



**CHRIS HANI**  
**DISTRICT MUNICIPALITY**  
SUSTAINING GROWTH  
THROUGH OUR PEOPLE

# **ANNUAL PERFORMANCE AGREEMENT**

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**Prepared for and entered into by:**

**Mr. G Mashiyi**  
**the Municipal Manager of the**  
**CHRIS HANI DISTRICT MUNICIPALITY**  
**("The Municipal Manager")**

**and**

**Ms Yoliswa Sinyanya**  
**the Director at the**  
**CHRIS HANI DISTRICT MUNICIPALITY**  
**("The Director")**

**For the financial year: 2020-2021**  
**Commencement Period: 1 July 2020- 30 June 2021**

## **PROLOGUE**

- 1.1. The Municipality has, in terms of Section 57(1)(a) of the Local Government: Municipal Systems Act, No. 32 of 2000 ("the Systems Act") entered into a contract of employment with the Director for a period of 5 years, commencing on 01 Feb 2017
- 1.2. Section 57(1) (b) of the Systems Act, read with the contract of employment concluded between the Parties, require the Parties to conclude an annual performance agreement.
- 1.3. The Parties wish to ensure that they are clear about the goals to be achieved, and secure the commitment of the Director to a set of outcomes that shall secure local government policy goals.
- 1.4. The Parties wish to ensure that there is compliance with Sections 57(4A), (4B) and (5) of the Systems Act.

## **1. INTERPRETATION**

- 1.5. In this Agreement the following words shall have the meaning ascribed thereto:
  - 1.5.1. "This Agreement" – means the performance agreement between the Municipality and the Director and the annexures thereto.
  - 1.5.2. "The Executive Authority" – means the Council of the Municipality constituted in terms of Section 55 of the Local Government: Municipal Structures Act as represented by its chairperson, the Executive Mayor.
  - 1.5.3. "the Executive Mayor" – means the Executive Mayor who is the representative of the Council of the Chris Hani District Municipality and the executive leader of the Chris Hani District Municipality in terms of Section 32, 54 and 56 of the Local Government: Municipal Structures Act, 117 of 1998
  - 1.5.4. "The Director" – means the Director Health and Community Services who is directly accountable to the Municipal Manager in terms of Section 56(a) of the Systems Act.
  - 1.5.5. "the Municipal Manager" – means the Municipal Manager appointed in terms of Section 82 of the Local Government: Municipal Structures Act, No. 117 of 1998

1.5.6. "The Municipality" – means the CHRIS HANI DISTRICT MUNICIPALITY.

1.5.7. "The Parties" – means the Municipal Manager and the Director.

## **2. PURPOSE OF THIS AGREEMENT**

2.1. The Parties agree that the purposes of this Agreement are to:

2.1.1. comply with the provisions of Section 57(1)(b), (4A), (4B) and (5) of the Systems Act as well as the contract of employment entered into between the Parties;

2.1.2. specify objectives and targets established for the Director and to communicate to the Director the Municipality's expectations of the Director's performance and accountability;

2.1.3. specify accountabilities as set out in Annexure A;

2.1.4. monitor and measure performance against targeted outputs and outcomes;

2.1.5. use Annexures A, B and C, as a basis for assessing whether the Director has met the performance expectations applicable to her job;

2.1.6. appropriately reward the Director in accordance with the Municipality's performance management policy in the event of outstanding performance;

2.1.7. establish a transparent and accountable working relationship; and

2.1.8. Give effect to the Municipality's commitment to a performance-orientated relationship with its Director in attaining equitable and improved service delivery.

## **3. COMMENCEMENT AND DURATION**

3.1. Notwithstanding the date of signature this Agreement shall commence on the 1 July 2020 and shall remain in force until a new performance agreement including a Performance Plan and Personal Development Plan is concluded between the Parties as contemplated in Clause 3.2 The performance agreement shall be entered into for each financial year of the municipality ;

3.2. The Parties shall review the provisions of this Agreement during June each year and shall conclude a new performance agreement including a Performance Plan and Personal Development Plan that replaces this Agreement at least once a year within one month after commencement of the new financial year (by not later than the 31<sup>st</sup> of July each year).

3.3. The payment of the performance bonus is determined in accordance with the regulation 32 states that a performance bonus shall be paid based on the affordability to the Director and after

- The annual report for the financial year under review has been tabled and adopted by council;
- An evaluation of performance in accordance with the provision of regulation 23 and
- Approval of such evaluation by the municipal council as a reward for outstanding performance.

3.4. If at any time during the validity of this Agreement the work environment alters (whether as a result of government or council decisions or otherwise) to the extent that the contents of this Agreement are no longer appropriate, the contents shall must by mutual agreement between the parties immediately be revised.

3.5. This Agreement shall terminate on the termination of the Director's contract of employment for any reason.

#### **4. PERFORMANCE OBJECTIVES**

4.1. The Performance Plan in **Annexure A** sets out:

4.1.1. the performance objectives and targets which must be met by the Director; and

4.1.2. The timeframes within which those performance objectives and targets must be met.

4.1.3. The Core Management Competencies (**Annexure B** - definition) reflected herein set out those management skills regarded as critical to the position held by the Director.

- 4.2. The Personal Development Plan in **Annexure C** sets out the Director's personal developmental requirements in line with the objectives and targets of the Municipality.
- 4.3. The performance objectives and targets reflected in **Annexure A** are set by the Municipality in consultation with the Director and based on the Integrated Development Plan, Service Delivery and Budget Implementation Plan the Budget of the Municipality, and include key objectives, key performance areas, target dates and weightings.
- 4.4. The key objectives describe the main tasks that need to be done. The key performance indicators provide the details of the evidence that must be provided to show that a key objective has been achieved. The target dates describe the time frame in which the work must be achieved. The weightings show the relative importance of the key objectives to each other.
- 4.5. The Director's performance shall, in addition, be measured in terms of contributions to the development objectives and strategies set out in the Municipality's Integrated Development Plan.

## **5. PERFORMANCE MANAGEMENT SYSTEM**

- 5.1. The Director agrees to participate in the performance management system that the Municipality adopts.
- 5.2. The Director accepts that the purpose of the performance management system shall be to provide a comprehensive system with specific performance standards to assist the municipal management and municipal staff to perform to the standards required.
- 5.3. The Council and/or Municipal Manager shall consult the Director about the specific performance standards that shall be included in the performance management system as applicable to the Director.
- 5.4. The Director undertakes to actively focus towards the promotion and implementation of his/her Key Performance Areas as set out in **Annexure A** including special projects relevant to the Director's responsibilities within the local government framework.

## 6. PERFORMANCE ASSESSMENT

6.1. The performance of the Director shall be assessed against the outputs and outcomes achieved in terms of his/her Key Performance Areas (KPA) as fully described in **Annexure A** and his/her Core Management Competencies (CMCs) determined at the commencement of this Agreement with a weighting of 80:20 allocated to the KPAs and CMCs respectively. Therefore the KPAs that refer to the main tasks of the Director account for 80% of his/her assessment while the CMCs make up the other 20% of the Director's assessment score.

