral Regeneration - the programme seeks improve and construct accepted human behaviour and character This programmes takes place on a Quarterly bases. Process to be followed: a. Facilitate process of establishment of MRM Structures from all 6LMs |

| Indicator Code | KPI | Indicator description |
|-------------------|--|---|
| | activities implemented | b. Facilitate induction of the District and LMs MRM structures c. Coordinate the development and implementation of the MRM plans for the District and LM's d. Prepare and submit a report on the implementation of the MRM Plan to the District Speaker's forum |
| GGPP - 2.20 | Number of District Initiation activities implemented | District Initiations programmes - assist with monitoring of initiates in reducing the challenges arising from the season like death and complications with in the district. The Initiations programmes are conducted quarterly throughout campaigns and monitoring. Process to be followed: a. Facilitate the establishment of the District Initiation forum and LM Initiation Forums b. Coordinate sitting of the District Initiation Forum meetings c. Facilitate development and implementation of the district initiation forum plan d. Prepare and submit the district initiation plan to the District Speaker's Forum for endorsement |
| GGPP - 2.21 | Number of Community Educational initiatives implemented | Public Participation - are community engagements initiated by both the community and the district by way conduction meetings/workshops or other activities. |
| GGPP - 2.21.1 | Number of petitions managed | Coordinate quarterly meeting on responses to petitions. The programmes are conducted through campaigns, public education, workshops and consultations. Process Flow: a. Receive and record petitions in the petitions register b. Acknowledge receipt of petitions to the petitioner(s) c. Refer petitions to the affected / relevant stakeholders d. Coordinate reports from the affected e. Conduct Preliminary investigation with petitioners f. Compile report and submit to relevant department g. Monitor and report on the implementation of the petitions |
| GGPP - 2.21.2 | Number of MPAC Capacity building initiatives implemented | Capacity buildings are workshops and activities that seek to empower councillors on oversight related activities. MPAC Trainings are facilitated in partnership with SALGA, EC-CoGTA |
| GGPP 2.21.3 | Number of Health and hygiene awareness campaigns conducted | Education and Training on food safety related topics to food handlers (formal and informal food handlers). This program is conducted to promote awareness on food hygiene measures and protocols to prevent incidents of food poisoning illnesses which may be fatal in some cases. The source document is the attendance register of the participants. |

| Indicator Code | KPI | Indicator description |
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| GGPP 2.21.4 | Number of Awareness campaigns provided to food handlers | Education and Training on food safety related topics to food handlers (formal and informal food handlers) |
| GGPP 2.21.4.1 | Number of Environmental Health calendar Days observed | The day is an observation of environmental health related topics or programs that are the national and international calendar i.e. Water week, Sanitation week |
| GGPP 2.21.4.2 | Number of Environmental calendar Days observed | The day is an observation of environmental related topics or programs that are the national and international calendar i.e. Arbor month, wetland's day, environmental day |
| GGPP - 2.21.5 | Number of Disaster awareness programmes conducted | Disaster awareness programmes are conducted on disasters and other related topics to communities, schools and other relevant stakeholders. This program is conducted to promote awareness on disaster management to achieve safety in our communities and environment. Source document is the attendance register of the participants |
| GGPP - 2.21.5.1 | Number of IDDR days observed | IDDR means International Day for Disaster Risk Reduction , a day that is commemorates on the 13 October every year to remember all those who passed away because of disasters |
| GGPP - 2.21.6 | Number of fire services awareness campaigns implemented | This program is to make the public aware of fire danger and how to combat these danger. a) The indicator description should state how performance of that indicator will be measured in terms of how data will be collected and which process will be undertaken to arrive to the source document.: h. The performance of the indicator is based on the total of fire incidence received;& i. At each awareness campaigns an attendance registers will be provided. j. The attendance register of each campaign will be used as the source document. b) Method of Calculation will be awareness programs per quarter based on the attendance register per awareness campaign.(Q1=12, Q2=12,Q3=12 & Q4=12). c) The output will be the total of awareness programs conducted in numbers per quarter. (4 x 12 awareness programs per quarter = 48). The outcome will be the reductions of fires in the specific area. |
| GGPP - 2.21.7 | Number of Environmental management awareness | The objective of the awareness programmes is to provide capacity and better understanding of sustainable environmental management practices. |

| Indicator Code | KPI | Indicator description |
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| | campaigns conducted | |
| GGPP - 2.21.8 | Number of Customer Education and awareness | the social facilitation activities will provide an analysis of the area within which the activity will be conducted and also to identify problem areas where municipal services are interrupted. The relevant stakeholders assist in resolving those problems faced by the community. Processes to follow: |
| | campaigns conducted | Identify the problem area Determine the solution Identify and provide an intervention as and when required. Source document - complaints management system report |
| GGPP – 4 | Number of Customer Care Management | Customer Care Management is programmes aimed at creating a relationship between the municipality and the community through and feedback mechanisms. The process for the implementation of Customer Care Management Programme will be as follows; |
| | Programmes implemented | Develop customer satisfaction survey methodology and plan Conduct customer satisfaction survey data collection |
| | | Conduct customer satisfaction data analysis and report development Submit final customer satisfaction report |
| GGPP-4.1 | Number of Customer satisfaction reports | Customer Care Management is programmes aimed at creating a relationship between the municipality and the community through and feedback mechanisms. The process for the implementation of Customer Care Management Programme will be as follows; |
| | developed and submitted | All reported complaints will registered and attended to within the appropriate timeframes in line with the service charter Escalate all complaints that have not been resolved within the timeframes for further actioning Customer satisfaction report developed and submitted for actioning Source document - complaints management system report, 2018/2019 customer satisfaction report |
| GGPP - 5 | Number of Risk based Internal Audit Plan developed and | Development and implementation of the approved risk based internal audit operational plan, based on documented risk assessment undertaken by management at least annually. The risk based plan comprises of the following; 1) Risk based Audits 2) Mandatory audits |
| | Implemented | 3) Follow up audit 4) Ad-hoc audit. 5) Consulting engagements. The process for the development and implementation of Risk based Internal Audit Plan will consider; a. institutional and operational risks |

| Indicator Code | KPI | Indicator description |
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| | | b. inputs of HOD's and audit committee |
| | | Method of calculation = 1 programme will be implemented with different activities in line with the approved plan Source documents = approved risk based internal audit plan, internal audit quarterly progress reports, engagement letters |
| GGPP - 6 | Number of Risk Management Programmes implemented | Risk Management is a process of identifying, assessing, prioritizing and managing risks/ threats within the institution. |
| GGPP - 6.1 | Number of Risk Management Monitoring reports compiled and submitted. | Quarterly - risk monitoring reports are reports that the risk committee chairperson report on to the audit committee. The process for the compilation and submission of Risk Management Monitoring report will be as follows; 1) Develop a monitoring tool for directorates to update implementation of risk mitigation measures. 2) Upon receiving the monitoring tool, POE's are validated and risk management report is consolidated 3) Risk management report is submitted to risk management committee for consideration 4) Risk assessment conducted |
| GGPP - 6.2 | Number of Anti- fraud and Corruption initiative conducted | Anti-fraud and Corruption initiative entails preventing, detecting and response to fraud instances within the institution. An Anti-fraud and Corruption assessment session will be conducted to give an update on the institutions fraud and corruption status which then be submitted to the risk committee. The process for conducting Anti-fraud and Corruption initiative will be as follows; 1. Conduct awareness 2. Declaration of interest by Councillors and employees Source documents = Awareness (Newsletters, emails, noticeboard), Report on declarations |
| GGPP - 6.3 | Number of Risk Assessments conducted | The institution is not expected to have capacity to deal with all its risk therefore, the risk assessment helps top prioritize the most critical risk and ultimately develop mitigation measures. The process for the implementation of risk assessment will be as follows; 1) Identification of objectives from the draft IDP 2) Identification of strategic and operational risks threatening the achievement of the IDP objectives 3) Rating of the risk in terms of impact and likelihood 4) Identification of the existing controls intended to minimise the risk 5) Assess the effectiveness of the existing controls 6) Identification of action plans to improve the existing controls Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter |

| Indicator Code | KPI | Indicator description |
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| GGPP - 6.4 | Number of compliance monitoring reports compiled and submitted | Compliance monitoring reports are compiled and submitted to the risk committee. The process for the compilation and submission of Compliance Monitoring reports will be as follows; 1) Develop a monitoring tool for directorates to update implementation of compliance requirements applicable to each directorate. 2) Upon receiving the monitoring tool, POE's are validated and compliance monitoring report is consolidated 3) Compliance monitoring report is submitted to risk management committee for consideration |
| GGPP - 7 | Number of PMS Programmes Implemented | PMS programmes are aims at reviewing, monitoring and improving performance systems of the municipality as per the framework |
| GGPP - 7.1. | Number of Organisational Performance Management Programmes Implemented | Organisational and Individual Performance Management are the two programmes that will be implemented to measure and evaluate the organisations performance against its intended outcomes and outputs. |
| GGPP - 7.1.1 | Number of Quarterly Performance Reviews conducted | Quarterly - performance reviews are done in order to ensure that early warnings of underperformance are detected and that mechanisms are put in place where such underperformance is recorded. These reviews are conducted per department by way of submission of a report and evidence that supports the report. A performance reporting template is prepared by the PMS Unit and forwarded to all HoD's and Administrators/Secretaries in the respective directorates, with a date on when the reports are to be submitted. Performance information is reviewed and forwarded to the internal audit unit for further verification and confirmation. Performance report is consolidated and presented to Council structures |
| GGPP - 7.1.2 | Number of SDBIP developed and submitted | The municipality develops a Service Delivery and Budget Implementation Plan (SDBIP) on an annual basis, which is to give effect to the Integrated Development Plan (IDP) and also budget of the municipality. This document must be signed by the Mayor 28 day after the approval of the IDP and Budget. It provides the basis for measuring performance in the delivery of services. After six months of the financial year the municipality must assess and review the performance of the institution to determine whether there is a need to revise its SDBIP in order to meet the targeted goals. |
| GGPP - 7.1.3 | Number of Statutory performance reports compiled and submitted | Every municipality is regulated to produce to statutory performance reports (Draft annual report, draft annual performance report) These reports seeks to provide a record of the activities that the municipality has undertaken during the year under review and also provides a report of the performance of the municipality against the budget, to assess the extent to which the priorities of Council were implemented and which were achieved. The report will be developed by the unit and submitted to council for approval and to the office of the Auditor General. |

