# Annexure B

# Diagnostic tools for assessing organisational health

# BATHO PELE FITNESS TEST

## ASSESSMENT CRITERIA

| Numerical scale | Descriptive scale | Interpretation |
|---|---|---|
| 3 | Excellent | Exceeds required level of compliance / is an acknowledged leader in the field compared to other municipalities |
| 2 | Good | Evidence of consistently and constantly complying with the requirement / meets all criteria |
| 1 | Needs improvement | Something has been done, but the required level of compliance has not yet been achieved, or only achieved periodically / below standard / not compliant |
| 0 | Not done | This issue has not yet been addressed / 0 % compliant |

## 1. Consultation

### 1.1 External customer consultation

| Customer group consulted | Purpose | Method | Frequency |
|---|---|---|---|
| Examples:<br>▪ General public<br>▪ Rate payers<br>▪ Users of municipal services<br>▪ Users of specific municipal services<br>▪ Residents in certain areas<br>▪ Other groups | Examples:<br>▪ Assess service needs<br>▪ Satisfaction levels<br>▪ Setting standards<br>▪ Complaints procedures<br>▪ Service evaluation<br>▪ Information needs<br>▪ Clarity of information<br>▪ Ideas for improvement<br>▪ Accessibility of services | Examples:<br>▪ Surveys<br>▪ Meetings<br>▪ Interviews<br>▪ Suggestion boxes<br>▪ User panels<br>▪ Help desk<br>▪ Ward committees<br>▪ Community forums<br>▪ Media | Examples:<br>▪ Daily<br>▪ Weekly<br>▪ Monthly<br>▪ Quarterly<br>▪ Annually<br>▪ Other |

| | <ul><li>Responsiveness</li><li>Other (specify)</li></ul> | <ul><li>Web Site</li><li>Other (specify)</li></ul> | |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

| Assessment | | | | |
|---|---|---|---|---|
| 3. Excellent | 2. Good | 1. Needs improvement | 0. Not done | |

## 1.2 Internal customers

| Customer group consulted | Purpose | Method | Frequency |
|---|---|---|---|
| Examples:<br>• Councillors<br>• Management staff<br>• Staff in Technical Services<br>• Staff in Corporate Services<br>• Staff in Community Services<br>• Staff in Finance<br>• Staff in Traffic Management<br>• Staff in Fire and Emergency<br>• Staff in Human Resources<br>• Staff in the Committees Division<br>• Staff in Budgeting and Reporting | Examples:<br>• Assess resource requirements<br>• Understanding of vision, mission, strategic goals and values<br>• Ideas for service delivery improvements<br>• Inputs for setting standards<br>• Understanding of the complaints procedures<br>• Knowledge of Customer Care Code of Conduct<br>• Satisfaction with working conditions<br>• Other (specify) | Examples:<br>• Organisational culture surveys<br>• Meetings<br>• Interviews<br>• Suggestion boxes<br>• User panels<br>• Help desk<br>• Departmental representatives<br>• Unions<br>• Focus groups<br>• Other (specify) | Examples:<br>• Weekly<br>• Monthly<br>• Quarterly<br>• Annually<br>• Other |
| | | | |
| | | | |
| | | | |
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| | | | |
| | | | |

| Assessment | | | |
|---|---|---|---|
| 3. Excellent | 2. Good | 1. Needs improvement | 0. Not done |

1.3 What are the top three issues identified during consultation that should be addressed in order to improve service delivery to external customers? What are the planned outputs and outcomes?

| Evidence: |
|---|
|  |

| Assessment | | | | | | |
|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

1.4 What are the top three issues identified during consultation that should be addressed in order to address the needs of staff? What are the planned outputs and outcomes?

| Evidence: |
|---|
|  |

| Assessment | | | | | | |
|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

## 2 Service standards and targets

2.1 Have service standards and / or targets been set in all areas of delivery?

| Evidence: |
|---|
|  |

| Assessment | | | | | | |
|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

2.2 How is actual performance measured and compared to planned performance?

| Evidence: |
|---|
| |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

2.3 How is sub-standard performance addressed?

| Evidence: |
|---|
| |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

2.4 Are key performance indicators and performance targets reviewed periodically?

| Evidence: . |
|---|
| |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

2.5 Is performance against targets reported to customers and staff?

| Evidence: |
|---|
| |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

## 3   Access

3.1 Have targets been set for improving access to services?

| Evidence: |
| --- |
| |

| Assessment | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

3.2 How are internal barriers such as low morale, poor work ethic, lack of skills, materials and equipment identified and addressed?

| Evidence: |
| --- |
| |

| Assessment | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

3.3 Are partnerships pursued with businesses and the community to increase the availability of services for customers?

| Evidence: |
| --- |
| |

| Assessment | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

3.4 Do you increase access by coordinating and cooperating with other municipal departments and provincial and national departments that deal with the same client groups?

