VICTOR KHANYE LOCAL MUNICIPALITY

"A repositioned municipality for a better and sustainable service delivery for all"



2024/25 Institutional (Non-Financial) Quarter 1 Performance Report

TABLE OF CONTENTS

| 1 | Purp | oose | 2 |
|---|--------|--|----|
| 2 | | cutive Summary | |
| 3 | | Performance Areas and Organisational Strategic Goals | |
| 4 | • | pparison of Institutional Performance Levels 2023/24 – 2024/25 | |
| 5 | Instit | tutional and Departmental Performance | 6 |
| | 5.1. | Office of the Municipal Manager | |
| | 5.2. | Budget & Treasury | |
| | 5.3. | Corporate Services | 8 |
| | 5.4. | Community & Social Services | 9 |
| | 5.5. | Technical Services | 9 |
| | KPA 1: | BASIC SERVICE DELIVERY AND INFRASTRUCTURE DEVELOPMENT | 12 |
| | KPA 2: | FINANCIAL VIABILITY AND FINANCE MANAGEMENT | 31 |
| | KPA 3: | INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION | 44 |
| | KPA 4: | GOOD GOVERNANCE AND PUBLIC PARTICIPATION | 54 |
| | KPA 5: | SPATIAL DEVELOPMENT | 68 |
| | KPA 6: | LOCAL ECONOMIC DEVELOPMENT | 72 |

1 Purpose

The purpose of this report is to give feedback regarding the performance of the Victor Khanye Local Municipality as required through The Municipal Systems Act No 32 of 2000, section 41(e) and the Municipal Finance Management Act 56 of 2003, section 52(d). The information included in this report is based on the IDP and SDBIP as developed for the financial year 2024/2025.

This report is based on information received from each department for assessment of performance for the accumulated **Quarter One (1) Performance for 2024/2025, ending 30 September 2024.** This is a high-level report based on a process whereby actual information per Key Performance Area (KPA), Strategic Objective, Programme and the aligned Key Performance Indicators are compared to the approved 2024/2025 IDP and Original SDBIP scorecards.

The overall performance for the Victor Khanye Local Municipality is based on the Departmental Performance scorecards as detailed below, which is inclusive of the IDP and Original SDBIP KPI's applicable to each department in terms of their respective contribution.

2 Executive Summary

This report serves as the Quarter One (1) Institutional Performance Report for the 2024/25 financial year ending 30 September 2024. It provides effective and informative feedback on the performance level achieved (accumulative reporting) against the targets as laid out in the IDP and Original SDBIP Scorecards. In the case of under-performance, the respective concerns or mitigating reasons are highlighted and detail pertaining to the relevant measures taken to address these challenges are included thereto.

The overall performance for the Victor Khanye Local Municipality is based on a composite Performance Scorecard of each Department comprising of all indicators inclusive of the IDP and Original SDBIP. The institution is responsible for a **total of 175 KPI's, of which 121 were assessed.** All these KPI's combine to contribute to the overall performance level of the IDP and Original SDBIP Scorecards.

The overall accumulative Institutional performance score achieved for the Quarter (1) Performance Report of 2024/25, ending 30 September 2024 was 81%, based on 98 of 121 KPI's assessed achieving their respective quarterly targets.

3 Key Performance Areas and Organisational Strategic Goals

The following Strategic Goals and Key Performance Areas have been adopted by the municipality for the purposes of reporting on the attainment of the Institutional performance indicators and targets

KPA 1: Infrastructure and Basic Service Delivery

Goal 1: Improved provision of basic services to the residents of VKLM

Goal 2: Improved social protection and education outcomes

KPA 2: Financial viability and Finance Management

Goal 3: Improved Compliance to MFMA and VKLM Policy Framework

KPA 3: Institutional Development and Transformation

Goal 4: Improved efficiency and effective of the Municipal Administration

KPA 4: Good Governance and Public Participation

Goal 5: Improve community confidence in the system of local government

KPA 5: Spatial Rationale

Goal 6: Increase regularization of built environment

KPA 6: Local Economic Development

Goal 7: Increased economic activity and job creation

The traffic light system used in the report of performance is as follows:

| GREEN | ACHIEVED |
|-------|----------------|
| RED | NOT ACHIEVED |
| GREY | NOT APPLICABLE |

4 Comparison of Institutional Performance Levels 2023/24 – 2024/25

Table 1: Quarter One (1) Performance Comparison

| Key Performance Areas | | 2023/24 | | | 2024/25 | | |
|--|----------------------|---------------------|-----------------------|-------------------------|------------------|--------------------|--|
| | Total KPI's Assessed | Targets Achieved | % Targets Achieved | Total KPI's Assessed | Targets Achieved | % Targets Achieved | |
| KPA 1: Infrastructure and Basic Service Delivery | 31 | 21 | 68% | 29 | 21 | 72% | |
| KPA 2: Financial viability and Finance Management | 31 | 25 | 84% | 31 | 22 | 71% | |
| KPA 3: Institutional Development and Transformation | 19 | 17 | 89% | 16 | 15 | 94% | |
| KPA 4: Good Governance and Public Participation | 33 | 27 | 82% | 33 | 29 | 88% | |
| KPA 5: Spatial Rationale | 6 | 5 | 83% | 7 | 6 | 86% | |
| KPA 6: Local Economic Development | 3 | 3 | 100 | 5 | 5 | 100% | |
| Overall | 123 | 98 | 80% | 121 | 98 | 81% | |

5 Institutional and Departmental Performance

Below is a summary of the overall combined KPI and Project performance level achieved by each Department, depicting both the individual departmental performance and the achievement per KPA.