| Indicator Code | KPI | Indicator description |
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| GGPP - 7.2 | Number of Individual Performance Management Programmes Implemented | Section 23 of R805 prescribes that a municipal manager and a manager accountable to the municipal manager, must sign a performance agreement. Such an agreement must be aligned to the municipality's integrated development plan (IDP) and the service delivery and budget implementation plan (SDBIP). Furthermore, it is prescribed that such an agreement must specify accountabilities and allow for continuous monitoring and measurement of performance against set targeted outputs. Such an agreement, the regulations prescribe, must be used as a basis for assessing whether an employee has met the performance expectations applicable to his/her job. When such an assessment is undertaken, and in an event that the employee performance was outstanding, such an employee must be rewarded appropriately |
| GGPP - 8 | Number of Special Programmes implemented | Implementation of HIV, TB and STI's, SPU Mainstreaming and Youth Development |
| GGPP - 8.1 | Number of HIV,TB and STI's programmes implemented as per SPU calendar and HIV,TB and STI's implementation plan | Implementing HIV, TB and STIs programmes as per the SPU Calendar of events and HIV,TB and STI's implementation plan per quarter. Process to be followed 1) Development of the implementation plan. 2) Engagement with relevant stakeholders (data acquisition) 3) Data analysis 4) Planning of the programme 5) Conducting the event 6) Follow-up's with stakeholders (feedback) |
| GGPP - 8.2 | Number of Mainstreaming Programmes for Designated Groups implemented as per SPU calendar | Coordinating Special Programmes mainstreaming targeting the needs of designated groups in line with the SPU Calendar. Process to be followed (Mainstreaming Strategy) 1) Engagement with relevant stakeholders (data acquisition) on the mainstreaming strategy 2) Consultation on the draft strategy and presentation of the draft to relevant stakeholders 3) Submission of the final to Council Structures and Council for approval). |
| GGPP - 8.3 | Number of Youth development programmes implemented as per SPU calendar | Implementing Youth development programmes as per the SPU calendar. Process to be followed (Youth Development Strategy) 1) Engagement with relevant stakeholders (data acquisition) on the youth development strategy 2) Consultation on the draft strategy and presentation of the draft to relevant stakeholders 3) Submission of the final to Council Structures and Council for approval). Process to be followed (Implementation of the Youth Development Programme) 1) Data analysis |

| Indicator Code | KPI | Indicator description |
|-------------------|---|--|
| | | 2) Planning of the programme (Back to school / Seminars / Imbizo's / Indaba's / Career Expo / Sporting Events) 3) Conducting of the event 4) Follow-up's with stakeholders (feedback) |
| GGPP - 9 | Number of Integrated Service Delivery programmes implemented | Implementation of Integrated Service Delivery and Social facilitation programmes |
| GGPP - 9.1 | Number of Ward War rooms Programmes supported as per Integrated Service Delivery Model | Implementing Integrated Service delivery- are service delivery day programmes implemented in communities in partnership with other stakeholders or sessions in which war room stakeholders are capacitated on functionality. This programme ensure that war rooms are supported to ensure functionality. The process for supporting Ward War rooms initiative as per Integrated Service Delivery Model will be as follows; 1. Coordinate the development of ward profiles 2. Facilitate recruitment of war room facilitators and their assistants 3. Facilitate sitting and capacitation of ward war rooms and ward war room committee members Source documents - ISDM, LM IDP's, Ward Based Plans |
| GGPP - 9.1.1 | Number of research and development programmes conducted | The programme includes research and development which provides more information to the war rooms (ward-based planning). 1. Activities includes 1)assessment of levels of service delivery conducted by the institution 2) assessment and reporting on the findings 2. Source documents - Customer satisfaction survey, media monitoring reports, stakeholder engagement reports |
| GGPP - 9.2 | Number of Social facilitation Programmes implemented as per Integrated Service Delivery Models | Social facilitation is a process used for promoting effective community participation through awareness meetings, capacity building and monitoring during project cycle using infrastructure grants. This programme will be implemented through three grants funding sources namely; 1. MIG 2 RBIG 3.WISG |
| GGPP - 9.2.1 | Number of MIG Social facilitation programmes implemented | Social facilitation is a process used for promoting effective community participation through awareness meetings, capacity building and monitoring during project cycle using MIG. The process for the implementation of MIG Social facilitation programmes will be as follows; 1) Community mobilization 2) Capacity building. |

| Indicator Code | KPI | Indicator description |
|-------------------|--|---|
| | | Facilitate sitting of PSC meetings. Monitor compliance with integrated service delivery model Source documents = minutes of community meetings, project steering committee meetings, capacity building reports and attendance registers |
| GGPP - 9.2.2 | Number of WSIG and RBIG Social facilitation programmes implemented | Social facilitation is a process used for promoting effective community participation through awareness meetings, capacity building and monitoring during project cycle using WSIG and RBIG. The process for the implementation of WSIG and RBIG Social facilitation programmes will be as follows; 1) Community mobilization 2) Capacity building. 3) Facilitate sitting of PSC meetings. 4) Monitor compliance with integrated service delivery model Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter Source documents = minutes of community meetings, project steering committee meetings, capacity building reports and attendance registers |
| GGPP -10 | Number of Municipal Support programmes implemented as per Municipal Support Model | As per the Municipal Support Framework, a municipal support plan will be implemented to support all 6 local municipalities. Each quarter there will be a programme to be implemented according to the plan and requests from LM. The support could be financial support or technical expertise support from the District's own capacity. The process for the implementation of Municipal Support programmes as per Municipal Support Model will be as follows; 1) A submission from a municipality is received from the municipality seeking assistance and support 2) The district identifies intervention programmes in support of municipalities 3) Support plan is developed and implemented per quarter in response to submission received and/or intervention identified Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter |
| GGPP-12 | Number of Sector plans developed , reviewed and implemented | Sector plan is a guiding plan that is developed and reviewed for each specific sector within the municipality and adopted by council. |
| GGPP- 12.1 | Number CHDM 2023-2024 IDP reviewed and adopted | IDP it's a guiding plan for the development within the municipal jurisdiction. It is a five year plan that is developed and reviewed annually by municipal council. The process for the development and approval of CHDM 2023-2024 IDP review will be as follows; 1) A framework and process plan for the development of the IDP 2023/24 will be developed and presented to council structures and council for adoption |

| Indicator Code | KPI | Indicator description |
|-------------------|--|--|
| | | An analysis report will be developed in consultation with LM's, Stats SA and other relevant stakeholders Draft IDP review will be presented to Council structures and council for adoption Consolation the draft IDP review with stakeholders. Submission of the final draft IDP review to Council structures and Council for approval |
| | | Source document: Stats SA reports, Vision 2030, 2022-2027 IDP, IDP Framework Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter |
| GGPP- 12.2 | Number of Water Service Development Plan reviewed and approved | A plan that outlines the water and sanitation backlogs per local municipality and includes capital plan that provides timeframes and budgets for individual projects to be implemented. The process for the review and approval of Water Service Development Plan will be as follows; 1) Procurement of service provider facilitated 2) Consultation with local municipalities and stakeholders on water services priorities 3) Presentation of water services priorities to relevant council structures. 4) Presentation of Draft WSDP 5) Approval of Draft WSDP facilitated |
| | | Source documents = draft IDP, vision 2030 |
| GGPP- 12.3 | Number of integrated Human Settlements plan reviewed and implemented | A plan that outlines Housing backlogs per local municipality and includes capital plan that provides timeframes and budgets for individual projects to be implemented 1) Procurement of Service Provider. 2) Consultation with local municipalities and stakeholders on Human settlements priorities 3) Presentation of Human settlement priorities to relevant council structures. 4) Presentation of Draft Integrated Human Settlement sector plan . 5) Approval of Draft facilitated Source documents = draft IDP, vision 2030 The process for the review and approval of Integrated Human Settlement sector plan will be as follows; |
| GGPP- 12.4 | Number of Integrated Stakeholder Management Plan reviewed and implemented | Integrated Stakeholder Management Plan - seeks to ensure integration of district wide stakeholder engagement activities. The process for the implementation of the integrated stakeholder management plan 1) Review integrated Stakeholder Management Plan for implementation 2) Coordinate relevant internal stakeholders for inputs and implementation 3) Agenda and programme developed for stakeholders meeting 4) Report is prepared and submitted to the Head of Department Source documents = Approved Integrated Stakeholder Management plan, events guidelines, etc |

| Indicator Code | KPI | Indicator description |
|-------------------|--|---|
| | | Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter |
| GGPP- 12.5 | Number of Protocol and Etiquette policies reviewed and implementation plans Implemented | Protocol and Etiquette policy and Implementation Plan - seeks to uphold standards and establish proper handling of dignitaries in official functions, activities and events top project a positive image of the district. The process for the implementation of Protocol and Etiquette policy reviewed and Plan will be as follows; c. Soliciting government circulars on Protocol and Etiquette policy related updated d. Ensuring that Protocol and Etiquette policy imperatives are observed at all municipal events e. Report prepared and submitted to the HoD Source documents = Standing rules of order of Council, |
| GGPP- 12.6 | Number of PMS Framework reviewed and approved | The PMS framework describes and represents how the municipality's cycle and processes of performance planning, monitoring, measurement review, reporting and improvement will be conducted, organised and managed, including determining the different role players. This framework will be reviewed by council annually. |
| GGPP - 12.7 | Number of CHDM Community Fire safety by- law developed and adopted by Council | The by -law will address all public safety issues relating to fires in the entire district of Chris Hani. a)Processes to follow: 1) Draft by law developed and submitted to Council structures and council for noting. 2) Draft by-law presented to stakeholders for consultation. 3) Final draft by-law presented to Council structures and council for approval. 4) The output will be an approved community fire safety by law. Source document - Fire brigade Act, National Disaster Management Act, Approved by-laws from neighbouring district municipalities, draft Fire services operational plan |
| GGPP - 12.8 | Number of water services by-laws approved and gazetted | The by -law will address all water services issues of the Chris Hani district. a)Processes to follow: 1) Draft by law developed and submitted to Council structures and council for noting. 2) Draft by-law presented to stakeholders for consultation. 3) Final draft by-law presented to Council structures and council for approval. 4) The output will be an approved water services by-law. Source document - water services act, Municipal Structures Act |
| GGPP - 12.9 | Number of Infrastructure Asset Management Plans developed | Infrastructure asset management plan (IAMP) is a plan developed for the management of infrastructure assets with the aim of providing specified levels of service in the cost effective manner, now and in the future. The process involves 1. Procurement of a service provider to develop the plan 2. Monitoring of a service provider appointed to develop the IAMP |