| Evidence: |
| --- |

| Assessment | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

## 4 Courtesy

4.1 Do you enforce the use of a Code of Conduct on Customer Care?

| Evidence: |
| --- |

| Assessment | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

4.2 What standards have been set against the following elements in your Customer Care Code of Conduct to ensure that staff deliver services in a polite and courteous manner?

| Elements of politeness and courteousness | Standard set |
| --- | --- |
| a) Greeting and addressing of customers | |
| b) Treating customers with sensitivity and dignity | |
| c) Identification of staff by name | |
| d) Simplification and "customer-friendliness" of forms | |
| e) Maximum response times to enquiries | |
| f) How complaints should be dealt with | |
| g) Answering telephones | |
| h) Establish a help desk | |
| i) Provide water and serve tea/coffee to visitors and staff | |

| Assessment | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

4.3 What special initiatives have been undertaken to ensure that all staff, but especially front-line staff, have been trained in customer care?

| Evidence: |
|---|

| Assessment | | | | |
|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

## 5   Information

5.1 Which of the following is used to convey information to customers and staff, and to what degree, i.e. of usage and frequency?

| Method | Customers | Staff | Frequency and degree of usage |
|---|---|---|---|
| a)  Meetings | | | |
| b)  Circulars | | | |
| c)  Newsletters | | | |
| d)  Interviews | | | |
| e)  Personal visits | | | |
| f)  Radio slots | | | |
| g)  Newspapers | | | |
| h)  Telephone | | | |
| i)  Web site | | | |
| j)  Tapes / Braille | | | |
| k)  Reports | | | |
| l)  Posters and Brochures | | | |
| m) Service Commitment Charter | | | |

| Assessment | | | | |
|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

5.2 Has a Service Commitment Charter been disseminated, which:

| Charter elements covered | Yes | No |
|---|---|---|
| a) Reflects the services that will be provided? | | |
| b) Says what customers can expect from services? | | |
| c) Includes information on how customers can make suggestions and / or lodge complaints? | | |
| d) Indicates who is entitled to use the services? | | |
| e) Provides contact details of key staff? | | |
| f) Has been disseminated to all customers and staff? | | |
| g) Customer and staff awareness of the Charter has been tested? | | |
| h) Details of senior staff and their responsibility? | | |

| Assessment | | | | | |
|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

## 6. Openness and transparency

6.1 Which of the following issues do you report on to customers on an annual basis?

| Issues reported on | Yes | No |
|---|---|---|
| How the organisation is run? | | |
| Who is in charge? | | |
| How much is spent on administrative costs versus service delivery programmes? | | |

| | | |
|---|---|---|
| The extent to which promised services are being delivered? | | |
| How under performance is being addressed? | | |

| Evidence: |
|---|
| |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

6.2 The above information has been provided to customers in an Annual Report to Citizens which is made available to customers and stakeholders and has been submitted to relevant government structures?

| Evidence: |
|---|
| |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

## 7. Dealing with complaints

7.1 Does a complaints system exist for all key services?

| Evidence: |
|---|
| |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

7.2 What standards have been set in applying the complaints mechanism and to what extent have they been met according to the following scale of results?

| Elements contained in procedure | Standard set | Extent standards met |
|---|---|---|
| a) Accessibility | | |
| b) Speed of response | | |
| c) Fairness in dealing with complaints | | |
| d) Maintaining confidentiality of complaint | | |
| e) Responsiveness | | |
| f) Independent review | | |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

7.3 How is the system of reviewing complaints and suggestions for improvement being used for the following?

| Elements of review system | How are the elements addressed? |
|---|---|
| a) Keeping a register of complaints and suggestions, including: | |
| (i) Number and type of complaints received | |
| (ii) How promptly they are addressed | |
| (iii) How complainants are kept informed of progress | |
| (iv) How the matter has been dealt with | |
| b) Trends analysis | |
| c) Review by the head of components | |
| d) Frequency of review | |
| e) Steps taken to ensure mistakes are nor repeated | |
| f) Communicating results of analysis | |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

7.4    Give examples of how complaints are being used to improve services?

| Evidence: |
| --- |
|  |

| Assessment | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

## 8   Best value

8.1 To what extent does the organisational structure represent that of a developmental local authority?    Has the organisational structure been aligned to the IDP?

| Evidence: |
| --- |
|  |

| Assessment | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

8.2 Is an updated Workplace Skills Plan being implemented?    What percentage of skills levies is paid back?

| Evidence: |
| --- |
|  |

| Assessment | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

8.3 Are delegations of authority in place that empower staff to take decisions as close to the point of service delivery as is practical?

| Evidence: |
| --- |

| Assessment | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

8.4 Are the Integrated Development Plan, the Budget and the Performance Management System compiled and managed as one integrated management process?