6.2. The weightings agreed to in respect of the Director's KPAs attached as **Annexure A** are set out in the table below:

KEY PERFORMANCE AREA	DESCRIPTION	WEIGHT
KPA 1	Municipal Transformation and Organisational Development	5%
KPA 2	Basic Service Delivery and Infrastructure Development	70%
KPA 3	Local Economic Development	5%
KPA 4	Financial Management and Viability	5%
KPA 5	Good Governance and Public Participation	15%
<b>TOTAL</b>		<b>100%</b>

6.3. The weightings agreed to in respect of the CMCs considered most critical for the Director's position and further defined in Annexure B are set out in the table below:

#### LEADING COMPETENCIES

NO	COMPETENCY AREA	DEFINITION	ACHIEVEMENT LEVEL	WEIGHT
1	Strategic Leadership and Management	Provide and direct a vision for the institution, and inspire and deploy others to deliver on the strategic institutional mandate	Advanced	5%
2	People Management	Effectively manage, inspire and encourage people, respect diversity, optimise talent and build and nurture relationships in order to achieve institutional objectives	Advanced	10%
3	Programme and Project Management	Able to understand program and project management methodology; plan, manage, monitor and evaluate specific activities in order to deliver on set objectives	Advanced	10%
4	Financial Management	Able to compile, plan and manage budgets, control cash flow, institute financial risk management and administer procurement processes in accordance with recognised financial practices. Further to ensure that all financial transactions are managed in an ethical manner	Advanced	5%
5	Change Leadership	Able to direct and initiate institutional transformation on all levels in order to successfully drive and implement new initiatives and deliver professional and quality services to the community	Advanced	5%
6	Governance Leadership	Able to promote, direct and apply professionalism in managing risk and compliance requirements and apply a thorough understanding of governance practices and obligations. Further, able to direct the conceptualisation of relevant policies and enhance cooperative governance relationships	Advanced	5%

#### CORE COMPETENCIES

NO	COMPETENCY AREA	DEFINITION	ACHIEVEMENT LEVEL	WEIGHT
1	Morale Competence	Able to identify moral triggers, apply reasoning that promotes honesty and integrity and consistently display behaviour that reflects moral competence	Advanced	5%
2	Planning and Organising	Able to plan, prioritise and organise information and resources effectively to ensure the quality of service delivery and build efficient contingency plans to manage risk	Advanced	15%
3	Analysis and Innovation	Able to critically analyse information, challenges and trends to establish and implement fact-based solutions that are innovative to improve institutional processes in order to achieve key strategic objectives	Advanced	5%
4	Knowledge and Information Management	Able to promote the generation and sharing of knowledge and information through various processes and media, in order to enhance the collective knowledge base of local government	Advanced	5%
5	Communication	Able to share information, knowledge and ideas in a clear, focused and concise manner appropriate for the audience in order to effectively convey, persuade and influence stakeholders to achieve the desired outcome	Advanced	15%
6	Results and Quality Focus	Able to maintain high quality standards, focus on achieving results and objectives while consistently striving to exceed expectations and encourage others to meet quality standards. Further, to actively monitor and measure results and quality against identified objectives	Advanced	15%

<b>TOTALS</b>	<b>100%</b>
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6.4. The assessment of the performance of the Director shall be based on the following rating scales for KPAs and CMCs:

RATING SCALES		
LEVEL	TERMONOLOGY	DESCRIPTION
5	Outstanding Performance	Performance far exceeds the standard expected of an employee at this level. The appraisal indicates that the employee has achieved above fully effective results against all performance criteria and indicators as specified in the Performance Agreement and Performance Plan and maintained this in all areas of responsibility throughout the year.
4	Performance Significantly Above Expectations	Performance is significantly higher than the standard expected in the job. The appraisal indicates that the employee has achieved above fully effective results against more than half of the performance criteria and indicators and fully achieved all others throughout the year
3	Fully Effective	Performance fully meets the standards expected in all areas of the job. The appraisal indicates that the employee has fully achieved effective results against all significant performance criteria and indicators as specified in the Performance Agreement and Performance Plan
2	Performance Not Fully Effective	Performance is below the standard required for the job in key areas. Performance meets some of the standards expected for the job. The review/assessment indicates that the employee has achieved below fully effective results against more than half of the key performance criteria and indicators as specified in the Performance Agreement and Performance Plan.
1	Unacceptable Performance	Performance does not meet the standard expected for the job. The review/assessment indicates that the employee has achieved below fully effective results against almost all of the performance criteria and indicators as specified in the Performance Agreement and Performance Plan. The employee has failed to demonstrate the commitment or ability to bring performance up to the level expected in the job despite management efforts to encourage improvement.

6.5. To determine which rating on the five-point rating scale did the Director achieve for each KPA, the following criteria should be used:

Description	Definition
Duration of task	Was the target achieved within the projected timeframe
Level of complexity	Did the task require problem solving; reconciling different perceptions and the use of innovative alternatives?
Cost	Was the target delivered within budget? Was there saving or was there over expenditure?
Constraints	Did the envisaged constraints materialise? If so, were steps taken to manage/reduce the effects of the constraint? If not, was it beneficial to the completion of the target? Were there any innovative/pro-active steps taken to manage the constraint

## **7. PANEL AND SCHEDULE FOR ASSESSMENTS**

7.1. An assessment panel consisting of the following persons shall be established when assessing the annual performance of the Director:

7.1.1. The Municipal Manager

7.1.2. Chairperson of the Performance Audit Committee or Audit committee in the absence of a performance committee

7.1.3. Member of the Mayoral Committee

7.1.4. Municipal Manager from another Municipality

7.2. The manager responsible for human resources of the Municipality must provide a secretarial services to the evaluation panels refer to in 7.1

7.3. In addition, a pre-assessment shall be done by:

7.3.1. The Municipal Manager

7.3.2. The Director (own assessment)

7.4. The performance of the Director shall be assessed in relation to his/her achievement of:

7.4.1. The targets indicated for each KPA in Annexure A;

7.4.2. The CCRs as defined in clause 6.3 of this agreement on a date to be determined for each of the following quarterly periods:

<b>Quarter</b>	<b>Months</b>	<b>Review Date</b>
1	July – September	October
2	October – December	January
3	January – March	April
4	April – June	July