| Indicator Code | KPI | Indicator description |
|-------------------|--|---|
| GGPP - 12.10 | Number of water conservation and demand management strategies reviewed | Review of water conservation and demand management strategy to reduce water losses, be it billing, actual or apparent losses. Process to be followed: 1) Procurement of a service provider 2) Monitoring the review process conducted by the service provider 3) Implementation of water conversation and demand management strategy |
| GGPP - 12.11 | Number of water safety plan developed and implemented | Development of the water safety plan is a plan to ensure the safety of driving water through the use of a comprehensive risk assessment and risk management approach that encompasses all steps in a water supply from catchment to consumer. Process to be followed: 1) Procurement of a service provider 2) Monitoring the development process conducted by the service provider 3) Implementation of water safety plan |
| GGPP - 12.12 | Number of wastewater risk abatement plan developed and implemented | Development of the wastewater risk abatement plan is a risk plan to ensure the acceptable waste water quality that does not exceed the numerical limits in wastewater treatment works licences/ permits by implementing an integrated risk management plan from wastewater collection through wastewater treatment. Process to be followed: 1) Procurement of a service provider 2) Monitoring the development process conducted by the service provider 3. Implementation of wastewater risk abatement plan |
| GGPP - 12.13 | Number of Agricultural Sector Plans Reviewed and Implemented | A plan that outlines Agricultural backlogs per local municipality and includes capital plan that provides timeframes and budgets for individual projects to be implemented |
| GGPP - 12.14 | Number of Forestry Sector Plans reviewed, adopted and Implemented | A plan that outlines forestry backlogs per local municipality and includes capital plan that provides timeframes and budgets for individual projects to be implemented |
| GGPP – 13 | Number of executive support programmes developed, coordinated and implemented | The executive support programmes include the Council Support, Mayoral Committee support, MPAC and Whippery support activities coordinated and implemented by the Executive Support offices (Office of the Speaker, Office of the Executive Mayor, MPAC and Chief Whip) |
| GGPP - 13.1 | Number of council support activities | Women Caucus - it's a section 79 of MSA 117 of 1998 committee that deals with women's issues across the district. 1) Convene then district woman caucus meetings |

| Indicator Code | KPI | Indicator description |
|-------------------|---|--|
| | coordinated and implemented | 2) Convene the Woman Caucus Chairpersons from Local Municipalities 3) The Woman Caucus and Council Sittings. The Process involves preparation and publication of the sitting before the actual sitting on approved newspapers. Ensure that the agenda of the council is circulated to all members of the council, and that the logistical arrangements are done. |
| GGPP - 13.2 | Number of Mayoral support programmes coordinated and implemented | Coordination of the Mayoral Committee meetings, Implementation of the resolution register of Council, Preparation and Submission of Reports due from the Office of the Executive Mayor, Facilitation and submission of annual report to MPAC and signing of compliance documents |
| GGPP - 13.3 | Number of MPAC reports compiled and submitted | MPAC is an oversight committee that reviews, analyse and make recommendations on the reports dealing with compliance issues to ensure Good governance. Process to follow: Develop and present terms of reference for MPAC aligned to the term of Council. Annual work plan is developed and submitted to Council for approval before the end of the financial year. Attached to the annual work plan is a project visit plan for infrastructural related project. The MPAC oversight committee sits on quarterly bases to unpack the issues at hand which include adhoc projects. Reports are compiled and submitted to Council for consideration |
| GGPP - 13.4 | Number of Whippery support programmes coordinated and implemented | Coordinate council caucuses, Establishment of Whippery committees in other local municipalities in the district, Formation of the district Whippery committee, outreach on the functionality of Whippery committees in the local municipal councils in the district |