| Evidence: |
| --- |

| Assessment | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

8.5 What percentage of performance targets were achieved within budget?

| Evidence: |
| --- |

| Assessment | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

8.6 Are cost-benefit analyses completed in respect of key services and projects / outputs?

| Evidence: |
| --- |

| Assessment | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

8.7 What initiatives are introduced to increase productivity and combat fruitless expenditure?

| Evidence: |
|---|
| |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

## 9  Innovation and recognition

9.1 What has been done to create an environment for innovation that enhances staff's capacity to deliver services?

| Evidence: |
|---|
| |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

9.2 What is done to encourage staff to make suggestions for improving services?      Give examples of how these ideas are implemented

| Evidence: |
|---|
| |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

9.3 Demonstrate that staff, both as individuals and as teams, are recognised for their contributions towards improved service delivery.

| Evidence: |
|---|
| |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

**10 Service delivery impact**

10.1      To what extent are the outcomes emanating from the vision and mission achieved?

| Evidence: |
|---|
| |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| **3. Excellent** | | **2. Good** | | **1. Needs improvement** | | **0. Not done** | |

10.2      Demonstrate that *Batho Pele* forms an intrinsic part of the internal organisational culture and organisational efficiency.

| Evidence: |
|---|
| |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| **3. Excellent** | | **2. Good** | | **1. Needs improvement** | | **0. Not done** | |

10.3      What is the level of customer satisfaction against the following?

| Customer's views on: | % Level of satisfaction |
|---|---|
| a)  Their awareness of the nature of services offered | |
| b)  The standard of services and facilities offered | |
| c)  The information provided about facilities and services | |
| d)  Performance against promised standards and targets | |
| e)  Accessibility and ease of communication with the Municipality or business unit | |
| f)   The extent to which the Municipality delivers on customer needs and expectations | |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| **3. Excellent** | | **2. Good** | | **1. Needs improvement** | | **0. Not done** | |

## 11 Leadership and strategic direction

11.1    What have leaders done to set, communicate and inspire everyone to deliver on a shared vision, values and goals?

| Evidence: |
|---|
|  |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

11.2    How do leaders ensure that the organisation's reputation, results and performance are regularly scrutinised by customers and stakeholders?

| Evidence: |
|---|
|  |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

11.3    How do leaders constantly promote a culture of excellence on all levels through encouraging prioritisation, simplification and learning?

| Evidence: |
|---|
|  |

| Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

11.4　　What do leaders do to ensure that they recognise individuals and teams by celebrating their achievements to reinforce the desired culture and encourage goal achievement?

| Evidence: |
| --- |
| |

| Assessment | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

11.5　　What do leaders do to ensure that they operate within the ethics, values and behaviours aimed at promoting good governance and service delivery?

| Evidence: |
| --- |
| |

| Assessment | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| 3. Excellent | | 2. Good | | 1. Needs improvement | | 0. Not done | |

**Assessment summary**

| Batho Pele principles | Total possible score | Score achieved | % achieved |
|---|---|---|---|
| 1. Consultation | 12 | | |
| 2. Service standards and targets | 15 | | |
| 3. Access | 12 | | |
| 4. Courtesy | 9 | | |
| 5. Information | 6 | | |
| 6. Openness and transparency | 6 | | |
| 7. Dealing with complaints | 12 | | |
| 8. Best value | 21 | | |
| 9. Innovation and recognition | 9 | | |
| 10. Service delivery impact | 9 | | |
| 11. Leadership and strategic direction | 15 | | |
| **Totals** | **126** | | |

**What was good, what needs attention?**

| Batho Pele principles | What was good | What needs attention |
|---|---|---|
| 1. Consultation | | |
| 2. Service standards and targets | | |
| 3. Access | | |
| 4. Courtesy | | |
| 5. Information | | |
| 6. Openness and transparency | | |
| 7. Dealing with complaints | | |
| 8. Best value | | |
| 9. Innovation and recognition | | |
| 10. Service delivery impact | | |
| 11. Leadership and strategic direction | | |

# VUNA ASSESSMENT CRITERIA

**HIGH LEVEL PERCEPTION SURVEY**

**The Degree to which :**

| No. | MEASURE | RATING SCORE | | | | | |
|---|---|---|---|---|---|---|---|
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 1 | Rate the municipality as a whole | | | | | | |
| | | | | | | | |
| 2 | We set standards and perform well | | | | | | |
| | | | | | | | |
| 3 | We actively engage with our partners, customers and staff in all areas of our business | | | | | | |
| | | | | | | | |
| 4 | In delivering our services and dealing with our clients, we are fair and accessible to everyone and promote choice | | | | | | |
| | | | | | | | |
| 5 | We are continuously developing and improving | | | | | | |
| | | | | | | | |
| 6 | We use our resources effectively and imaginatively | | | | | | |
| | | | | | | | |
| 7 | We contribute to improving opportunities and quality of life in all the communities we serve | | | | | | |
| | | | | | | | |
| 8 | There is a high level of work ethic, teamwork and morale in our municipality | | | | | | |