7.5. Assessments in the first and third quarter may be verbal if the Director's performance is satisfactory

7.6. The Municipality shall keep a record of the mid-year and annual assessment meetings.

## **8. EVALUATING PERFORMANCE AND THE MANAGEMENT OF EVALUATION OUTCOMES**

- 8.1. The Director shall submit quarterly performance reports and a comprehensive annual performance report with the self-assessment to the Municipal Manager before the performance assessment meeting.
- 8.2. The Municipal Manager shall give performance feedback to the Director after each quarterly and the annual assessment meetings.
- 8.3. The Director shall be subjected to the performance evaluation panel at the end of the financial year for assessing the performance during the year
- 8.4. The evaluation report of the Director's performance shall form the basis for rewarding outstanding performance or correcting unacceptable performance.
- 8.5. The results of the annual assessment and the scoring report of the Director for the purposes of bonus allocation, if applicable, shall be submitted to the council for approval.
- 8.6. Personal growth and development needs identified during any performance assessment discussion, must be documented in the Director s Personal Development Plan as well as the action steps and set time frames agreed to.
- 8.7. Despite the establishment of agreed intervals for assessment, the Municipal Manager may, in addition, review the Director's performance at any stage while his/her contract of employment remains in force.
- 8.8. Parties may agree to review and make reasonable changes to the provisions of **Annexure "A"** from time to time for operational reasons. The Director shall be fully consulted before any such change is made.
- 8.9. The provisions of **Annexure "A"** may be amended by the council when the Municipality's performance management system is adopted, implemented and/or amended as the case may be subject to clause 5.3.
- 8.10. A performance bonus ranging from 5% to 14% of the all-inclusive remuneration package may be paid to an employee in recognition of outstanding performance. In

determining the performance bonus the relevant percentage is based on the overall rating, calculated by using the applicable assessment-rating calculator; provided that:

8.10.1. a score of 130% to 149% is awarded a performance bonus ranging from 5% to 9%; and

8.10.2. A score of 150% and above is awarded a performance bonus ranging from 10% to 14%.

## **9. OBLIGATIONS OF THE MUNICIPALITY**

9.1. The Municipality shall create an enabling environment to facilitate effective performance by the Director.

9.2. The Director shall be provided with access to skills development and capacity building opportunities.

9.3. The Municipality shall work collaboratively with the Director to solve problems and generate solutions to common problems that may impact on the performance of the Director.

9.4. The Municipality shall make available to the Director such resources including employees as the Director may reasonably require from time to time to assist him/her to meet the performance objectives and targets established in terms of this Agreement; provided that it shall at all times remain the responsibility of the Director to ensure that he/she complies with those performance obligations and targets.

9.5. The Director shall be delegated such powers by the Municipality as may in the discretion of the Municipality be reasonably required from time to time to enable him/her to meet the performance objectives and targets established in terms of this Agreement.

## **10. CONSULTATION**

10.1. The Municipal Manager agrees to consult the Director within a reasonable time where the exercising of the Municipal Manager powers shall:

10.1.1. have a direct effect on the performance of any of the Director's functions;

10.1.2. commit the Director to implement or to give effect to a decision made by the Executive mayor and/or Municipal Manager;

10.1.3. have a substantial financial effect on the Municipality.

10.2. The Municipal Manager agrees to inform the Director of the outcome of any decisions taken pursuant to the exercise of powers contemplated in 10.1 as soon as is practicable, to enable the Director to take any necessary action without delay.

## **11. CONSEQUENCES OF POOR OR UNACCEPTABLE PERFORMANCE**

11.1. Where the Municipal Manager is, at any time during the Director's employment, not satisfied with the Director's performance with respect to any matter dealt with in this Agreement, the Municipal Manager shall give notice to the Director to attend a meeting with the Municipal Manager

11.2. The Director shall have the opportunity at the meeting to satisfy the Municipal Manager of the measures being taken to ensure that the Director's performance becomes satisfactory in accordance with a documented programme, including any dates, for implementing these measures

11.3. The Municipality shall provide systematic remedial or developmental support to assist the Director to improve his/her performance.

11.4. If, after appropriate performance counselling and having provided the necessary guidance and/or support as well as reasonable time for improvement in performance, the Municipal Manager holds the view that the performance of the Director is not satisfactory, the Municipal Council shall, as per the advice of the Municipal Manager and subject to compliance with applicable labour legislation, be entitled to, by notice in writing to the Director, take steps to terminate the Director's employment in accordance with the notice period set out in the Director's contract of employment.

11.5. Where there is a dispute or difference as to the performance of the Director under this Agreement, the Parties shall confer with a view to resolving the dispute or difference.

11.6. Nothing contained in this Agreement in any way limits the right of the Municipality to terminate the Directors contract of employment with or without notice for any other breach by the Director of her obligations to the Municipality or for any other valid reason in law.

## 12. DISPUTES

12.1. In the event that the Director is dissatisfied with the nature of this Agreement, whether it relates to key responsibilities, priorities, methods of assessment and/or salary increment in the agreement, must be mediated by the Municipal Manager, who must within 30 days of receipt of a formal dispute from the Director, take a decision that shall be formal and binding on both parties.

12.1 In the event that the Director is dissatisfied with the outcome of the evaluation, must be mediated by a member of the municipal council, provided that such member was not part of the evaluation panel provided for in sub-regulation 27(4) (e) within 30 days of receipt of a formal dispute from the Director, take a decision that shall be formal and binding on both parties.

## 13. GENERAL

13.1. The contents of this Agreement must be made available to the public by the Municipal Manager in accordance with the Municipal Finance Management Act, 2003 section 46.

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

Signed at Komani on this 1<sup>st</sup> day of JULY 2020

  
Director: Health and Community Services  
Chris Hani District Municipality

As witness:

(1) ANDISWA KAKAZA  
Full Name and Surname

  
Signature

(2) ZANDISILE YAFELE  
Full Name and Surname


  
Signature

Signed at Komani on this 1<sup>st</sup> day of JULY 2020

  
Municipal Manager  
Chris Hani District Municipality

As witness:

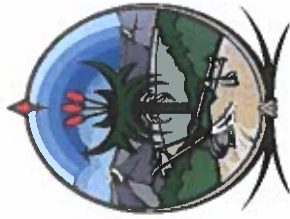
(1) Luzuko Govu  
Full Name and Surname

  
Signature

(2) Ipeleng Tlhalako  
Full Name and Surname

  
Signature

**ANNEXURE B:  
PERFORMANCE AGREEMENT FOR MS. Y. SINYANYA**



**CHRIS HANI**  
DISTRICT MUNICIPALITY  
SUSTAINING GROWTH  
THROUGH OUR PEOPLE

**CHRIS HANI DISTRICT MUNICIPALITY**

**Ms Y Sinyanya**

**2020/21 FINANCIAL YEAR**

**PERSONAL DEVELOPMENT PLAN OF:**

1. Skills/ Performance Gap (in order of priority)	2. Outcomes Expected (measures indicators: quantity, quality and time frames)	3. Suggested Training and /or development activity	4. Suggested Mode of delivery	5. Suggested Time Frames	6. Work Opportunity created to practise skill / development area	7. Support Person
Local Government Leadership & Development Programme	Certificate in Local Government Women Leadership Development	Local Government Women Leadership Development Programme	Online sessions	November 2020 – January 2021	Effective lead and provide guidance within Health & Community Services Directorate	Municipal Manager

YS  
GM



CHRIS HANI DISTRICT MUNICIPALITY  
Health and Community Services score card  
2020/21 FINANCIAL YEAR