6. REPORT ON THE PERFORMANCE OF SERVICE PROVIDERS

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|----|-----------------------------|-------------------|---|---|-------------------|--|
| 1 | 05/2020- 2021/LG(BN) | 13/10/2020 | CLUSTER 4 WATER SUPPLY BACKLOG PROJECT: NORTHERN SCHEME PRIMARY MAINS & PUMP STATION FROM NGXUZA TO NDUM RESERVIOR (NGXUMZA TO EAST) | BATABILE CONSTRUCTION SERVICES | R44 163 724,11 | 98,00% |
| 2 | 06/2018MD(T N) | 27/11/2018 | CLUSTER 6 PROJECT: CONSTRUCTION OF HLOPEKAZI AND KUMBEKE BULK INFRASTRUCTURE | EGXENI ENGINEERS CC | R20 995 075,62 | 78,63% |
| 3 | 06/2020- 2021/LG(BN) | 20/11/2020 | CLUSTER 4 WATER SUPPLY BACKLOG: NORTHERN SCHEME PRIMARY STEEL MAIN AND PUMP FROM SIKUNGWINI TO NGXUMZA RESERVOIR | IPM PLANT HIRE | R50 830 175,89 | 91,49% |
| 4 | 07/2018- 2019/MD(TN) | 05/03/2019 | ENGCOBO NEW 2MI/ DAY WASTE WATER TREATMENT WORKS PHASE 1 AND OUTFALL SEWER | SHIRDO TRADING (PTY) LTD JV KWANYONI TRADING ENTERPRISE | R91 021 376,40 | 24,92% (Slow moving project.) However, after 30 June 2023, the project has moved 45% and be completed October 2024 due to specialise skills needed in the project. |
| 5 | 08/2018/MD(TN) | 21/09/2018 | CLUSTER 4 WATER SUPPLY BACKLOG ERADICATION: KWAMZOLA AND MATAFENI-B WATER SUPPLY | DIPHATSE TRADING AND PROJECTS | R34 032 169,54 | 98,00% |
| 6 | 09/2020- 2021/LG(TN) | 02/03/2021 | CLUSTER 6 WATER BACKLOG PROJECT - GQAGA TO MNYOLO WATER SUPPLY PROJECT | BATABILE CONSTRUCTION SERVICES | R46 794 488,35 | 98,00% |
| 7 | 11/2019- 2020/MS(BN) | 20/03/2020 | GUBENXA AND MAXONGOSHOEK VILLAGES RURAL WATER SUPPLY SCHEME | AMLO JV INTELLEC CONSTRUCTION | R17 471 307,79 | 78,00% |
| 8 | 12/2018- 2019/MD(AM) | 29/05/2019 | CLUSTER 5 WATER SUPPLY BACKLOG PROJECT: WATER SUPPLY TO LALINI AND NKWENKWEZI VILLAGES | AMADWALA TRADING 363 CC | R19 501 160,20 | 70,99% |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|----|-------------------------|-------------------|--|---|--------------------|---|
| 9 | 14/2019- 2020/LG(BN) | 12/06/2020 | CLUSTER 2 WATER SUPPLY BACKLOG PROJECT REGIONAL SCHEME 3 PHASE 1D CONSTRUCTION OF BOREHOLE PUMPSTATIONS, STEELTANKS, PUMPING MAINS AND WATER RECULATION NETWORK FOR BUKWANA AND SURROUNDING AREAS | CAPE KEI CONSTRUCTION SERVICES | R24 586 624,84 | 97,37% |
| 10 | 15/2019- 2020/LG(BN) | 20/03/2020 | CLUSTER 2 WATER SUPPLY BACKLOG PROJECT: GQEBENYA SCHEME CONSTRUCTION OF A 500KL CONCRETE RESERVIOR, TWO BOREHOLE | SAKWE PROJECTS JV MASHAMPLA DUMZA TRADING | R18 961 563,98 | 97,49% |
| 11 | 15/2018- 2019/MD(BN) | 29/05/2019 | WATER SUPPLY BACKLOGIN CHDM-CLUSTER 1: CONSTRUCTION OF BULK WATER SUPPLY : MHLANGA AND MGWALANE | MAMLAMBO CONSTRUCTION | R76 664 567,55 | 96,88% |
| 12 | 17/2018- 2019/MD(TN) | 17/02/2020 | CLUSTER 6 WATER BACKLOG: LOKISHINI PHASE 2 - VILLAGE RETICULATION | SEEBO JV AMLO CC | R30 697 444,50 | 91,00% |
| 13 | 17/2019- 2020/MD(BN) | 24/03/2020 | CLUSTER 2 WATER SUPPLY BACKLOG PROJECT: SCHEME 3-1C CONSTRUCTION OF PUMPING MAINS, BOOSTER PUMPSTATIONS & WATER RETICULATION | SAKWE PROJECTS JV MASHAMPLA DUMZA TRADING | R29 640 382,26 | 80,52% |
| 14 | 18/2019- 2020/LG(AM) | 12/06/2020 | MOLTENO WATER TREATMENT WORKS-PHASE 1 CONTRACT 1B-CONSTRUCTION OF THE NEW500MM DIAMETER SUPPLY MAIN AND 2.75MI RESERVIOR | NORLAND CONSTRCTION | R12 318 943,75 | 89,60% |
| 15 | 19/2019- 2020/LG(AM) | 12/06/2020 | MOLTENO WATER TREATMENT WORKS-PHASE 1 CONTRACT 1A-REFURBISHMENT OF THE MOLTENO WATER TREATMENT WORKS (ME) | PURPLE PANSY 101CC t/a SONDEZA AMANZI | R3 933 814,78 | 83,41% |
| 16 | 20/2019- 2020/LG(BN) | 12/06/2020 | CLUSTER 2WATER SUPPLY BACKLOG PROJECT: REGIONAL SCHEME 3 PHASE 1: LUTUTU CONSTRUCTION OF A PUMPING MAIN, WATER RETICULATION NETWORK AND CONCRETE RESERVIOR REPAIR FOR LUTUTU VILLAGE | TATI GROUP JV | R8 304 084,78 | 94,98% |
| 17 | 21/2019- 2020/LG(BN) | 12/06/2020 | DORDRECHT WATER AND SANITATION SERVICES: UPGRADING OF BULK WATER SUPPLY PHASE 4: CONSTRUCTION OF DAMS, PUMPSTATIONS AND PUMPLINES | MAGNACORP 485 CC JV LIVERO CIVILS (PTY) LTD | R134 634 736,60 | 22,40% (Slow moving project). Due to challenges experienced in the implementation stages. However, there is a |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|----|-------------------------|-------------------|--|---|--------------------|--|
| | | | | | | catch up plan to complete the project. |
| 18 | 23/2019- 2020/LG(TN) | 12/06/2020 | CLUSTER 6 WATER BACKLOG: SUNDWANA VILLAGE RETICULATION PHASE 1 | KAYALIHLE/STARTIME JV | R15 823 728,48 | 91,68% |
| 19 | 24/2019- 2020/LG(TN) | 12/06/2020 | CLUSTER 6: WATER BACKLOG PROJECT: KUMBEKE VILLAGE RETICULATION WATER SUPPLY SCHEME | CAPE KEI CONSTRUCTION SERVICES | R7 704 561,64 | 74,56% |
| 20 | 25/2019- 2020/LG(TN) | 12/06/2020 | CLUSTER 6: WATER BACKLOG PROJECT: LIXENI & NCITYANA VILLAGE RETICULATION WATER SUPPLY SCHEME | MATEMBA CIVILS AMATOLE CC | R9 418 272,52 | 79,90% |
| 21 | 27/2019- 2020/LG(BN) | 12/06/2020 | CALA BULK SANITATION SERVICES: COMPLETION OF CALA WASTE WATER TREATMENT WORKS INCLUDING BULK PUMP STATIONS AND ASSOCIATED RISING MAINS PHASE 1 | RUWACON | R37 950 000,00 | 62,13% |
| 22 | 27/2020- 2021/LG(TN) | 03/03/2021 | CLUSTER6 WATER BACKLOG: CONSTRUCTION OF A BULK LINK LINE FROM SITHOLENI WATER TREATMENT WORKS TO LOKSHINI COMMAND RESEVIOR | TYEKS CONSORTIUM JV | R23 760 918,09 | 93,44% |
| 23 | 29/2016/MD(TN) | 13/12/2017 | UPGRADE OF TSOMO WATER WASTE TREATMENT WORKS: CIVIL MECHANICAL AND INSTRUMENTATION WORK | BICACON (PTY) LTD | R86 055 521,51 | 99,00% |
| 24 | 33/2015/MD(TN) | 21/12/2017 | TSOMO RIVER ABSTRACTION AND WATER TREATMENT WORKS CONSTRUCTION | UNIK CIVIL ENGINEERIG | R215 850 960,12 | 99,33% |
| 25 | 34/2019- 2020/LG(TN) | 12/09/2020 | CLUSTER6: WATER BACKLOG: LOKSHINI VILLAGE RETICULATION PHASE 3 | COALITION TRADING 1203 | R27 718 157,99 | 89,78% |
| 26 | 35/2019- 2020/LG(TN) | 09/12/2020 | CLUSTER4: WATER SUPPLY BACKLOG PROJECT: NCORA FLATS INTERIM SCHEME VILLAGE RETICULATION FOR MTSHABE | BUCHULE ENGINEERS t/a SNA CONSTRUCTION | R2 419 002,21 | 89,93% |
| 27 | 36/2019- 2020/LG(TN) | 20/11/2020 | CLUSTER 4 WATER BACKLOG NCORA FLATS INTERIM SCHEME: BULK SUPPLY AND VILLAGE RETICULATION FOR GASINI | BUCHULE ENGINEERS t/a SNA CONSTRUCTION | R5 438 838,04 | 64,98% |
| 28 | 37/2019- 2020/LG(AM) | 24/08/2020 | CLUSTER 5: WATER SUPPLY BACKLOG PROJECT: WATER SUPPLY TO MNTUNTLONI B VILLAGES | MUSCON CIVILS | R18 411 682,85 | 91,97% |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|----|-------------------------|-------------------|--|--|--------------------|--|
| 29 | 38/2019- 2020/LG(AM) | 02/03/2021 | CONSTRUCTION OF HEWU RA60 REGIONAL WATER SUPPLY SCHEME PHASE 8: ZONE 2 RISING MAIN | IPM PLANT HIRE | R39 283 092,36 | 99% |
| 30 | 39/2019- 2020/LG(AM) | 18/12/2020 | CONSTRUCTION OF NEW RATHWICK SEWER PUMP STATION AND BULK MAIN TO THE ENKULULEKWENI SEWER PUMP STATION IN KOMANI | BITLINE SA 1060 | R32 850 159,33 | 42,95% (Consultants pullout of site). However, the contractor and consultant were engaged, and the project will resume by September 2023. |
| 31 | 40/2019- 2020/LG(AM) | 20/11/2020 | NEW RATHWICK BULK SERVICES PHASE 4 (M&E) TENDER FOR EQUIPPING AND COMMISSIONING OF MECHANICAL AND ELECTRICAL EQUIPMENT FOR THE NEW RATHWICK SEWER PUMP STATION IN KOMANI | KLOMAC ENGINEERING | R10 579 218,28 | 10,68% (This project feeds bid 39/2019- 2020). This is a result of the disputes, however, the project will resume in October 2023 |
| 32 | 42/2016/BM(NM) | 29/05/2019 | CONSTRUCTION OF NEW CHRIS HANI VILLAGE OFFICE PARK - PHASE 1 | BASE MAJOR CONSTRUCTION (PTY) LTD | R170 950 030,71 | 7,33% (The project is halted due to insufficient funds). However, CHDM is exploring private partnership to complete the project. |
| 33 | 8/3/1- 2021/22 | 25/10/2021 | HEWU RA60 WATER SUPPLY SCHEME -PHASE 9: RAW WATER SUPPLY TO SADA TREATMENT WORKS | SEEDI DEVELOPMENT PROJECTS | R49 928 772,82 | 95,34% |
| 34 | 8/3/2- 2021/22 | 08/11/2021 | HEWU RA60 REGIONAL WATER SUPPLY SCHEME PHASE 10:6.0ML FOR SADA WHITTLESEA ZONE 3 | AFRICONSTRUCTION JV MASHAMPLADUMZA GENERAL TRADING | R28 398 422,13 | 42,36% |
| 35 | 8/3/3- 2021/22 | 25/10/2021 | HEWU RA60 REGIONAL WATER SUPPLY SCHEME PHASE 11: SADA WATER TREATMENT WORKS ZONE 1 RISING MAIN, 12ML RESERVOIR & GRAVITY MAINS TO ZONE 1 AND SADA PRISON | AFRICONSTRUCTION JV MASHAMPLADUMZA GENERAL TRADING | R47 548 133,26 | 53,02% |
| 36 | 8/3/4- 2021/22 | 14/02/2022 | CLUSTER 5 WATER SUPPLY BACKLOG PROJECT: BULK LINES PHASE 1A | TYEKS PLANT HIRE AND CONSTRUCTION | R29 634 483,42 | 39,55% |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|----|--------------------|-------------------|---|--|-------------------|--------|
| 37 | 8/3/5- 2021/22 | 14/02/2022 | CLUSTER 5 WATER SUPPLY BACKLOG PROJECT: EASTERN DISTRIBUTION LINES PHASE 2 | PHUMELELA DLOMO JV ZAMANKOSI DEVELOPMENT | R44 239 513,94 | 91,78% |
| 38 | 8/3/6- 2021/22 | 15/03/2022 | CLUSTER 5: WATER SUPPLY BACKLOG WESTERN DISTRIBUTION LINES PHASE 3 | CYCLE CIVILS AND PROJECTS | R10 208 910,46 | 89,01% |
| 39 | 8/3/9- 2021/22 | 23/11/2021 | PROFESSIONAL SERVICES TO PROVIDE TECHNICAL SUPPORT FOR ROAD ASSET MANAGEMENT SYSTEM (RAMS) FOR A PERIOD OF THREE (3) YEARS | PHATSIMO MANAGEMENT CONSULTANTS (PTY) Ltd | R7 769 011,54 | 84,24% |
| 40 | 8/3/10- 2021/22 | 17/03/2022 | CLUSTER 7 WATER SUPPLY BACKLOG: ELUHEWINI INTERNAL RETICULATION WATER SUPPLY SCHEME 1 | DEVOMIX CONSTRUCTION (PTY) LTD | R24 472 532,63 | 58,66% |
| 41 | 8/3/11- 2021/22 | | CLUSTER7 WATER SUPPLY BACKLOG: GULANDODA WATER SUPPLY SCHEME | BITLINE SA 1060 CC | R14 738 183,11 | 39,29% |
| 42 | 8/3/12- 2021/22 | 20/12/2021 | CLUSTER 4 WATER SUPPLY BACKLOG ERADICATION PROGRAM: NCORA/JOJWENI SECONDARY BULK & WATER SUPPLY | BITLINE SA 1060 CC | R30 998 874,58 | 56,54% |
| 43 | 8/3/13- 2021/22 | 17/03/2022 | CLUSTER 4 WATER SUPPLY BACKLOG ERADICATION PROJECT (QOLWENI -A AND HALA BB WATER SUPPLY VILLAGE RETICULATION) | DEVOMIX CONSTRUCTION (PTY) LTD | R14 167 628,69 | 53,26% |
| 44 | 8/3/14- 2021/22 | 23/11/2021 | CHDM CLUSTER 2 RURAL WATER SUPPLY BACKLOG: (MDENI) NJOMBELA - ENDWE WATER SUPPLY | SOYAM' UBUNTU TRADING JV INTELLEC CONSTRUCTION | R16 302 891,72 | 69,33% |
| 45 | 8/3/16- 2021/22 | 23/12/2021 | CLUSTER 4 WATER SUPPLY BACKLOG PROJECT NCORA FLATS INTERIM SCHEME: SUPPLY AND RETICULATION OF MGABABA-A (KUNOBOPA) VILLAGE | SIME HOLDINGS (PTY) LTD JV PALAM TRADING (PTY) LTD | R6 467 051,54 | 97,65% |
| 46 | 8/3/17- 2021/22 | 30/03/2022 | CLUSTER 6 WATER BACKLOG PROJECT : HLOPEKAZI VILLAGE RETICULATION WATER SUPPLY SCHEME | MAZANGWA CONSTRUCTION | R47 478 069,14 | 47,28% |
| 47 | 8/3/18- 2021/22 | 20/12/2021 | CLUSTER 8 WATER SUPPLY BACKLOG: CONSTRUCTION OF QWEBEQWEBE VILLAGE BULK MAIN, STORAGE RESERVOIR & RETICULATION | SIME HOLDINGS (PTY) LTD | R9 273 128,38 | 87,70% |