**LEADERSHIP AND ETHICS**

**The Degree to which :**

| No. | MEASURE | RATING SCORE | | | | | |
|---|---|---|---|---|---|---|---|
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 1 | Leaders have set the direction and created a positive environment to encourage efficient and effective service delivery | | | | | | |
| | | | | | | | |
| 2 | Leaders ensure that they continuously measure and track performance at all levels | | | | | | |
| | | | | | | | |
| 3 | Leaders work in partnership with others to meet, understand and respond to the needs and expectations of customers | | | | | | |
| | | | | | | | |
| 4 | Leaders ensure that they and the municipality as a whole operate in an ethical manner in order to demonstrate good governance and | | | | | | |
| | to promote confidence and trust in the Municipality through ensuring that: | | | | | | |
| | 1) own tailored code is in place for Councillors in accordance with prescribed legislation | | | | | | |
| | 2) own tailored code is in place for Managers in accordance with prescribed legislation | | | | | | |
| | 3) A code for how customers will be treated is in place for each division / service area | | | | | | |
| | 4) the benefits of operating in an ethical manner are understood and supported by all | | | | | | |
| | 5) there is zero tolerance for unethical behaviour | | | | | | |
| | | | | | | | |

**SERVICE DELIVERY & INFRASTRUCTURE DEVELOPMENT (KPA 1)**

**The Degree to which :**

| No. | MEASURE: SERVICE DELIVERY AND INFRASTRUCTURE DEVELOPMENT | RATING SCORE | | | | | |
|---|---|---|---|---|---|---|---|
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 1 | A POLICY/ PLANS FOR PROVISION OF SERVICES IS IN PLACE IN ACCORDANCE WITH APPLICABLE LEGISLATION : | | | | | | |
| | a) Water Services | | | | | | |
| | b) Electricity | | | | | | |
| | c) Solid Waste Management | | | | | | |
| | d) Environmental Management | | | | | | |
| | e) Roads | | | | | | |
| | f) Community Facilities | | | | | | |
| | | | | | | | |
| 2 | THERE IS A STRUCTURE IN PLACE TO DELIVER SERVICES AND FULFIL THE OBJECTIVES OF THE IDP IRO: | | | | | | |
| | a) Water Services | | | | | | |
| | b) Electricity | | | | | | |
| | c) Solid Waste Management | | | | | | |
| | d) Environmental Management | | | | | | |
| | e) Roads | | | | | | |
| | f) Community Facilities | | | | | | |
| | | | | | | | |
| 3 | BYLAWS, WHERE RELEVANT, HAVE BEEN ENACTED TO GIVE EFFECT TO THE ABOVE POLICIES | | | | | | |
| | | | | | | | |
| 4 | MEASURABLE PERFORMANCE TARGETS HAVE BEEN SET AT ALL LEVELS TO DELIVER ON THE IDP OBJECTIVES | | | | | | |
| | AND IMPLEMENT THE ABOVE POLICIES | | | | | | |
| | | | | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| 5 | PROCEDURES HAVE BEEN PUT IN PLACE TO ENSURE DELIVERY OF SERVICES ACCORDING TO REQUIRED STDS: | | | | | |
| | a) Water Services | | | | | |
| | b) Electricity | | | | | |
| | c) Solid Waste Management | | | | | |
| | d) Environmental Management | | | | | |
| | e) Roads | | | | | |
| | f) Community Facilities | | | | | |
| | * | | | | | |
| 6 | SYSTEMS + PROCEDURES HAVE BEEN PUT IN PLACE TO ENSURE COMMUNITY PARTICIPATION | | | | | |
| | | | | | | |
| 7 | THE RESPONSIBLE UNITS ARE FULLY CAPACITATED: | | | | | |
| | a) Water Services | | | | | |
| | b) Electricity | | | | | |
| | c) Solid Waste Management | | | | | |
| | d) Environmental Management | | | | | |
| | e) Roads | | | | | |
| | f) Community Facilities | | | | | |
| | * | | | | | |
| 8 | THERE IS A MECHANISM IN PLACE FOR MONITORING AND REVIEWING PERFORMANCE IRO: | | | | | |
| | a) Water Services | | | | | |
| | b) Electricity | | | | | |
| | c) Solid Waste Management | | | | | |
| | d) Environmental Management | | | | | |
| | e) Roads | | | | | |
| | f) Community Facilities | | | | | |
| | | | | | | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 9 | THE FOLLOWING DATA IS COLLECTED AND ANALYSED THROUGH THE PERFORMANCE MANAGEMENT SYSTEM: | | | | | | |
| | a) WATER SERVICES: | | | | | | |
| | 1) water supply backlog | | | | | | |
| | 2) new water connections | | | | | | |
| | 3) sanitation backlog | | | | | | |
| | 4) new sanitation connections | | | | | | |
| | 5) metering efficiency | | | | | | |
| | b) ELECTRICITY: | | | | | | |
| | 1) electricity supply backlog | | | | | | |
| | 2) new electricity connections | | | | | | |
| | 3) metering efficiency | | | | | | |
| | c) SOLID WASTE MANAGEMENT: | | | | | | |
| | 1) solid waste backlog | | | | | | |
| | 2) new solid waste service points | | | | | | |
| | 3) % of volume of general waste recycled against the total volume of waste in the current financial year | | | | | | |
| | 4) % of municipal landfill volume licensed according to the terms of the Environmental Conservation Act | | | | | | |
| | d) ENVIRONMENTAL MANAGEMENT: | | | | | | |
| | 1) IDP/ environmental plan targets | | | | | | |
| | 2) % of population affected by violation of drinking water quality during current financial year | | | | | | |
| | e) ROADS: | | | | | | |
| | 1) roads backlog | | | | | | |
| | 2) new access points to roads | | | | | | |
| | 3) % of budget spent on the upgrading and maintenance of roads | | | | | | |
| | f) COMMUNITY FACILITIES: | | | | | | |
| | 1) No. of community hall per 10 000 population | | | | | | |
| | 2) % households within a 2km radius of a community hall | | | | | | |
| | 3) No. of sports facilities per 10 000 population | | | | | | |
| | 4) % households that lie within a 2km radius of a sports facility | | | | | | |
| | 5) What areas of parks and designated open spaces are available per 10 000 population (square km) | | | | | | |
| | 6) % of households that lie within a 2km radius of a park or designated open space | | | | | | |
| | | | | | | | |