Priority Area	Measurable Objectives	5 YR Outcome	Strategy	KPI	Indicator Descriptions	Indicator Code	Programme Budget Allocation	Baseline	SDG/SP Annual Target	Qrt 1	Qrt 2	Qrt 3	Qrt 4	Evidence (Provide Evidence for current target and	Custodian
KPA: 1 MUNICIPAL TRANSFORMATION AND ORGANISATIONAL DEVELOPMENT															
Broad Objective 1: To Establish and Maintain a Skilled Labour Force Guided by Policies to Function Optimally Towards the Delivery of Services to Communities															
SECTIONAL MANAGEMENT	Increased productivity and improved service delivery	To attract, retain and build a productive workshop	Integrated human resources management programmes	Number of Departmental trainings identified and submitted to HR as a contribution to WSP.	Integrated human resources management programmes	IHRM programmes – seeks to improve organization performance and developing a culture that foster innovation to help the organisation to achieve its performance.	N/A	4 IHRM programmes implemented	1 Departmental trainings identified and submitted to HR as a contribution to WSP by 30 June 2021	N/A	N/A	1 Departmental trainings identified and submitted to HR as a contribution to WSP.	N/A	Report on Departmental WSP training	Director: Health and Community Services
							MTOD - 1.1								
SECTIONAL MANAGEMENT	Increased productivity and improved service delivery	To attract, retain and build a productive workshop	Integrated human resources management programmes	Number of departmental reports submitted on Job Descriptions writing as per the approved staff establishment	After the staff establishment have been approved new posts are identified which will require JDs as it is the municipality responsibility to write job description for all posts that are in the staff establishment.	MTOD-1.3.3	N/A	None	2 Departmental reports submitted on Job Descriptions writing as per the approved staff establishment by 30 June 2021	N/A	N/A	N/A	1 Departmental reports submitted on Job Descriptions writing as per the approved staff establishment	Departmental report on Job Descriptions writing and signed job descriptions	Director: Health and Community Services
							MTOD-1.3.4.1								
KPA 2: BASIC SERVICE DELIVERY AND INFRASTRUCTURE DEVELOPMENT															
Broad Strategic Objective 2: To ensure provision of Municipal Health, Environmental Management and Basic Services in a well-structured, efficient and integrated manner.															

Municipal Health Services	To provide municipal health services in accordance with relevant legislations	Healthy communities	Monitor compliance of waste water quality with relevant legislation	% Wastewater quality compliance in accordance with Regulations 991 and section 39 of National Water Act 36 of 1998 as amended for compliance	To monitor Waste Water Quality within CHDM through sampling of final effluent water from 12 wastewater treatment works. Further more ,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, distribution network and at the tap and sample points database. b) Toolkits (needed) such as coolerbox, icepacks, labelling stickers, chemical reagents, bottles 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 Intergrated 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 $26/28 \cdot 100 = 72\%$ compliance . The source document is the water samples report taken for the quarter and database What is the method of calculation What are the source documents	SDI - 14	R 525 400	63% of Wastewater quality compliance in accordance with Regulations 991 and section 39 of National Water Act 36 of 1998 as amended for compliance	100% Wastewater quality compliance in accordance with Regulations 991 and section 39 of National Water Act 36 of 1998 as amended for compliance	100% Wastewater quality compliance in accordance with Regulations 991 and section 39 of National Water Act 36 of 1998 as amended for compliance	100% Wastewater quality compliance in accordance with Regulations 991 and section 39 of National Water Act 36 of 1998 as amended for compliance	100% Wastewater quality compliance in accordance with Regulations 991 and section 39 of National Water Act 36 of 1998 as amended for compliance	Waste Water sample results, Sample points data base.	Director: Health and Community Services
Municipal Health Services	To provide municipal health services in accordance with relevant legislations	Healthy communities	Monitor compliance of drinking water quality with SANS 241	% of Drinking Water Compliance to SANS 241	To monitor Drinking Water Quality within CHDM through sampling at water treatments works, distribution network and point of use. Further more ,a sample point is source of drinking water were 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 coolerbox, 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 Intergrated 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 $150/160 \cdot 100 = 94\%$ compliance . The source document is the water samples report taken for the quarter and database What are the source documents	SDI - 15	R1 000 000	98% of Drinking Water Compliance to SANS 241	100% of Drinking Water Compliance to SANS 241	100% of Drinking Water Compliance to SANS 241	100% of Drinking Water Compliance to SANS 241	Drinking Water sample results, Sample points data base	Director: Health and Community Services	

<p>Monitor Food Control, Management of Human remains and Sanitation structures in accordance with relevant legislation</p>	<p>Number of Municipal Public Health Programmes implemented.</p>	<p>Municipal Public Health comprises of the following programmes namely:  1. Food Premises  2. Funeral Parlours &amp; Mortuaries  3. Sanitation structures  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</p>	<p>SDI - 16</p>	<p>30 000,00</p>	<p>3 Municipal Public Health Programmes implemented.</p>	<p>04 Municipal Public Health Programmes implemented by 30 June 2021</p>	<p>04 Municipal Public Health Programmes implemented</p>	<p>04 Municipal Public Health Programmes implemented</p>	<p>04 Municipal Public Health Programmes implemented</p>	<p>Compliance notices, Data base for food premises, Compliance check list</p>	<p>Director: Health and Community Services</p>
<p>Monitor Food Control in accordance with relevant legislation</p>	<p>Number of food premises inspections conducted for compliance with Food, Cosmetics and Disinfectants Act 54 of 1972 as Amended</p>	<p>Food Premises inspections for compliance within CHDM where food is being produced, processed, stored, prepared and sold for public human consumption. A database of premises is compiled and updated regularly to capture new and closing food premises and conducting regular inspections. The source document for compiling the report is the inspection checklist of the database</p>	<p>SDI 16.1</p>	<p>OPEX</p>	<p>560 Food premises inspections conducted for compliance with Food, Cosmetics and Disinfectants Act 54 of 1972 as Amended</p>	<p>560 Food premises inspections conducted for compliance with Food, Cosmetics and Disinfectants Act 54 of 1972 as Amended</p>	<p>560 Food premises inspections conducted for compliance with Food, Cosmetics and Disinfectants Act 54 of 1972 as Amended</p>	<p>560 Food premises inspections conducted for compliance with Food, Cosmetics and Disinfectants Act 54 of 1972 as Amended</p>	<p>560 Food premises inspections conducted for compliance with Food, Cosmetics and Disinfectants Act 54 of 1972 as Amended</p>	<p>Compliance notices, Data base for food premises, Compliance check list</p>	<p>Director: Health and Community Services</p>
<p>Monitor Management of Human remains in accordance with relevant legislation</p>	<p>Number of Funeral parlors &amp; Mortuaries inspected for compliance in line with National Health Act 61 of 2003, section 32</p>	<p>To monitor Funeral Undertakers/Prior requirements for compliance with CHDM through inspections of privately owned parlors and state mortuaries. This KPI is relevant in terms of the National Health Act 61 of 2003, section 32. A database of funeral parlors 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. This indicator does not talk to samples</p>	<p>SDI - 16.2</p>	<p>OPEX</p>	<p>288 Funeral parlors &amp; Mortuaries inspected for compliance in line with National Health Act 61 of 2003, section 32 by 30 June 2021</p>	<p>72 Funeral parlors &amp; Mortuaries inspected for compliance in line with National Health Act 61 of 2003, section 32</p>	<p>72 Funeral parlors &amp; Mortuaries inspected for compliance in line with National Health Act 61 of 2003, section 32</p>	<p>72 Funeral parlors &amp; Mortuaries inspected for compliance in line with National Health Act 61 of 2003, section 32</p>	<p>72 Funeral parlors &amp; Mortuaries inspected for compliance in line with National Health Act 61 of 2003, section 32</p>	<p>Compliance notices, Compliance check list</p>	<p>Director: Health and Community Services</p>