| No | Contract | Appointm | Description | Contractor | Project Cost | Status |
|----|----------------------|------------------------|--|-----------------------------------|---------------------|----------------|
| 48 | Number 8/3/25- | ent date 17/03/2022 | CLUSTER 4 WATER SUPPLY BACKLOG NORTHEN | JORDAAN IRRIGATION | R74 608 | 53,88% |
| 10 | 2021/22 | 1770072022 | SCHEME: PRIMARY MAINS AND 1.8ML | SUPPLIES t/a EAST COAST | 188,15 | 00,0070 |
| | | | RESERVOIR FROM SIKHUNGWINI TO LADY | IRRIGATION | | |
| | | | FRERE AND UPPER NDONGA COMPLETION WORKS | | | |
| 49 | 8/3/27- | 17/03/2022 | CLUSTER 4 WATER SUPPLY BACKLOG: | THUBALAM TRADING CC | R64 205 | 79.58% |
| | 2021/22 | ,00,2022 | NORTHEN SCHEME PRIMARY GRAVITY MAINS | | 717,21 | . 0,0070 |
| | | | FROM NDUM NDUM TO CALA RESERVOIRS | | | |
| 50 | 8/3/28- | 17/03/2022 | CLUSTER 9 WATER BACKLOG: PHASE 5 | SLS CIVILS AND EG PIPING | R49 517 | 90,78% |
| | 2021/22 | | CONSTRUCTION OF INFRASTRUCTURE TO LINK THE NQAMAKWE COMMAND RESERVOIR TO THE | PIPING | 164,86 | |
| | | | CLUSTER 8 WATER BACKLOG PROJECT | | | |
| 51 | 8/3/29- | 30/03/2022 | CLUSTER 8 WATER SUPPLY BACKLOG CHABA | TATI GROUP JV A AND P | R12 051 | 60,36% |
| | 2021/22 | | WATER BULK MAIN SUPPLY SCHEME STORAGE | CIVILS | 013,20 | |
| 52 | 8/3/32- | 27/05/2022 | RESERVOIR AND RETICULATION CLUSTER 4 WATER SUPPLY BACKLOG: PROJECT | IVIWE ENGINEERING | R17 548 | 52,00% |
| 52 | 2021/22 | 21/03/2022 | NCORA FLATS INTERIM SCHEME VILLAGE | SOLUTIONS | 759,27 | 32,0070 |
| | | | RETICULATION FOR GESINI (MAWUSHENI) & | | , | |
| | 0.10.10.0 | | MATAFENI A | | | 4= === |
| 53 | 8/3/33- 2021/22 | 31/03/2022 | CLUSTER 9 WATER BACKLOG : CONSTRUCTION OF XOLOBE AREA RETICULATION WATER | TYEKS PLANT HIRE AND CONSTRUCTION | R31 636 851,95 | 47,56% |
| | 2021/22 | | SUPPLY SCHEME: PHASE 1 (KHUZE LINK) | CONSTRUCTION | 001,90 | |
| 54 | 8/3/19- | 26/06/2023 | CLUSTER 4 WATER SUPPLY BACKLOG | MAZANGWA | R18 114 | 0,00% |
| | 2022/2023 | | NORTHERN SCHEME NDUM-NDUM TO UPPER | CONSTRUCTION | 476,86 | (New contract) |
| | | | NDWANA PRIMARY PUMPING MAIN FROM NDUM- NDUM TO SALT RIVER RESERVOIR | | | |
| 55 | 8/3/20- | 26/06/2023 | CLUSTER 4 WATER SUPPLY BACKLOG | PALAM TRADING | R52 503 | 0.00% |
| | 2022/2023 | | NORTHERN SCHEME PRIMARY GRAVITY MAINS | | 684,35 | 3,0070 |
| | | | FROM NDUM-NDUM TO LOWER LUFUTA | | | (New contract) |
| 56 | 8/3/21- 2022/2023 | 26/06/2023 | CLUSTER 4 WATER SUPPLY BACKLOG ERADICATION PROGRAM LUBISI/NORTHERN | SNA CONSTRUCTION (Pty) | R27 338 | 0,00% |
| | 2022/2023 | | SHEME NDUM-NDUM TO UPPER INDWANA | Ltd | 964,86 | (New contract) |
| | | | (GRAVITY MAIN) | | | |
| 57 | 03/2019- | 2020/02/17 | SUPPLY AND DÉLIVERY OF END USER | ION CONSULTING (PTY) | RATE BASED | 100% |
| | 2020/YD (BF) | | COMPUTING FOR CHRIS HANI DISTRICT | LTD | | |
| | | | MUNICIPALITY FOR A PERIOD OF THREE YEARS | | | |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|----|-----------------------------|-------------------|---|---|--------------|--------|
| 58 | 03/2020- 2021/MD (ZN) | 2020/10/13 | PROVISION OF SHORT TERM INSURANCE FOR THE INSURANCE PORTFOLIO OF CHRIS HANI DISTRICT MUNICIPALITY FOR THE PRTIOD OF 3 YEARS | LATERAL UNISON | 7 591 507,00 | 79% |
| 59 | 04/2020- 2021/MD (ZM) | 2020/10/13 | FULL PHYSICAL VERIFICATION OF IMMOVABLE ASSETS, CONDITION ASSESSMENT, REVISE REMAINING USEFUL LIVES OF ASSET (RUL) WHERE NECESSARY AND COMPILATION OF GRAP COMPLIANT IMMOVABLE FIXED ASSET REGISTER FOR THE PERIOD OF 3 (THREE) YEARS | SMEC SOUTH AFRICA | 2 494 800,00 | 84% |
| 60 | 12/2020- 2021/YD(ST) | 2021/04/30 | PROVISION OF SECURITY MANAGEMENT SERVICES FOR THE PERIOD OF THREE (3) YEARS (CLUSTER 1 SITES) | SIYAZU AGENCIES | RATE BASED | 72% |
| 61 | 13/2020- 2021/YD(ST) | 2021/04/30 | PROVISION OF SECURITY MANAGEMENT SERVICES FOR THE PERIOD OF THREE (3) YEARS (CLUSTER 2 SITES) | TYEKANA PROTECTION AND CLEANING (PTY) LTD | RATE BASED | 72% |
| 62 | 14/2020- 2021/YD(ST) | 2021/04/30 | PROVISION OF SECURITY MANAGEMENT SERVICES FOR THE PERIOD OF THREE (3) YEARS (CLUSTER 3 SITES) | WORLD FOCUS 1818 cc t/a SOVSECURITY SERVICES | RATE BASED | 72% |
| 63 | 15/2020- 2021/YD (TS) | 2021/04/30 | PROVISION OF SECURITY MANAGEMENT SERVICES FOR THE PERIOD OF THREE (3) YEARS (CLUSTER 4 SITES) | RELIABLE GUARDS | RATE BASED | 72% |
| 64 | 16/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF ELECTRICAL & MECHANICAL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | PURPLE PANSY 101 CC t/a SONDEZA AMANZI | RATE BASED | 73% |
| 65 | 16/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF ELECTRICAL & MECHANICAL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | BB WATER SERVICE (PTY) LTD | RATE BASED | 73% |
| 66 | 16/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF ELECTRICAL & MECHANICAL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | MFURAA PROJECTS & GENERAL CC | RATE BASED | 73% |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|----|-------------------------|-------------------|--|---|--------------|--------|
| 67 | 16/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF ELECTRICAL & MECHANICAL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | STEVELEC ELECTRICAL AND MECHANICAL CONTRACTORS | RATE BASED | 73% |
| 68 | 16/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF ELECTRICAL & MECHANICAL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | MIZOTECH TSHIYA JV | RATE BASED | 73% |
| 69 | 16/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF ELECTRICAL & MECHANICAL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | COALITION TRADING 1203 CC | RATE BASED | 73% |
| 70 | 16/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF ELECTRICAL & MECHANICAL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | NOVUBU CONSTRUCTION CC | RATE BASED | 73% |
| 71 | 16/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF ELECTRICAL & MECHANICAL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | VALOTONE 94 CC | RATE BASED | 73% |
| 72 | 16/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF ELECTRICAL & MECHANICAL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | HATSHAMA DEVELOPERS JV MASHAMPLADUMZA GENERAL TRADING | RATE BASED | 73% |
| 73 | 16/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF ELECTRICAL & MECHANICAL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | TM CONSORTIUM (PTY) LTD | RATE BASED | 73% |
| 74 | 17/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF CIVIL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | TATI GROUP (PTY) LTD | RATE BASED | 73% |
| 75 | 17/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF CIVIL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | ODWA AND SOLIE TRADING | RATE BASED | 73% |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|----|-------------------------|-------------------|---|--|--------------|--------|
| 76 | 17/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF CIVIL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | AMULET GROUP (PTY) LTD | RATE BASED | 73% |
| 77 | 17/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF CIVIL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | C&B DICKENS TRANSPORT t/a B&B TRANSPORT AND PLANT HIRE | RATE BASED | 73% |
| 78 | 17/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF CIVIL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | GINGORDON METHODS TRADING | RATE BASED | 73% |
| 79 | 17/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF CIVIL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | MASIYABU TRADING JV BUCHULE ENGINEERS | RATE BASED | 73% |
| 80 | 17/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF CIVIL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | DICLA TRAINING AND PROJECTS | RATE BASED | 73% |
| 81 | 17/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF CIVIL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | SLS CIVILS | RATE BASED | 73% |
| 82 | 17/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF CIVIL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | AFRI CONSTRUCTION JV MASHAMPLADUMZA | RATE BASED | 73% |
| 83 | 17/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF CIVIL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | P.K VALVES CC | RATE BASED | 73% |
| 84 | 17/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF CIVIL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | CYCLE CIVILS & PROJECTS | RATE BASED | 73% |
| 85 | 17/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF CIVIL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | BLAZINGO'S / MAMKHWEMNTE JV | RATE BASED | 73% |
| 86 | 17/2020- 2021/LG(MS) | 19 March 2021 | PROVISION OF SUPPORT SERVICES FOR CHDM FOR REPAIRS AND MAINTANANCE OF CIVIL INFRASTRUCTURE FOR A PERIOD OF 3YEARS | MIZOTECH TSHIYA JV | RATE BASED | 73% |