| 10 | PERFORMANCE IS REPORTED ON TO ALL RELEVANT STAKEHOLDERS IN ACCORDANCE WITH REQUIREMENTS | | | | | | |
|---|---|---|---|---|---|---|---|
| | a) Water Services | | | | | | |
| | b) Electricity | | | | | | |
| | c) Solid Waste Management | | | | | | |
| | d) Environmental Management | | | | | | |
| | e) Roads | | | | | | |
| | f) Community Facilities | | | | | | |
| | | | | | | | |
| | | | | | | | |

## LOCAL ECONOMIC DEVELOPMENT (KPA 2)

**The Degree to which :**

| No. | MEASURE: LED | RATING SCORE | | | | | |
|---|---|---|---|---|---|---|---|
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 1 | A POLICY/ PLAN TO ENABLE ECONOMIC GROWTH IS IN PLACE IN ACCORDANCE WITH APPLICABLE LEGISLATION | | | | | | |
| | | | | | | | |
| 2 | THERE IS A STRUCTURE IN PLACE TO DELIVER ON THE OBJECTIVES OF THE IDP IRO ECONOMIC GROWTH + POVERTY | | | | | | |
| | ALLEVIATION | | | | | | |
| | | | | | | | |
| 3 | BYLAWS, WHERE RELEVANT, HAVE BEEN ENACTED TO GIVE EFFECT TO THE ABOVE POLICIES | | | | | | |
| | | | | | | | |
| 4 | MEASURABLE PERFORMANCE TARGETS HAVE BEEN SET AT ALL LEVELS TO DELIVER ON THE IDP OBJECTIVES | | | | | | |
| | AND IMPLEMENT THE ABOVE POLICIES | | | | | | |
| | | | | | | | |
| 5 | PROCEDURES HAVE BEEN PUT IN PLACE TO ENSURE POLICY/ PLAN IMPLEMENTATION ACCORDING TO REQUIRED STDS | | | | | | |
| | * | | | | | | |
| 6 | SYSTEMS + PROCEDURES HAVE BEEN PUT IN PLACE TO ENSURE COMMUNITY PARTICIPATION | | | | | | |
| | | | | | | | |
| 7 | THE RESPONSBILE UNIT IS FULLY CAPACITATED | | | | | | |
| | * | | | | | | |
| 8 | THERE IS A MECHANISM IN PLACE FOR MONITORING AND REVIEWING PERFORMANCE IRO LED | | | | | | |
| | | | | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| 9 | THE FOLLOWING DATA IS COLLECTED AND ANALYSED THROUGH THE PERFORMANCE MANAGEMENT SYSTEM | | | | | |
| | 1) ECONOMIC GROWTH: | | | | | |
| | a) Preferential policy favouring SMME's and BEE's | | | | | |
| | b) Total rand value of contracts awarded during current financial year | | | | | |
| | c) Total rand value of contracts awarded to SMME's during the specified period | | | | | |
| | d) Total rand value of contracts awarded to BEE during the specified period | | | | | |
| | e) % of contracted work (rand value) awarded to women | | | | | |
| | f) % of contracted work (rand Value) awarded to youth | | | | | |
| | g) % of contracted work (rand value) awarded to people with disabilities | | | | | |
| | 2) POVERTY ALLEVIATION: | | | | | |
| | a) Indigent policy | | | | | |
| | b) % of households earning less than R1 100 per month who receive free basic water | | | | | |
| | c) % of households earning less than R 1 100 per month who receive free basic sanitation | | | | | |
| | d) % of households earning less than R1 100 per month who receive free basic electricity | | | | | |
| | e) % of the Equitable Share used for free basic services | | | | | |
| | 3) JOB CREATION: | | | | | |
| | a) Number of jobs created by municipal LED activities | | | | | |
| | b) % of these jobs that were allocated to women | | | | | |
| | c) % of these jobs that were allocated to youth | | | | | |
| | d) % of these jobs that were allocated to people with disabilities | | | | | |
| | e) No. of jobs created by municipal capital projects | | | | | |
| | f) % of above jobs allocated to women | | | | | |
| | | | | | | |
| 10 | PERFORMANCE IS REPORTED ON TO ALL RELEVANT STAKEHOLDERS IN ACCORDANCE WITH REQUIREMENTS | | | | | |
| | | | | | | |
| | | | | | | |