Disaster and Fire Management	To ensure effects of disaster and fire are prevented or minimised	Reduced Disaster & fire risk	Implementation of Disaster Management and District Fire Services Plans	Number of Disaster Risk Management and District Fire Services Programmes implemented as per DMP & DFSP	Disaster Risk Management is an 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 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	OPEX	02 Disaster Risk Management and Fire Services Programmes implemented as per DMP & DFSP	02 Disaster Risk Management and Fire Services Programmes implemented as per DMP & DFSP
Monitor Sanitation structures in accordance with relevant legislation	To monitor sanitation structures (public ablutions and households) for compliance with 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 - 16.3	OPEX	Number of sampled sanitation structures inspected in line with White Paper on Basic Household Sanitation of 2001	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.	020 sampled sanitation structures inspected in line with White Paper on Basic Household Sanitation of 2001 by 30 June 2021	020 sampled sanitation structures inspected in line with White Paper on Basic Household Sanitation of 2001	020 sampled sanitation structures inspected in line with White Paper on Basic Household Sanitation of 2001	020 sampled sanitation structures inspected in line with White Paper on Basic Household Sanitation of 2001	020 sampled sanitation structures inspected in line with White Paper on Basic Household Sanitation of 2001
Implementation of District Wide Environmental Management Plan		SDI- 16.4	OPEX	Number of waste sites inspected 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 2021	14 Waste sites inspected in line with the District Wide Environmental Management Plan	14 Waste sites inspected in line with the District Wide Environmental Management Plan	14 Waste sites inspected in line with the District Wide Environmental Management Plan	14 Waste sites inspected in line with the District Wide Environmental Management Plan

<p>Number of Disaster Risk Management Programmes implemented as per DMP</p>	<p>Disaster Risk Management encourages having coordinated efforts from various stakeholders aimed at reducing disaster risks within Chris Hani District Municipality. Disaster Management Plan is a plan that specify clear institutional arrangements for coordination, aligning with other governance 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;</p> <ol style="list-style-type: none"> <li>1. Disaster management incidents</li> <li>2. Disaster Stricken Households assisted</li> <li>3. Disaster Management Early Warning System</li> </ol>	<p>SDI-17.1</p>	<p>OPEX</p>	<p>1 Disaster Risk Management Programmes implemented as per DMP</p>	<p>01 Disaster Risk Management Programmes implemented (1-100% response to disaster management incidents reported 2. 100% Disaster Stricken Households assisted 3. Facilitate engagement with South African Weather Services &amp; Signing of MOU)</p>	<p>01 Disaster Risk Management Programmes implemented (1-100% response to disaster management incidents reported 2. 100% Disaster Stricken Households assisted 3. Facilitate transfer of Funds )</p>	<p>01 Disaster Risk Management Programmes implemented (1-100% response to disaster management incidents reported 2. 100% Disaster Stricken Households assisted 3. Implementation of MOU for Disaster Management Early Warning System )</p>	<p>01 Disaster Risk Management Programmes implemented (1-100% response to disaster management incidents reported 2. 100% Disaster Stricken Households assisted 3. Implementation of MOU for Disaster Management Early Warning System )</p>	<p>Response to disaster management incidents reported = 01-04 = Incident report Disaster Stricken Households assisted = 01-04 = Incident Report(s), Counter book, Assessment form, Assessment Report, Distribution List Disaster Management Early Warning System Implementation of Q1 =</p>	<p>Director: Health and Community Services</p>
<p>% Response to disaster management incidents reported</p>	<p>Disaster management incidents- are all disaster related incidents reported from the local municipality to the district call center. The process for responding to disaster incidents is as follows;</p> <ol style="list-style-type: none"> <li>1. CHDM call center receives calls communities members affected by the disaster incident and the center will record the incident on the occurrence book.</li> <li>2. Disaster official will then respond to the incident and generate an incident report.</li> <li>3. Then the Disaster officials will record the incident on the occurrence book to Close up the incident.</li> <li>4. Disaster Manager will then dispatch officials to conduct a disaster damage assessment report.</li> </ol> <p>2. Method of calculation = incident responded to / incident reported = 100% Response to disaster management incidents reported</p> <p>3. Source documents = Occurrence book, Incident report and Disaster damage assessment report.</p>	<p>SDI-17.1.1</p>	<p>OPEX</p>	<p>100% response to disaster management incidents reported by 30 June 2021</p>	<p>100% response to disaster management incidents reported</p>	<p>100% response to disaster management incidents reported</p>	<p>100% response to disaster management incidents reported</p>	<p>100% response to disaster management incidents reported</p>	<p>Incident report</p>	<p>Director: Health and Community Services</p>

100 % Disaster Stricken Households assisted with relief and recovery material by 30 June 2021	100% Disaster Stricken Households assisted	100% Disaster Stricken Households assisted	100% Disaster Stricken Households assisted	100% Disaster Stricken Households assisted	100% Disaster Stricken Households assisted	Incident Report(s), Counter book, Assessment form, Assessment Report, Distribution List	Director: Health and Community Services
01 Disaster Management Early Warning System installed by 30 June 2021	1. Facilitate engagement with South African Weather Services 2. Signing of MOU	Facilitate transfer of Funds	Implementation of MOU for Disaster Management Early Warning System	Implementation of MOU for Disaster Management Early Warning System	Implementation of MOU for Disaster Management Early Warning System	Q1 =Attendance register, Resolubion Register & Signed MOU Q2= Proof of payment Q3 & Q4 = Implementation reports on Disaster Management Early Warning System Q4 = Implementation reports on Disaster Management Early Warning System & Close out report.	Director: Health and Community Services

% 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 compiled 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.  2. Method of calculation = relief material provided as the assessment / beneficiary list = 100% of Disaster stricken Households assisted with relief and recovery material 3. Source documents = Assessment report, Beneficiary list	SDI-17.1.2	R1 900 000	R1 900 000
Number of Disaster Management Early Warning Systems installed	A system that is designed for dissemination of early warnings to communities and all relevant stakeholders of Disaster Management faced with treating risk for effective response. The process for the installation of Disaster Management Early Warning Systems will be as follows: 1. The signing of Memorandum Of Agreement with South African Weather Services (SAWS ) and Chris Hani District Municipality (CHDM) 2. Transfer of funds by CHDM to SAWS 3. Installation of Early Warning Systems 4. Weather Forecast Reports  2. Method of calculation = Installation of 1 Early Warning System 3. Source documents = Memorandum Of Agreement, Proof of payments for transfered funds, Installation Close out report and Weather Forecast Reports	SDI-17.1.3	R600 000	R600 000