| No | Contract | Appointm | Description | Contractor | Project Cost | Status |
|-----|--------------------|----------------------|--|-------------------------|---------------------|--------|
| 0.7 | Number 17/2020- | ent date 19 March | PROVISION OF SUPPORT SERVICES FOR CHDM | BB WATER SERVICES | RATE BASED | 73% |
| 87 | 2021/LG(MS) | 2021 | FOR REPAIRS AND MAINTANANCE OF CIVIL | | RATE BASED | 13% |
| | 202 1/LG(IVIS) | 2021 | INFRASTRUCTURE FOR A PERIOD OF 3YEARS | (PTY) LTD | | |
| 88 | 17/2020- | 19 March | PROVISION OF SUPPORT SERVICES FOR CHDM | MAYIBUYE I-AFRIKA | RATE BASED | 73% |
| 88 | 2021/LG(MS) | 2021 | FOR REPAIRS AND MAINTANANCE OF CIVIL | MATIBUTE I-AFRIKA | RATE BASED | 13% |
| | 2021/LG(IVIS) | 2021 | INFRASTRUCTURE FOR A PERIOD OF 3YEARS | | | |
| 89 | 17/2020- | 19 March | PROVISION OF SUPPORT SERVICES FOR CHDM | MFURAA PROJECTS & | RATE BASED | 73% |
| 09 | 2021/LG(MS) | 2021 | FOR REPAIRS AND MAINTANANCE OF CIVIL | GENERAL CC | KAIE BASED | 1370 |
| | 202 1/LG(IVIS) | 2021 | INFRASTRUCTURE FOR A PERIOD OF 3YEARS | GENERAL CC | | |
| 90 | 17/2020- | 19 March | PROVISION OF SUPPORT SERVICES FOR CHDM | LAKHAZA CONSTRUCTION | RATE BASED | 73% |
| 90 | 2021/LG(MS) | 2021 | FOR REPAIRS AND MAINTANANCE OF CIVIL | LAKHAZA CONSTRUCTION | KAIE BASED | 1370 |
| | 202 1/LG(IVIS) | 2021 | INFRASTRUCTURE FOR A PERIOD OF 3YEARS | | | |
| 91 | 17/2020- | 19 March | PROVISION OF SUPPORT SERVICES FOR CHDM | SOYAM'UBUNTU TRADING | RATE BASED | 73% |
| 91 | 2021/LG(MS) | 2021 | FOR REPAIRS AND MAINTANANCE OF CIVIL | JV YOLITAE ENTERPRISE | KAIE BASED | 7376 |
| | 202 1/LG(IVIS) | 2021 | INFRASTRUCTURE FOR A PERIOD OF 3YEARS | JV TOLITAL LITTLICTRISE | | |
| 92 | 17/2020- | 19 March | PROVISION OF SUPPORT SERVICES FOR CHDM | ZAMANKOSI | RATE BASED | 73% |
| 92 | 2021/LG(MS) | 2021 | FOR REPAIRS AND MAINTANANCE OF CIVIL | DEVELOPMENTS | INAIL DAGLD | 1370 |
| | 202 1/LG(WIS) | 2021 | INFRASTRUCTURE FOR A PERIOD OF 3YEARS | DEVELOP WENTS | | |
| 93 | 17/2020- | 19 March | PROVISION OF SUPPORT SERVICES FOR CHDM | KEEP IT REACTIVE | RATE BASED | 73% |
| 93 | 2021/LG(MS) | 2021 | FOR REPAIRS AND MAINTANANCE OF CIVIL | TRADING & PROJECTS | INAIL DAGLD | 1370 |
| | 202 1/LO(WO) | 2021 | INFRASTRUCTURE FOR A PERIOD OF 3YEARS | TIVADING &TROUEDTO | | |
| 94 | 18/2020- | 30 April | PROVISION OF JETTING MACHINE SUPPORT | RBV TRADING | RATE BASED | 73% |
| 54 | 2021/LG | 2021 | SERVICES FOR A PERIOD OF THREE (3) YEARS | NEV TIVELING | TORTE BAGEB | 7370 |
| | (MS) | 2021 | FOR CHDM | | | |
| 95 | 18/2020- | 30 April | PROVISION OF JETTING MACHINE SUPPORT | EYAMAKHWANE (PTY) LTD | RATE BASED | 73% |
| | 2021/LG | 2021 | SERVICES FOR A PERIOD OF THREE (3) YEARS | | 10112 571325 | 1.670 |
| | (MS) | | FOR CHDM | | | |
| 96 | 18/2020- | 30 April | PROVISION OF JETTING MACHINE SUPPORT | MVEZO PLANT AND CIVILS | RATE BASED | 73% |
| | 2021/LG | 2021 | SERVICES FOR A PERIOD OF THREE (3) YEARS | | | |
| | (MS) | | FOR CHDM | | | |
| 97 | 18/2020- | 30 April | PROVISION OF JETTING MACHINE SUPPORT | AMARHUDULU TRADING | RATE BASED | 73% |
| | 2021/LG | 2021 | SERVICES FOR A PERIOD OF THREE (3) YEARS | CC | | |
| | (MS) | | FOR CHDM | | | |
| 98 | 18/2020- | 30 April | PROVISION OF JETTING MACHINE SUPPORT | RAMATINI SERVICES (PTY) | RATE BASED | 73% |
| | 2021/LG | 2021 | SERVICES FOR A PERIOD OF THREE (3) YEARS | LTD | | |
| | (MS) | | FOR CHDM | | | |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|-----|-----------------------------|-------------------|---|---|--------------|--------|
| 99 | 18/2020- 2021/LG (MS) | 30 April 2021 | PROVISION OF JETTING MACHINE SUPPORT SERVICES FOR A PERIOD OF THREE (3) YEARS FOR CHDM | SILVER SOLUTIONS 2600 CC | RATE BASED | 73% |
| 100 | 18/2020- 2021/LG (MS) | 30 April 2021 | PROVISION OF JETTING MACHINE SUPPORT SERVICES FOR A PERIOD OF THREE (3) YEARS FOR CHDM | NON-SOSO CONSTRUCTION | RATE BASED | 73% |
| 101 | 18/2020- 2021/LG (MS) | 30 April 2021 | PROVISION OF JETTING MACHINE SUPPORT SERVICES FOR A PERIOD OF THREE (3) YEARS FOR CHDM | MASIYABU TRADING JV BUCHULE ENGINEERING | RATE BASED | 73% |
| 102 | 20/2018/YD(TS) | 2019/01/16 | PROVISION OF MANAGED PRINTING SERVICES FOR CHRIS HANI DISTRICT MUICIPALITY FOR A PERIOD OF THREE YEARS | GENBIZ TRADING 1001 (PTY) LTD T/A ALOE OFFICE & BUSINESS EQUIPMENT | RATE BASED | 100% |
| 103 | 22/2019- 2020/LG(MR) | 12 June 2020 | CHRIS HANI DISTRICT MUNICIPALITY IS LOOKING TO APPOINT THREE(3) SERVICE PROVIDERS FOR SUPPORT SERVICES, SUPPLY AND DELIVERY OF LIQUID FLOCCULANTS AND DISINFECTECTANTS, SPECIALISED HANDLING OF EQUIPMENT AND RELATED TRAINING FOR SAFETY AUDITS, OPTIMIZATION AND HAZMAT RESPONSE FOR ALL WATER PLANTS OF CHDM FOR A PERIOD OF THREE (3) YEARS | INDLELA CONSULTANTS (PTY) LTD | RATE BASED | 98% |
| 104 | 22/2019- 2020/LG(MR) | 12 June 2020 | CHRIS HANI DISTRICT MUNICIPALITY IS LOOKING TO APPOINT THREE(3) SERVICE PROVIDERS FOR SUPPORT SERVICES, SUPPLY AND DELIVERY OF LIQUID FLOCCULANTS AND DISINFECTANTS, SPECIALISED HANDLING OF EQUIPMENT AND RELATED TRAINING FOR SAFETY AUDITS, OPTIMIZATION AND HAZMAT RESPONSE FOR ALL WATER PLANTS OF CHDM FOR A PERIOD OF THREE (3) YEARS | METSI WATER SOLUTIONS (PTY) LTD | RATE BASED | 98% |
| 105 | 28/2020- 2021/LG(BN) | 2020/12/18 | MANUFACTURE SUPPLY AND DELIVERY OF PRECAST CONCRETE VIP AND PUOR-FLUSH TOILETS, INCLUDING SITE SUPPORT FOR A PERIOD OF THREE YEARS | IZWELETHU CERMFORCE | RATE BASED | 83% |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|-----|--------------------------|-------------------|---|--|--------------|--|
| 106 | 32/2019- 2020/LG(NB) | 2020/08/24 | PROVISION OF SUPPORT SERVICES FOR CHDM IN THE IMPLEMENTATION OF WATER LOSS MANAGEMENT PROGRAMME FOR A PEIOD OF 3 YEARS | RE-SOLVE CONSULTING (PTY) LTD | 455 616,20 | 0% (Payment still with legal department) |
| 107 | 33/2019- 2020/LG(NB) | 2020/08/24 | SUPPLY, DELIVERY & INSTALLATION OF WATER SERVICES MATERIAL FOR CHMD FOR A PERIOD OF 3 YEARS | DICLA TRAINING AND PROJECTS | RATE BASED | 97% |
| 108 | 33/2019- 2020/LG(NB) | 2020/08/24 | SUPPLY, DELIVERY & INSTALLATION OF WATER SERVICES MATERIAL FOR CHMD FOR A PERIOD OF 3 YEARS | QUMANCO TRADING | RATE BASED | 97% |
| 109 | 34/2020- 2021/YD(LL) | 2021/04/30 | PROVISION OF UNIFIED EMAIL SOLUTION FOR A PERIOD OF THREE (3) YEARS | ICT CHOICE | 3 218 827,35 | 56% |
| 110 | 38/2020- 2021/YD (LL) | 2021/06/29 | SUPPLY DELIVERY INSTALL AND MAINTAIN PUB;IC WI-FI HOTSPOT WITH 100BPS INTERNET SPEED FOR A PERIOD OF THREE (3) years | OVATION CONCEPTS (PTY) LTD | 2 420 932,34 | 83% |
| 111 | 46/2020- 2021/YD (LL) | 2021/05/19 | IMPLEMENTATION AND MAINTANANCE OF MANAGED DISASTER RECOVERY SERVICES AND PROVISIONING OF BUSINESS CONTINUITY FOR CHDM FOR 3 YEARS | ICT CHOICE | 5 146 426,31 | 22,5% |
| 112 | 41/2020- 2021/LG(MR) | 21/10/27 | SUPPLY, DELIVERY OF WATER & WASTEWATER CHEMICALS, CONDUCTING PROCESS AUDITS WATER SAFETY PLANS & WASTEWATER RISK ABATEMENT PLANS FOR ALL WATER TREATMENT PLANTS OF CHDM FOR A PERIOD OF 3 YEARS | INDLELA CONSULTANTS (PTY) LTD | RATE BASED | 56% |
| 113 | 8/3/9- 2021/22 | 2021/10/27 | PROVISION OF MANAGED INTERNET SERVICES FOR CHRIS HANI DISTRICT MUNICIPALITY FOR A PERIOD OF 3 YEARS | BUSINESS CONNEXION (PTY) LTD | 857 836,25 | 21,5% |
| 114 | 8/3/21- 2021/22 | 2021/11/08 | APPOINTMENT OF THE PANEL OF INFORMATION TECHNOLOGY (IT) SERVICE PROVIDERS FOR THE PROVISIONING OF INFORMATION AND TECHNOLOGY SERVICES, SOFTWARE, HARDWARE I&T SECURITY, I&T ELECTRONICS AND I&T PROFESSIONAL SERVICES FOR A PERIOD OF THREE (3) YEARS | ABANGULA TRADING ENTERPRISE (PTY) LTD | RATE BASED | 53% |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|-----|--------------------|-------------------|--|---|--------------|--------|
| 115 | 2021/22 | 2021/11/08 | APPOINTMENT OF THE PANEL OF INFORMATION TECHNOLOGY (IT) SERVICE PROVIDERS FOR THE PROVISIONING OF INFORMATION AND TECHNOLOGY SERVICES, SOFTWARE, HARDWARE I&T SECURITY, I&T ELECTRONICS AND I&T PROFESSIONAL SERVICES FOR APERIOD OF (3) YEARS | KERNEL CONNECTIONS (PTY) LTD | RATE BASED | 53% |
| 116 | 8/3/21- 2021/22 | 2021/11/08 | APPOINTMENT OF THE PANEL OF INFORMATION TECHNOLOGY (IT) SERVICE PROVIDERS FOR THE PROVISIONING OF INFORMATION AND TECHNOLOGY SERVICES, SOFTWARE, HARDWARE I&T SECURITY, I&T ELECTRONICS AND I&T PROFESSIONAL SERVICES FOR APERIOD OF (3) YEARS | MJOJI TECHNOLOGIES cc | RATE BASED | 53% |
| 117 | 8/3/21- 2021/22 | 2021/11/08 | APPOINTMENT OF THE PANEL OF INFORMATION TECHNOLOGY (IT) SERVICE PROVIDERS FOR THE PROVISIONING OF INFORMATION AND TECHNOLOGY SERVICES, SOFTWARE, HARDWARE I&T SECURITY, I&T ELECTRONICS AND I&T PROFESSIONAL SERVICES FOR APERIOD OF (3) YEARS | QUALITATIVE INNOVATIVE SOLUTIONS (PTY) LTD | RATE BASED | 53% |
| 118 | 8/3/21- 2021/22 | 2021/11/08 | APPOINTMENT OF THE PANEL OF INFORMATION TECHNOLOGY (IT) SERVICE PROVIDERS FOR THE PROVISIONING OF INFORMATION AND TECHNOLOGY SERVICES, SOFTWARE, HARDWARE I&T SECURITY, I&T ELECTRONICS AND I&T PROFESSIONAL SERVICES FOR APERIOD OF (3) YEARS | RESILLIENT SERVES AND NETWORKS cc | RATE BASED | 53% |
| 119 | 8/3/21- 2021/22 | 2021/11/08 | APPOINTMENT OF THE PANEL OF INFORMATION TECHNOLOGY (IT) SERVICE PROVIDERS FOR THE PROVISIONING OF INFORMATION AND TECHNOLOGY SERVICES, SOFTWARE, HARDWARE I&T SECURITY, I&T ELECTRONICS AND I&T PROFESSIONAL SERVICES FOR APERIOD OF (3) YEARS | UBUNYE CONSULTATNTS (PTY) LTD | RATE BASED | 53% |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|-----|--------------------|-------------------|--|---|--------------|--------|
| 120 | 8/3/22- 2021/22 | 2021/11/23 | PROVISION OF RELIEF ITEMS DURING DISASTER FOR A PERIOD OF THREE (3) YEARS | QUMANCO TRADING | RATE BASED | 54% |
| 121 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | KEEP IT REACTIVE AND PROJECTS (PTY) LTD | RATE BASED | 56% |
| 122 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | RBV TRADING | RATE BASED | 56% |
| 123 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | LIBOGILE ENGINEERING SERVICES cc | RATE BASED | 56% |
| 124 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | LUGEBU HOLDINGS (PTY) LTD | RATE BASED | 56% |
| 125 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | MAXHOBA CONSTRUCTION cc | RATE BASED | 56% |
| 126 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | MAKHWENTE TRADING cc | RATE BASED | 56% |
| 127 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | MTYUDA INVESTMENT TRADING cc | RATE BASED | 56% |
| 128 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | ZAMACETHE (PTY) LTD | RATE BASED | 56% |
| 129 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | MEN D PLUMBING SERVICES AND GENERAL TRADING | RATE BASED | 56% |
| 130 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | MACANGO TRADING (PTY) LTD | RATE BASED | 56% |
| 131 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | ISICEBI TRADING 1077 cc | RATE BASED | 56% |
| 132 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | LIMICULTURE RURAL EMPOWERMENT (PTY) LTD | RATE BASED | 56% |
| 133 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | IMVUSA TRADING 491 cc | RATE BASED | 56% |
| 134 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | TULIYEMA GROUP TRADING (PTY) LTD | RATE BASED | 56% |
| 135 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | HASILLE INVESTMENT cc | RATE BASED | 56% |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|-----|--------------------|-------------------|--|---|--------------|--------|
| 136 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | LINOMSO CONSTRUCTION AND CIVIL WORK (PTY) LTD | RATE BASED | 56% |
| 137 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Ubunye consultants (PTY) LTD | RATE BASED | 56% |
| 138 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Zamacethe (PTY) LTD | RATE BASED | 56% |
| 139 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Yothalowa (PTY) LTD | RATE BASED | 56% |
| 140 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Zamaqwathi trading (PTY) LTD | RATE BASED | 56% |
| 141 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Robert silumko holdings (PTY) LTD | RATE BASED | 56% |
| 142 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Maka group (PTY) LTD | RATE BASED | 56% |
| 143 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Mila farming (PTY) LTD | RATE BASED | 56% |
| 144 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Bosele engineering (PTY) LTD | RATE BASED | 56% |
| 145 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Tough guy trading (PTY) LTD | RATE BASED | 56% |
| 146 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Nomahlubi Dyantyi business consultants cc | RATE BASED | 56% |
| 147 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Lakhiwe general trading (PTY) LTD | RATE BASED | 56% |
| 148 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Lennocent (PTY) LTD | RATE BASED | 56% |
| 149 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Coronado trading 70 (PTY) LTD | RATE BASED | 56% |
| 150 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Mila's investment (PTY) LTD | RATE BASED | 56% |
| 151 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Calvin and Major trading services | RATE BASED | 56% |
| 152 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | DPKL trading enterprise cc | RATE BASED | 56% |