## MUNICIPAL FINANCIAL VIABILITY (KPA 3)
**The degree to which:**

| MEASURES: FINANCIAL VIABILITY AND GRANT AND EXPENDITURE MANAGEMENT | PERCENTAGE % SCORE | | | | | |
|---|---|---|---|---|---|---|
| | 5 | 4 | 3 | 2 | 1 | 0 |
| A POLICY/ PLANS TO ENSURE FINANCIAL VIABILITY + GRANT MANAGEMENT ARE IN PLACE IN ACCORDANCE WITH APPLICABLE LEGISLATION | | | | | | |
| | | | | | | |
| THERE IS A STRUCTURE IN PLACE TO DELIVER ON OBJECTIVES OF THE IDP IRO FINANCIAL VIABILITY + GRANT MANAGMT | | | | | | |
| | | | | | | |
| BYLAWS, WHERE RELEVANT, HAVE BEEN ENACTED TO GIVE EFFECT TO THE ABOVE POLICIES | | | | | | |
| | | | | | | |
| MEASURABLE PERFORMANCE TARGETS HAVE BEEN SET AT ALL LEVELS TO DELIVER ON THE IDP OBJECTIVES AND IMPLEMENT THE ABOVE POLICIES | | | | | | |
| | | | | | | |
| PROCEDURES HAVE BEEN PUT IN PLACE TO ENSURE POLICY/ PLAN IMPLEMENTATION ACCORDING TO REQUIRED STDS: | | | | | | |
| * | | | | | | |
| SYSTEMS + PROCEDURES HAVE BEEN PUT IN PLACE TO ENSURE COMMUNITY PARTICIPATION | | | | | | |
| | | | | | | |
| THE RESPONSIBLE UNIT/S IS/ARE FULLY CAPACITATED | | | | | | |
| * | | | | | | |
| THERE IS A MECHANISM IN PLACE FOR MONITORING AND REVIEWING PERFORMANCE IRO FINANCIAL VIABILITY + GM | | | | | | |
| | | | | | | |
| THE FOLLOWING DATA IS COLLECTED AND ANALYSED THROUGH THE PERFORMANCE MANAGEMENT SYSTEM | | | | | | |
| 1) FINANCIAL VIABILITY: | | | | | | |
| a) Cash collection | | | | | | |
| b) Grant Dependency | | | | | | |
| c) Ability to spend capital budget | | | | | | |
| d) Payment of creditors | | | | | | |
| e) Outstanding customer debt in debtor days | | | | | | |
| f) Ability to meet short term commitments (current ratio) | | | | | | |
| g) Debt coverage | | | | | | |
| h) Salaries as a % of total opex | | | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| 2) GRANT AND EXPENDITURE MANAGEMENT: | | | | | | |
| a) % of  Municipal Systems Improvement Grant allocation received  used during the current financial year | | | | | | |
| b) % of the MSIG allocation within the above financial year rolled over to the following financial year | | | | | | |
| c) % of LED fund allocation utilised within the current financial year | | | | | | |
| d) % of LED fund allocation within the above FY rolled over to the following FY | | | | | | |
| e) % of Municipal Infrastructure Grant received used during the current FY | | | | | | |
| f) % of MIG allocation within the above FY rolled over to the following FY | | | | | | |
| g) MSIG outputs achieved | | | | | | |
| h) MIG outputs achieved | | | | | | |
| h) LEDF outputs achieved | | | | | | |
| | | | | | | |
| PERFORMANCE IS REPORTED ON TO ALL RELEVANT STAKEHOLDERS IN ACCORDANCE WITH REQUIREMENTS | | | | | | |
| | | | | | | |
| | | | | | | |