Fire Services	To ensure effects of disaster and fire are prevented or minimised	Reduced fire risks	Implementation of Municipal Structures Act 117 of 1998 Sec 84 (1)(j) .	Number of District Fire Services programmes implemented as per DFSP	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. The programme will be implemented through five activities namely: 1. Fire Services Trainings 2. Fire services awareness 3. Fire Services Inspections 4. Fire services incidents reported 5. CHDM Community Fire safety by- law	SDI-17.2	R 297 000,00	01 Fire Services Programmes implemented as per DFSP	1 District Fire Services programme implemented as per DFSP by 30 June 2021	1 District Fire services programme implemented as per DFSP	1 District Fire services programme implemented as per DFSP	1 District Fire services programme implemented as per DFSP	1 District Fire services programme implemented as per DFSP	District Fire services programme Director: Health and Community Services
				Number of Fire Services Trainings conducted	Firefighters at local level to be trained in firefighting according to the MSA, Act 117 Of 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 program. (3) The service provider must provide the content of the course and a report will be written by the manager of the fire services. b) Describe the method of calculation to be conducted to measure that indicator. (1) the method of calculation will be (incremental) total of training courses attended per quarter. c) What will be the output of that indicator. (1) the output will be the total of courses attended during the quarters ( Q1=1 and Q2 =1 for the annual two courses has been attended.)	SDI-17.2.1	R 190 500,00		1 Fire Services Training conducted by 30 June 2021	N/A	N/A	N/A	Attendance register, Training report, course outline, Training Certificate	Director: Health and Community Services

40 Fire Services Inspections conducted by 30 June 2021	10 Fire Services Inspections conducted	10 Fire Services Inspections conducted	10 Fire Services Inspections conducted	10 Fire Services Inspections conducted	Inspection Report/Inspection Certificate, Check list	Director, Health and Community Services
100% of Response to Fire services incidents reported by 30 June 2021	100% of Response to Fire services incidents reported	100% of Response to Fire services incidents reported	100% of Response to Fire services incidents reported	100% of Response to Fire services incidents reported	Incident Report, Quarterly Fire	Director, Health and Community Services

Number of Fire Services Inspections conducted	Inspections to be conducted in public places to prevent the outbreak of fires. 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 indicator is based on the requested of the owners/occupier of a public building . (2) Complaints received from the public relating to fire ssus which is irregular and (3)In the event the Fire prevention officer do inspections according to his/her targets. (4) The reports written to the owners/occupier will be used as the source document. b)Method of calculation the indicator. (1) Method of calculation(Incremental) is the total of specions conducted per quarter per premises.(Q1=10, Q2=10, Q3=10 & Q4=10) followed by the issuing of an inspection report(Compliance or non compliance) or inspection certificate.(flammable substance) c)The output of the indicator. (1) The output will be the total of inspections conducted over the four quarters( 4 x 10 inspections conducted per quarter=40). The outcome will be the reduction of structural fires.	SDI-17.2.2	OPEX
% Response to Fire services incidents reported	100% response to reported incidents according to MSA Act 117 of 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) When the control centre received a fire call they need to contact the fire staff who will attend to the incident. (2) After the incident is completed a fire incident report must be completed. (3) After the fire incident report been completed it will be collected as the source document. b)Describe the method of calculation to be conducted to measure that indicator. (1)The method of calculation(Incremental) is the total of fire incident reports received after an fire incident was attended per quarter. c)What will be the output of that indicator. (1) The output will be the total of incident reports per quarter.	SDI-17.2.3	OPEX



<b>Environmental Management</b>	To promote functional ecosystems and healthy environment for all citizens	Minimised effects of Climate Change	Implementation of District Wide Environmental Management Plan	<p>Number of CHDM Community Fire safety by-law developed and adopted by Council</p> <p>The by-law will address all public safety issues relating to fires in the entire district of Chris Hani.</p> <p>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 sources document.</p> <p>(1) The completed Community fire safety by-law and council resolution of approval.</p> <p>(2) Research relating to fire safety to be conducted.</p> <p>(3) Consultation process with local municipalities and stakeholders</p> <p>b) Describe the method of calculation to be conducted to measure that indicator.</p> <p>(1) <i>method of calculation will be 1 x completed community fire safety by-law.</i></p> <p>c) What will be the output of that indicator.</p> <p>(1) The output will be the completed community fire safety by-law.</p>	SDI-17 2.4	R 30 000	None	1 CHDM Community Fire safety by-law developed and adopted by Council by 30 June 2021	N/A	CHDM Community Fire safety by-law developed	Consultations	1 CHDM Community Fire safety by-law developed and adopted by Council	Q=2, Draft CHDM Community Fire safety by-law. Q3 = Attendance register, Consultations report. Q4= CHDM Community Fire safety by-law and Council resolution	Director: Health and Community Services
<b>Environmental Management</b>	To promote functional ecosystems and healthy environment for all citizens	Minimised effects of Climate Change	Implementation of District Wide Environmental Management Plan	<p>Number of Environmental Programmes implemented as per District Wide Environmental Plan</p> <p>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</p>	SDI-18	R6 312 000	3 Environmental Programmes implemented as per District Wide Environmental Management Plan	02 Environmental Programmes implemented as per District Wide Environmental Management Plan by 30 June 2021	02 Environmental Programmes implemented as per District Wide Environmental Management Plan	01 Environmental Programmes implemented as per District Wide Environmental Management Plan	01 Environmental Programmes implemented as per District Wide Environmental Management Report	Environmental Programmes implemented as per District Wide Environmental Management Report	Director: Health and Community Services	

1 Waste management programme implemented in 2 local municipalities by 30 June 2021	1. Facilitation of engagements with the LM's 2. Development of Business plan/proposal with Enoch Mgijima and Engcobo LM's for project Implementation	Monitor implementation of the project in accordance with the Business plan/proposal	N/A	N/A	O1= Business Plan/Proposal, Minutes of all engagements, Attendance register Signed Business plan/proposal Quarterly implementation report submitted to Standing Committee C= 2 Quarterly implementation report submitted to Standing Committee, Monitoring report	Director: Health and Community Services
2 illegal dumping sites cleared and rehabilitated in the district by 30 June 2021	N/A	Engagement with LM's, Identification and Assessment of illegal dumping sites	Facilitate procurement/transfer processes	Appointment of service provider and 2 illegal dumping sites cleared in the district	Concept document, Consultation & Assessment report Attendance registers, Orders, Clearing Report, Appointment letters Proof of payment, Confirmation of service, Rehabilitation Report	Director: Health and Community Services

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. This project started in 2019/2020 Financial year were phase 1 was implemented, for the current fiscal phase 2 of 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. Installation and placing of Waste equipment 5. Monitor project implementation 2. Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter 3. Source documents = Business plan, Resolution register of Engagements, Attendance register, Appointment letter or Orders and Monitoring report.	SDI-18.1	R766 350	
Number of illegal dumping sites cleared and rehabilitated in the district	To clear and rehabilitate waste illegal dumping sites created by communities in different local municipalities through cleaning, greening and beautification. This program is conducted together with local municipalities with purpose of promoting public health, hygiene and environmental protection. The outcomes of the program are driven by the individual municipal needs as per the assessment or needs analysis conducted prior implementation of the program.	SDI 18.1.1	R294 486	