| No | Contract | Appointm | Description | Contractor | Project Cost | Status |
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| 450 | Number | ent date | OUBLA CANUTATION EDECTION OF ME | | DATE BAGES | 500/ |
| 153 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Onalisiwe Aviwe solutions | RATE BASED | 56% |
| 454 | 2021/22 | 0004/40/07 | STRUCTURES BY SMMEs FOR 3 YEARS | | DATE DAGED | 500/ |
| 154 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Icwili Projects (PTY) LTD | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | | | |
| 155 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Aqamile solutions (PTY) LTD | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | | | |
| 156 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Ake projects (PTY) LTD | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | | | |
| 157 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | N Buqindlela trading (PTY) | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | LTD | | |
| 158 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Invest africa group cc | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | | | |
| 159 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Tyalimpi general | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | maintenance services (PTY) | | |
| | | | | LTD | | |
| 160 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Oguyonke catering and | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | construction cc | | |
| 161 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Likholomzi construction | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | services (PTY) LTD | | |
| 162 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Delady enterprise (PTY) LTD | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | | | |
| 163 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Sasi projects (PTY) LTD | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | | | |
| 164 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Nyivanas trading cc | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | ' | | |
| 165 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Indilisa holdings (PTY) LTD | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | | | |
| 166 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Iyanla holdings (PTY) LTD | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | | | |
| 167 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Yolitae enterprise (PTY) LTD | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | | | |
| 168 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Bontinite (PTY) LTD | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | (| | |
| 169 | 8/3/15- | 2021/10/27 | CHDM SANITATION ERECTION OF VIP | Cenga tunzi trading (PTY) | RATE BASED | 56% |
| | 2021/22 | | STRUCTURES BY SMMEs FOR 3 YEARS | LTD | | |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|-----|----------------------|-------------------|--|--|--------------|--------|
| 170 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Men go civils (PTY) LTD | RATE BASED | 56% |
| 171 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | 8282 Projects and plant hire (PTY) LTD | RATE BASED | 56% |
| 172 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Vuyonke | RATE BASED | 56% |
| 173 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Jangoware (PTY) LTD | RATE BASED | 56% |
| 174 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | V.M.M.V projects and trading (PTY) LTD | RATE BASED | 56% |
| 175 | 8/3/15- 2021/22 | 2021/10/27 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Triple A developers (PTY) LTD | RATE BASED | 56% |
| 176 | 8/3/15- 2021/23 | 2021/10/28 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Nkunzi A civils (PTY) LTD | RATE BASED | 56% |
| 177 | 8/3/15- 2021/23 | 2021/10/28 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Nikho groups (PTY) LTD | RATE BASED | 56% |
| 178 | 8/3/15- 2021/23 | 2021/10/28 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | NMN General dealers (PTY) LTD | RATE BASED | 56% |
| 179 | 8/3/15- 2021/23 | 2021/10/28 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Aluogy business enterprise (Pty) LTD | RATE BASED | 56% |
| 180 | 8/3/15- 2021/24 | 2021/10/29 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Terro msuthu civils (PTY) LTD | RATE BASED | 56% |
| 181 | 8/3/15- 2021/24 | 2021/10/29 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Silaka projects | RATE BASED | 56% |
| 182 | 8/3/15- 2021/24 | 2021/10/29 | CHDM SANITATION ERECTION OF VIP STRUCTURES BY SMMEs FOR 3 YEARS | Civ con projects | RATE BASED | 56% |
| 183 | 8/3/30- 2021/2022 | 2022/03/30 | PANEL OF (15) SUITABLE QUALIFIED SERVICE PROVIDERS FOR PROVISION OF SOCIAL FACILITATION SERVICES: INSTITUTIONAL AND SOCIAL DEVELOPMENT (ISD) FOR CHRIS HANI DISTRICT MUNICIPALITY FOR APERIOD OF THREE YEARS | TERRO MSUTU & ASSOCIATES | RATE BASED | 42% |
| 184 | 8/3/30- 2021/2022 | 2022/03/30 | PANEL OF (15) SUITABLE QUALIFIED SERVICE PROVIDERS FOR PROVISION OF SOCIAL FACILITATION SERVICES: INSTITUTIONAL AND SOCIAL DEVELOPMENT (ISD) FOR CHRIS HANI | EZABANTU NGABANTU | RATE BASED | 42% |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|-----|----------------------|-------------------|--|---|--------------|--------|
| | | | DISTRICT MUNICIPALITY FOR APERIOD OF THREE YEARS | | | |
| 185 | 8/3/30- 2021/2022 | 2022/03/30 | PANEL OF (15) SUITABLE QUALIFIED SERVICE PROVIDERS FOR PROVISION OF SOCIAL FACILITATION SERVICES: INSTITUTIONAL AND SOCIAL DEVELOPMENT (ISD) FOR CHRIS HANI DISTRICT MUNICIPALITY FOR APERIOD OF THREE YEARS | IMVUSA TRADING 108 cc | RATE BASED | 42% |
| 186 | 8/3/30- 2021/2022 | 2022/03/30 | PANEL OF (15) SUITABLE QUALIFIED SERVICE PROVIDERS FOR PROVISION OF SOCIAL FACILITATION SERVICES: INSTITUTIONAL AND SOCIAL DEVELOPMENT (ISD) FOR CHRIS HANI DISTRICT MUNICIPALITY FOR APERIOD OF THREE YEARS | UYACANYA INVESTMENT HOLDING | RATE BASED | 42% |
| 187 | 8/3/30- 2021/2022 | 2022/03/30 | PANEL OF (15) SUITABLE QUALIFIED SERVICE PROVIDERS FOR PROVISION OF SOCIAL FACILITATION SERVICES: INSTITUTIONAL AND SOCIAL DEVELOPMENT (ISD) FOR CHRIS HANI DISTRICT MUNICIPALITY FOR APERIOD OF THREE YEARS | UHLAZA ENVIRONMENTAL EDUCATION (PTY) LTD | RATE BASED | 42% |
| 188 | 8/3/30- 2021/2022 | 2022/03/30 | PANEL OF (15) SUITABLE QUALIFIED SERVICE PROVIDERS FOR PROVISION OF SOCIAL FACILITATION SERVICES: INSTITUTIONAL AND SOCIAL DEVELOPMENT (ISD) FOR CHRIS HANI DISTRICT MUNICIPALITY FOR APERIOD OF THREE YEARS | Ages Omega (PTY) LTD | RATE BASED | 42% |
| 189 | 8/3/30- 2021/2022 | 2022/03/30 | PANEL OF (15) SUITABLE QUALIFIED SERVICE PROVIDERS FOR PROVISION OF SOCIAL FACILITATION SERVICES: INSTITUTIONAL AND SOCIAL DEVELOPMENT (ISD) FOR CHRIS HANI DISTRICT MUNICIPALITY FOR APERIOD OF THREE YEARS | Mbumba Project Managers | RATE BASED | 42% |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|-----|----------------------|-------------------|--|--|--------------|--------|
| 190 | 8/3/30- 2021/2022 | 2022/03/30 | PANEL OF (15) SUITABLE QUALIFIED SERVICE PROVIDERS FOR PROVISION OF SOCIAL FACILITATION SERVICES: INSTITUTIONAL AND SOCIAL DEVELOPMENT (ISD) FOR CHRIS HANI DISTRICT MUNICIPALITY FOR APERIOD OF THREE YEARS | Khanyanjalo Community projects | RATE BASED | 42% |
| 191 | 8/3/30- 2021/2022 | 2022/03/30 | PANEL OF (15) SUITABLE QUALIFIED SERVICE PROVIDERS FOR PROVISION OF SOCIAL FACILITATION SERVICES: INSTITUTIONAL AND SOCIAL DEVELOPMENT (ISD) FOR CHRIS HANI DISTRICT MUNICIPALITY FOR APERIOD OF THREE YEARS | Aya Environmental Consulting (PTY) LTD | RATE BASED | 42% |
| 192 | 8/3/30- 2021/2022 | 2022/03/30 | PANEL OF (15) SUITABLE QUALIFIED SERVICE PROVIDERS FOR PROVISION OF SOCIAL FACILITATION SERVICES: INSTITUTIONAL AND SOCIAL DEVELOPMENT (ISD) FOR CHRIS HANI DISTRICT MUNICIPALITY FOR APERIOD OF THREE YEARS | The success story properties & flooring | RATE BASED | 42% |
| 193 | 8/3/30- 2021/2022 | 2022/03/30 | PANEL OF (15) SUITABLE QUALIFIED SERVICE PROVIDERS FOR PROVISION OF SOCIAL FACILITATION SERVICES: INSTITUTIONAL AND SOCIAL DEVELOPMENT (ISD) FOR CHRIS HANI DISTRICT MUNICIPALITY FOR APERIOD OF THREE YEARS | Classy Trade and Invest 1094 | RATE BASED | 42% |
| 194 | 8/3/30- 2021/2022 | 2022/03/30 | PANEL OF (15) SUITABLE QUALIFIED SERVICE PROVIDERS FOR PROVISION OF SOCIAL FACILITATION SERVICES: INSTITUTIONAL AND SOCIAL DEVELOPMENT (ISD) FOR CHRIS HANI DISTRICT MUNICIPALITY FOR APERIOD OF THREE YEARS | Ben Mazwi Trading Enterprise cc & Unako Business Solution (PTY) LTD | RATE BASED | 42% |
| 195 | 8/3/30- 2021/2022 | 2022/03/30 | PANEL OF (15) SUITABLE QUALIFIED SERVICE PROVIDERS FOR PROVISION OF SOCIAL FACILITATION SERVICES: INSTITUTIONAL AND SOCIAL DEVELOPMENT (ISD) FOR CHRIS HANI DISTRICT MUNICIPALITY FOR APERIOD OF THREE YEARS | Qprojec cc | RATE BASED | 42% |

| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|-----|----------------------|-------------------|---|--|---------------|--------|
| 196 | RT3-2022 | 2022/06/20 | TRANSVERSAL CONTRACT FOR THE SUPPLY, DELIVERY, INSTALLATION, COMMISSIONING AND MAINTANANCE OF OFFICE AUTOMATION SOLUTIONS TO THE CHRIS HANI DISTRICT MUNICIPALITY FROM 1/07/2022-30/06/2025 | KONICA MINOLTA SA ADO BIDVEST OFFICE (PTY) LTD | 5 020 497,72 | 27,4% |
| 197 | 8/3/31- 2021/2022 | 2022/06/29 | PROVISION OF SUPPORT SERVICES FOR THE CHRIS HANI DISTRICT MUNICIPALITY IN THE COMPILATION OF ANNUAL FINANCIAL STATEMENT AND AUDITING PROCESS FOR THE PERIOD OF THREE (3) YEARS | BONAKUDE CONSULTING (PTY) LTD | 1 483 845,00 | 52,8% |
| 198 | 8/3/24- 2021/22 | 2022/10/11 | APPOINTMENT OF SERVICE PROVIDER TO DESIGN, DEVELOP, SUPPLY, IMPLEMENT AND SUPPORT INTERGRATED CLOUD ELECTRONIC DOCUMENT, RECORDS, CONTENT MANAGEMENTSYSTEM FOR A PERIOD OF THREE (3) YEARS | KHANYA AFRICA NETWORKS | 13 227 104,50 | 46% |
| 199 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | CLARK LAING INC | RATE BASED | 19% |
| 200 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | PHILLIP AND MABONA ATTORNEYS JV BEN- MAZWI INC.ATTORNEYS t/a PMA JV BMI | RATE BASED | 19% |
| 201 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | Mc WILLIAMS AND ELLIOT INCORPORATED | RATE BASED | 19% |
| 202 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | JAVA MAMA ATTORNEYS | RATE BASED | 19% |
| 203 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS | N Z MTSHABE INC | RATE BASED | 19% |

| No | Contract | Appointm | Description | Contractor | Project Cost | Status |
|-----|-------------------|------------|--|--------------------------------------|--------------|--------|
| | Number | ent date | ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | | | |
| 204 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | JOLWANA MGIDLANA INC | RATE BASED | 19% |
| 205 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | BOOI AND SONS ATTORNEYS INC | RATE BASED | 19% |
| 206 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | PX LIMBA ATTORNEYS INC | RATE BASED | 19% |
| 207 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | MATIWANE ZUKISANI ATTORNEYS | RATE BASED | 19% |
| 208 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | S. MODI ATTORNEYS | RATE BASED | 19% |
| 209 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | WESLEY PRITORIUS AND ASSOCIATES INC | RATE BASED | 19% |
| 210 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | MALEBYE MOTOUNG MTHEMBU | RATE BASED | 19% |
| 211 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | MJENXANE AND VENFOLO ATTORNEYS JV | RATE BASED | 19% |
| 212 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS | GM ATTORNEYS AND CONVEYENCERS | RATE BASED | 19% |

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| No | Contract Number | Appointm ent date | Description | Contractor | Project Cost | Status |
|-----|----------------------|-------------------|--|----------------------------------|--------------|--------|
| | | | ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | | | |
| 213 | 8/3/1- 2022/23 | 2022/11/14 | CHDM PANEL FOR THE PROVISION OF LEGAL SERVICES FOR A PERIOD OF THREE (3) YEARS ON AN AS AND WHEN REQUIRED AND ON ROTATIONAL BASIS: | MESSRS MSITSHANE AND ASSOCIATES | RATE BASED | 19% |
| 214 | 8/3/9- 2022/2023 | 2023/03/20 | PROVISION OF BANKING SERVICES TENDER FOR CHRIS HANI DISTRICT MUNICIPALITY FOR A PERIOD OF THREE (3) YEARS | FIRSTRAND BANK LIMITED | 2 652 442,92 | 0% |
| 215 | 8/3/11- 2022/2023 | 2023/03/20 | REFURBSHMENT OF THE TREE NUSERY GRENHOUSE FOR CHRIS HANI DISTRICT MUNICIPALITY | NMN GENERAL DELEARS (PTY) LTD | 435 222,40 | 71% |
| 216 | 8/3/14- 2022/2023 | 2023/06/26 | PROVISION OF TRAVEL AGENCY SERVICES IN RESPECT OF AIR TRAVEL, CAR HIRE AND ACCOMODATION FOR A PERIOD OF 3 (THREE) YEARS. | WILLARDS TRAVEL SERVICE | RATE BASED | 0% |
| 217 | 8/3/14- 2022/2023 | 2023/06/26 | PROVISION OF TRAVEL AGENCY SERVICES IN RESPECT OF AIR TRAVEL, CAR HIRE AND ACCOMODATION FOR A PERIOD OF 3 (THREE) YEARS. | HARVEY WORLD TRAVEL | RATE BASED | 0% |