**MUNICIPAL TRANSFORMATION AND INSTITUTIONAL DEVELOPMENT (KPA 4)**

**The Degree to which :**

| No. | MEASURES: MUNICIPAL TRANSFORMATION AND INSTITUTIONAL DEVELOPMENT | RATING SCORE | | | | | |
|---|---|---|---|---|---|---|---|
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 1 | A POLICY/ PLAN IS IN PLACE TO FULFIL THE OBJECTIVES OF: | | | | | | |
| | a) Organisational Design | | | | | | |
| | b) Employment Equity | | | | | | |
| | c) Skills Development | | | | | | |
| | d) Integrated Development Planning | | | | | | |
| | e) Performance Management System | | | | | | |
| | f) Human Resource Management | | | | | | |
| | | | | | | | |
| 2 | THERE IS A STRUCTURE IN PLACE TO DELIVER THE OBJECTIVES OF THE IDP IRO: | | | | | | |
| | a) Organisational Design | | | | | | |
| | b) Employment Equity | | | | | | |
| | c) Skills Development | | | | | | |
| | d) Integrated Development Planning | | | | | | |
| | e) Performance Management System | | | | | | |
| | f) Human Resource Management | | | | | | |
| | | | | | | | |
| 3 | BYLAWS, WHERE RELEVANT, HAVE BEEN ENACTED TO GIVE EFFECT TO THE ABOVE | | | | | | |
| | | | | | | | |
| 4 | MEASURABLE PERFORMANCE TARGETS HAVE BEEN SET AT ALL LEVELS TO IMPLEMENT THE ABOVE POLICIES AND DELIVER ON THE IDP OBJECTIVES | | | | | | |
| | | | | | | | |
| 5 | PROCEDURES HAVE BEEN PUT IN PLACE TO ENSURE IMPLEMENTATION OF POLICIES/PLANS ACCORDING TO REQUIRED STDS | | | | | | |
| | * | | | | | | |
| 6 | SYSTEMS + PROCEDURES HAVE BEEN PUT IN PLACE TO ENSURE COMMUNITY/ STAFF PARTICIPATION | | | | | | |
| | | | | | | | |
| 7 | THE RESPONSIBLE UNIT/S IS/ARE FULLY CAPACITATED | | | | | | |
| | * | | | | | | |

| 8 | THERE IS A MECHANISM IN PLACE FOR MONITORING AND REVIEWING PERFORMANCE IRO: | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | a) Organisational Design | | | | | | | |
| | b) Employment Equity | | | | | | | |
| | c) Skills Development | | | | | | | |
| | d) Integrated Development Planning | | | | | | | |
| | e) Performance Management System | | | | | | | |
| | f) Human Resource Management | | | | | | | |
| | | | | | | | | |
| 9 | THE FOLLOWING DATA IS COLLECTED AND ANALYSED THROUGH THE PERFORMANCE MANAGEMENT SYSTEM | | | | | | | |
| | A) ORGANISATIONAL DESIGN: | | | | | | | |
| | 1) Progress with amalgamation | | | | | | | |
| | 2) Approved structure | | | | | | | |
| | 3) Status of placement process as at 30 June 2004 | | | | | | | |
| | 4) % of posts filled | | | | | | | |
| | 5) % of posts unfilled for more than 3 months during the last financial year | | | | | | | |
| | B) EMPLOYMENT EQUITY: | | | | | | | |
| | 1) % of top 3 levels of management classified as Black | | | | | | | |
| | 2) % of women staff in top 3 levels of management | | | | | | | |
| | 3) % of women in total staff | | | | | | | |
| | 4) % of disabled persons in total staff | | | | | | | |
| | C) SKILLS DEVELOPMENT: | | | | | | | |
| | 1) There is a workplace skills development strategy and plan for the current financial year | | | | | | | |
| | 2) % of skills levy received in rebate from SETA for the last FY | | | | | | | |
| | D) INTEGRATED DEVELOPMENT PLANNING: | | | | | | | |
| | 1) The municipality has an up to date reviewed IDP, aligned with budget according to legislation | | | | | | | |
| | 2) The municipality has an approved Spatial Development Framework | | | | | | | |
| | 3) The municipality has an applicable Disaster Management Plan | | | | | | | |
| | 4) The municipality has an approved Medium Term Income and Expenditure Framework | | | | | | | |
| | E) PERFORMANCE MANAGEMENT SYSTEM: | | | | | | | |
| | 1) The muncipality has an approved and implemented PMS | | | | | | | |
| | 2) The proportion of the senior management team employed on a performance contract | | | | | | | |
| | 3) An annual report on the performance for the previous FY has been submitted to Province | | | | | | | |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | F) HUMAN RESOURCE MANAGEMENT: | | | | | | | |
| | 1) A human resources practices audit has been done | | | | | | | |
| | 2) People have been placed in posts | | | | | | | |
| | 3) All staff are in possession of letters of appointment | | | | | | | |
| | 4) All job descriptions are in place and posts have been evaluated | | | | | | | |
| | 5) Remuneration is in line with the post evaluation | | | | | | | |
| | 6) A policy exists and is being implemented iro those who are not placed | | | | | | | |
| | 7) An appraisal system is in place | | | | | | | |
| | 8) There is a system for recognition and reward in place | | | | | | | |
| | 9) All staff clearly understand the link between their roles and responsibilities and the strategic objectives of the municipality | | | | | | | |
| | | | | | | | | |
| 10 | PERFORMANCE IS REPORTED ON TO ALL RELEVANT STAKEHOLDERS IN ACCORDANCE WITH REQUIREMENTS IRO: | | | | | | | |
| | a) Organisational Design | | | | | | | |
| | b) Employment Equity | | | | | | | |
| | c) Skills Development | | | | | | | |
| | d) Integrated Development Planning | | | | | | | |
| | e) Performance Management System | | | | | | | |
| | f) Human Resource Management | | | | | | | |