<b>Environmental Management</b>	Number of Climate change programmes implemented	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.  This Climate change programme consist of a Rural Sustainable Village programme that is made up of different components that are outlined in the Business Plan. The process for the implementation of Climate change will be as follows: 1. Develop a project workplan with clear outcomes. 2. Implementation of the workplan. 3. Monitor the implementation of the project.  2. Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter 3. Source documents = Finalised workplan, monitoring report, close-out report.	SDI-18.2	R4 126 373.75	1 Climate change programmes implemented by 30 June 2021	Implementation of Rural Sustainable Villages Project in 5 Local Municipalities.	N/A	N/A	N/A	Quarterly Report, Monitoring report and Business/Work Plan	Director: Health and Community Services				
<b>KPA 3: LOCAL ECONOMIC DEVELOPMENT</b>															
<b>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.</b>															
<b>Climate Change and Environmental Services</b>	To Contribute economic development and growth in the district as envisaged in the NDP	Improved regional economy	Implementation of EPWP Policy	EPWP Jobs created for communities on District Municipality projects	204 EPWP Jobs	R1 258 000	35 Jobs created through EPWP by 30 June 2021	35 Jobs created through EPWP	N/A	N/A	N/A	EPWP Report	Manager: Environmental Management		
<b>KPA 4: FINANCIAL MANAGEMENT AND VIABILITY</b>															
<b>Broad Strategic Objective 4: To Ensure an Efficient and Co-ordinated Financial Management that Enables CHDM to deliver its Mandate</b>															
<b>Budget Planning and Reporting</b>	Ensure Sound Financial Management	Sound financial Management and compliance with legislation	Completion of Credible Budget and Financial Reports	This indicator seeks to show how the department has contributed or what inputs did the department provide during the preparation of the next years budget and adjusted budget.	100%	N/A	FMV - 1.1	N/A	N/A	N/A	N/A	1 Departmental budget reports contributing towards completion of institutional credible budgets by 30 June 2021	1 Departmental budget reports contributing towards completion of institutional credible budgets	Departmental budget report & Memo requesting departmental Budget inputs for next financial year and Adjusted Budget, Departmental budget report	Director: Health and Community Services

Procurement / Demand Management	Ensure sound financial management	Sound financial Management and compliance with legislation	Implementation of SCM Policy and Expenditure Framework	Number of reports on departmental expenditure (Operational/ Capital) incurred	This indicator seeks to give an understanding on how the department has spend on expenditure for both Operating and Capital compare to the departmental budget allocated to it.	FMV - 1.2	N/A	100%	4 Reports on departmental expenditure incurred by 30 June 2021	1 Reports on departmental expenditure (Operational/ Capital) incurred	1 Reports on departmental expenditure (Operational/ Capital) incurred	1 Reports on departmental expenditure (Operational/ Capital) incurred	1 Reports on departmental expenditure (Operational/ Capital) incurred	1. Financial Systems Quarterly Expenditure Reports for both Operating and Capital 2. Directors Analysis Report for the directorate	Director: Health and Community Services
			N/A	Approved Departmental Procurement Plan	Procurement plans 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 develop each department is required to implement the projects as such.	FMV - 3.1	N/A	Approved Departmental Procurement Plan	1 Departmental Procurement Plans Developed and Approved by 30 June 2021	Approved Departmental Procurement Plan	N/A	N/A	Approved Departmental Procurement Plan resolution	Director: Health and Community Services	
EXPENDITURE MANAGEMENT	Ensure sound financial management	Sound financial Management and compliance with legislation	Implementation of MFMA Sec 65 and 66	% adherence to 5 days submission of all valid supplier invoices by the department to finance department	All municipalities should adhere to sec 65 of MFMA, which states that all invoices should be paid within 30 days on receipt of correct information. In terms of sec 66 of MFMA, the Accounting officer of the municipality must report to council all expenditure. The process for adherence to 30 days payment of valid invoices by the due date will be as follows: 1. 2. 3. etc 2. Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter 3. Source documents =	FMV - 4.1	OPEX	100%	100 % adherence to 5 days submission of all valid supplier invoices by the department to finance department by 30 June 2021	100 % adherence to 5 days submission of all valid supplier invoices by the department to finance department	100 % adherence to 5 days submission of all valid supplier invoices by the department to finance department	100 % adherence to 5 days submission of all valid supplier invoices by the department to finance department	5 days monitoring report, Quarterly Creditors invoice analyses report	Director: Health and Community Services	
<b>KPA 5: GOOD GOVERNANCE AND PUBLIC PARTICIPATION</b>															
Broad Objective : To Create an Efficient effective,accountable and performance oriented administration															
Disaster Management	To enhance Communication,Stakeholder Management and Customer Care	Informed stakeholders	Implementation of Stakeholder Management Plan	Number of Disaster advisory forums conducted	Stakeholder Forums are platform for public participation on municipal matters	GGPP-2.6	R50 000	4 Disaster advisory forums meeting held	4 Disaster advisory forums conducted by 30 June 2021	1 Disaster advisory forums conducted	1 Disaster advisory forums conducted	1 Disaster advisory forums conducted	Resolution register,minutes	Manager: Disaster Management	
ENVIRONMENTAL MANAGEMENT				Number of Environment and climate change forums conducted	Stakeholder Forums are platform for public participation on municipal matters	GGPP-2.7	R50 000	4 Environment and climate change forum meetings held	4 Environment and climate change forum conducted by 30 June 2021	1 Environment and climate change forum conducted	1 Environment and climate change forum conducted	1 Environment and climate change forum conducted	Resolution register,minutes	Manager: Environmental Management	

Municipal Health Services	To enhance stakeholder Communication,SI Management and Customer Care	Informed Communities	Implementation of Public Participation Strategy	Number of Health and hygiene awareness programmes conducted	Education on Environmental Health related topics to communities and schools.	GGPP- 2.16.2	R201 000	120 Health and hygiene awareness programmes conducted	60 Health and hygiene awareness programmes conducted by 30 June 2021	15 Health and hygiene awareness programmes conducted	15 Health and hygiene awareness programmes conducted	15 Health and hygiene awareness programmes conducted	Awareness programmes report,attendance registers,concept document	Manager Municipal Health Services
				Number of Awareness programmes provided to food handlers	Education and Training on food safety related topics to food handlers (formal and informal food handlers)	GGPP- 2.16.3	R220 000	8 Awareness programmes provided to food handlers	4 Awareness programmes provided to food handlers by 30 June 2021	1 Awareness programmes provided to food handlers	1 Awareness programmes provided to food handlers	1 Awareness programmes provided to food handlers	Awareness programmes report,attendance registers,concept document	Manager Municipal Health Services
				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, Sanitization week	GGPP- 2.16.3.1	R500 000	8 Environmental Health calendar Days observed	4 Environmental Health calendar Days observed by 30 June 2021	1 Environmental Health calendar Days observed	1 Environmental Health calendar Days observed	1 Environmental Health calendar Days observed	Report,attendance registers,concept document	Manager Municipal Health Services
Disaster Management				Number of Disaster awareness programmes conducted	The awareness programmes is to provide capacity and better understanding of sustainable environmental management practices.	GGPP- 2.16.4	R400 000	12 Disaster awareness programmes conducted	4 Disaster awareness programmes conducted by 30 June 2021	1 Disaster awareness programme conducted	1 Disaster awareness programme conducted	1 Disaster awareness programme conducted	Awareness programmes report,attendance registers,concept document	Manager Disaster Management
				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- 2.16.4.1	R1000 000	2 IDDR days observed	1 IDDR days observed by 30 June 2021	N/A	N/A	N/A	Report: attendance registers,Concept Document	Manager Disaster Management

<p><b>FIRE MANAGEMENT</b></p>						<p>GGPP - 2.16.5</p>	<p>R 76 500.00</p>	<p>48 Fire Services Awareness campaigns implemented by 30 June 2021</p>	<p>12 Fire Service awareness campaigns implemented</p>	<p>12 Fire Service awareness campaigns implemented</p>	<p>12 Fire Service awareness campaigns implemented</p>	<p>12 Fire Service awareness campaigns implemented</p>	<p>Attendance register, Report on Fire service awareness programme, schedule of fire awareness programmes</p>	<p>Director: Health and Community Services</p>	
<p>Environmental Management</p>					<p>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. ; (1)The performance of the indicator is based on the total of fire incidence received;&amp; (2) At each awareness campaigns an attendance registers will be provided. (3) The attendance registers of each campaign will be used as the source document. b)Describe the method of calculation to be conducted to measure that indicator. Calculation will be awareness programs per quarter based on the attendance register per awareness campaign ( Q1=12, Q2=12 Q3=12 &amp; Q4=12). c)What will be the output of that indicator. (1) 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.</p>	<p>GGPP - 2.16.6</p>	<p>R100 000.00</p>	<p>16 Environmental management awareness programmes conducted</p>	<p>4 Environmental management awareness programmes conducted by 30 June 2021</p>	<p>1 Environmental management awareness programmes conducted</p>	<p>1 Environmental management awareness programmes conducted</p>	<p>1 Environmental management awareness programmes conducted</p>	<p>1 Environmental management awareness programmes conducted</p>	<p>Awareness programmes report, attendance registers, concept document</p>	<p>Manager: Environmental Management</p>
<p>INTERNAL AUDIT</p>	<p>To ensure clean administration and accountable governance</p>	<p>Good Governance</p>	<p>Development and implementation of risk based operational plan</p>	<p>Percentage response to internal audit RPT's and resolving issues raised</p>	<p>Services provide independent, objective assurance and consulting services. The risk based plan comprised of the following: 1. Risk based Audits 2. Mandatory audits 3. Follow up audit 4. Adhoc audit.</p>	<p>GGPP - 4.1</p>	<p>N/A</p>	<p>100%</p>	<p>100% Response to internal audit RPT's and resolving issues raised by 30 June 2021</p>	<p>100% Response to internal audit RPT's and resolving issues raised</p>	<p>100% Response to internal audit RPT's and resolving issues raised</p>	<p>100% Response to internal audit RPT's and resolving issues raised</p>	<p>Report on internal audit RPT's and resolving issues raised</p>	<p>Director: Health and Community Services</p>	

RISK MANAGEMENT															
PMS	Implementation of risk management framework	Percentage implementation of the risk register	Risk Management is a process of identifying, assessing, prioritizing and managing risks/ threats within the institution.	GGPP - 5.1	N/A	100%	100% Implementation of the risk register by 30 June 2021	25% Implementation of the risk register	50% Implementation of the risk register	75% Implementation of the risk register	100% Implementation of the risk register	Updated risk register submitted to the risk management committee	Director : Health and Community Services	Director : Health and Community Services	
	Implementation of the PMS framework	Number of quarterly performance reports submitted on time (with POE)	PMS programmes are aims at reviewing, monitoring and improving performance systems of the municipality as per the framework	GGPP - 5.1	N/A	4	4 Quarterly performance reports submitted on time (with POE) by 30 June 2021	1 Quarterly performance reports submitted on time (with POE)	1 Quarterly performance reports submitted on time (with POE)	1 Quarterly performance reports submitted on time (with POE)	1 Quarterly performance reports submitted on time (with POE)	proof of submission to the office of the Municipal Manager	Director : Health and Community Services	Director : Health and Community Services	
	Number of Quarterly Performance Assessments for Directors conducted	Number of Quarterly Performance Assessments for Directors conducted	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-6.4	N/A	None	3 Director's Quarterly Performance Assessments submitted on time (with POE) by 30 June 2021	Signed of Director's Performance Agreement	1 Director's Quarterly Performance Assessments submitted on time (with POE)	1 Director's Quarterly Performance Assessments submitted on time (with POE)	1 Director's Quarterly Performance Assessments submitted on time (with POE)	Q.1 = Signed Performance Agreements, Q.2 & Q.3= Directors Quarterly Performance Assessments reports	Director : Health and Community Services	Director : Health and Community Services	

Environmental Management	Development and implementation of Credible Plans aligned to NDP 203	Improved Service Delivery	Development and review of Credible plans	Number of District Recycling Strategy developed	The CHDM IWMP is a tool which seeks to optimize waste management in the district by maximizing efficiency and minimizing financial costs and environmental impacts. The District Recycling Strategy further seeks to enhance the implementation of the IWMP and waste management services in the District. Furthermore it provides for innovative measures to improve the economic component of the waste sector in the District. <b>The process for the development of District Recycling Strategy n will be as follows.</b> 1. 2. 3. etc  2. Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter 3. Source documents =	GGPP-12.3	R658 222	None	1 District Recycling Strategy developed by 30 June 2021	N/A	Facilitate appointment of service provider	Draft District Recycling Strategy Plan developed	Final District Recycling Strategy Plan developed	Q2= Terms of reference, Appointment of service provider Q3= Draft District Recycling Strategy Plan Q4= Final District Recycling Strategy Plan, Council resolution	Director, Health and Community Services
Fire Management				Number of District Fire Services Plan Reviewed and adopted by Council	Planning, coordination and regulation of Fire services in the Chris Hanu District. The process for the review and adoption of District Fire Services Plan will be as follows: 1. 2. 3. etc  2. Method of calculation = 1 programme will be implemented with different activities as stipulated in the Business plan/proposal each quarter 3. Source documents =	GGPP - 12.7	OPEX	None	1 District Fire Services Plan Reviewed and adopted by Council by 30 June 2021	N/A	Review of District Fire Services Plan	Consultations	Final District Fire Services Plan Reviewed and adopted by Council	Q=2 Draft District Fire Services Plan Q3 =Attendance register, Consultations report. Q4= Final District Fire Services Plan and Council resolution	Director, Health and Community Services