**GOOD GOVERNANCE (KPA 5)**

**The Degree to which :**

| No. | MEASURE: GOOD GOVERNANCE | RATING SCORE | | | | | |
|---|---|---|---|---|---|---|---|
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 1 | A POLICY/ PLANS TO ENSURE GOOD GOVERNANCE ARE IN PLACE IN ACCORDANCE WITH APPLICABLE LEGISLATION: | | | | | | |
| | a) Public Participation, Accountability and Transparency | | | | | | |
| | b) Ward System | | | | | | |
| | c) Corporate Governance | | | | | | |
| | | | | | | | |
| 2 | THERE IS A STRUCTURE IN PLACE TO DELIVER THE OBJECTIVES OF THE IDP IRO: | | | | | | |
| | a) Public Participation, Accountability and Transparency | | | | | | |
| | b) Ward System | | | | | | |
| | c) Corporate Governance | | | | | | |
| | | | | | | | |
| 3 | MEASURABLE TARGETS ARE IN PLACE TO FULFIL THE OBJECTIVES OF: | | | | | | |
| | a) Public Participation, Accountability and Transparency | | | | | | |
| | b) Ward System | | | | | | |
| | c) Corporate Governance | | | | | | |
| | | | | | | | |
| 4 | BYLAWS, WHERE RELEVANT, HAVE BEEN ENACTED TO GIVE EFFECT TO THE ABOVE | | | | | | |
| | | | | | | | |
| 5 | PROCEDURES HAVE BEEN PUT IN PLACE TO ENSURE IMPLEMENTATION OF POLICY/PLANS ACCORDING TO REQUIRED STDS: | | | | | | |
| | * | | | | | | |
| 6 | SYSTEMS + PROCEDURES HAVE BEEN PUT IN PLACE TO ENSURE COMMUNITY/ STAFF PARTICIPATION | | | | | | |
| | | | | | | | |
| 7 | THE RESPONSIBLE UNIT/S IS/ARE FULLY CAPACITATED | | | | | | |
| | * | | | | | | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 8 | THERE IS A MECHANISM IN PLACE FOR MONITORING AND REVIEWING PERFORMANCE IRO: | | | | | | |
| | a) Public Participation, Accountability and Transparency | | | | | | |
| | b) Ward System | | | | | | |
| | c) Corporate Governance | | | | | | |
| | | | | | | | |
| 9 | THE FOLLOWING DATA IS COLLECTED AND ANALYSED THROUGH THE PERFORMANCE MANAGEMENT SYSTEM | | | | | | |
| | 1) PUBLIC PARTICIPATION, ACCOUNTABILITY AND TRANSPARENCY: | | | | | | |
| | a) Communication strategy was in place during the current FY | | | | | | |
| | b) A citizen satisfaction survey was conducted during the current FY | | | | | | |
| | c) A functional complaint system was in place during the current financial year | | | | | | |
| | d) Number of participant in public participation forums per 1000 population for current FY | | | | | | |
| | e) Whether citizens were communicated with in their first language | | | | | | |
| | f) Whethe citizens were communicated with in their first language | | | | | | |
| | 2) WARD SYSTEM: | | | | | | |
| | a) % of wards that had established ward committee structures | | | | | | |
| | b) Average number of ward committee meetings with a quorum, for all wards with committees | | | | | | |
| | 3) CORPORATE GOVERNANCE: | | | | | | |
| | a) A functional Financial Audit Committee | | | | | | |
| | b) A functional Performance Auit Committee | | | | | | |
| | c) Anti corruption policy | | | | | | |
| | d) Financial Statements for previous financial year were submitted to the Auditor-General by 30 September of the current FY | | | | | | |
| | e) The Auditor-General has audited the financial statements for the previous FY | | | | | | |
| | f) The outcome of the audit is: | | | | | | |
| | ` - unqualified | | | | | | |
| | ` - Qualified | | | | | | |
| | ` - No opinion | | | | | | |
| | | | | | | | |
| 10 | PERFORMANCE IS REPORTED ON TO ALL RELEVANT STAKEHOLDERS IN ACCORDANCE WITH REQUIREMENTS IRO: | | | | | | |
| | a) Public Participation, Accountability and Transparency | | | | | | |
| | b) Ward System | | | | | | |
| | c) Corporate Governance | | | | | | |
| | | | | | | | |