Comparison of Institutional KPI's per KPA Versus Departments - 2024/25 Quarter One (1)

Table 1: KPI's Attaining Target

| КРА | KPA 1: Infrastructure and Basic Service Delivery | KPA 2: Financial viability and Finance Management | KPA 3: Institutional Development and Transformation | KPA 4: Good Governance and Public Participation | KPA 5: Spatial Rationale | KPA 6: Local Economic Development | Total | Dept. % |
|------------------------------------|---|---|---|--|--------------------------------|---|-------|---------|
| Financial Services | 1/1 | 15/23 | 0 | 1/1 | 0 | 0 | 17/25 | 68% |
| | 100% | 65% | N/A | 100% | N/A | N/A | | |
| Technical Services | 6/9 | 0/2 | 1/1 | 1/1 | 0 | 1/1 | 9/14 | 64% |
| | 67% | 0% | 100% | 100% | N/A | 100% | | |
| Community and Social Services | 13/16 | 3/3 | 0 | 4/4 | 0 | 0 | 20/23 | 87% |
| | 81% | 100% | N/A | 100% | N/A | N/A | | |
| Corporate Services | 0/0 | 2/2 | 9/9 | 4/4 | 0 | 0 | 15/15 | 100% |
| • | N/A | 100% | 100% | 100% | N/A | N/A | | |
| Office of the Municipal Manager | 2/3 | 1/1 | 5/6 | 19/23 | 6/7 | 4/4 | 37/44 | 84% |
| - | 67% | 100% | 83% | 83% | 86% | 100% | | |
| Total Achieved | 22 | 21 | 15 | 29 | 6 | 5 | 98 | |
| Total Assessed | 29 | 31 | 16 | 33 | 7 | 5 | 121 | |
| Percentage % | 76% | 68% | 94% | 88% | 86% | 100% | 81% | |

The following section contains a comprehensive breakdown of the **individual Departmental performance**. The results highlight the progress with respect to performance not only at a departmental level, but also represents the **progress made within each Key Performance Area (KPA).**

The individual performance of each KPI per KPA is highlighted in the following departmental scorecard.

5.1. Office of the Municipal Manager

The Office of the Municipal Manager is responsible for a total of **67 KPI's**, of which **44** were eligible for assessment in the period under review and combine to contribute to the overall performance level for the IDP and Adjustment SDBIP Scorecards. The statistics for the Department are as follows

Table 2: Office of the Municipal Manager Statistics

| Туре | Total KPI's Assessed | Targets Achieved | % Target Achieved | Under Target | % Under Target |
|-------------|-------------------------|------------------|----------------------|--------------|-------------------|
| IDP & SDBIP | 44 | 37 | 84% | 7 | 16% |
| Total | 44 | 37 | 84% | 7 | 16% |

5.2. Budget & Treasury

The Budget and Treasury Department is responsible for a total of **31 KPI's** of which **25** were eligible for assessment in the period under review and combine to contribute to the overall performance level for the IDP and Adjustment SDBIP Scorecards. The statistics for the Department are as follows.

Table 3: Budget & Treasury Statistics

| Туре | Total KPI's Assessed | Targets Achieved | % Target Achieved | Under Target | % Under Target |
|-------------|-------------------------|------------------|----------------------|--------------|----------------|
| IDP & SDBIP | 25 | 17 | 68% | 8 | 32% |
| Total | 25 | 17 | 68% | 8 | 32% |

5.3. Corporate Services

The Corporate Services Department is responsible for a total of **24 KPI's**, of which **15** were eligible for assessment in the period under review and combine to contribute to the overall performance level for the IDP and Adjustment SDBIP Scorecards. The statistics for the Department are as follows.

Table 4: Corporate Services Statistics

| Туре | Total KPI's Assessed | Targets Achieved | % Target Achieved | Under Target | % Under Target |
|-------------|-------------------------|------------------|----------------------|--------------|----------------|
| IDP & SDBIP | 15 | 15 | 100% | 0 | 0% |
| Total | 15 | 15 | 100% | 0 | 0% |

5.4. Community & Social Services

The Community and Social Services Department is responsible for a total of **30 KPI's**, of which **23** were eligible for assessment in the period under review and combine to contribute to the overall performance level for the IDP and Adjustment SDBIP Scorecards. The statistics for the Department are as follows.

Table 5: Community and Social Services Statistics

| Туре | Total KPI's Assessed | Targets Achieved | % Target Achieved | Under Target | % Under Target |
|-----------|-------------------------|------------------|----------------------|--------------|-------------------|
| IDP & IDP | 23 | 20 | 87% | 3 | 13% |
| Total | 23 | 20 | 87% | 4 | 13% |

5.5. Technical Services

The Technical Services Department is responsible for a total of **23 KPI's**, of which **14** were eligible for assessment in the period under review and combine to contribute to the overall performance level for the IDP and Adjustment SDBIP Scorecards. The statistics for the Department are as follows.

Table 6: Technical Services Statistics

| Туре | Total KPI's Assessed | Targets Achieved | % Target Achieved | Under Target | % Under Target |
|-------------|-------------------------|------------------|----------------------|--------------|----------------|
| IDP & SDBIP | 14 | 9 | 64% | 5 | 36% |
| Total | 14 | 9 | 64% | 5 | 36% |

KEY PERFORMANCE AREA 1: Infrastructure and Basic Service Delivery

The overall score for this KPA is 76% for the quarter under review.

| KPI Status | KPA 1: Infrastructure and Basic Service Delivery |
|--------------------------------------|--|
| Target Met (as planned and exceeded) | 22 |
| Target Not Met (below planned) | 7 |
| Total | 29 |
| % Targets met | 76% |
| % Targets not met | 24% |

Performance Highlights for 2024/25 Quarter (1)

| Challenges | Measures taken to improve performance |
|---|--|
| | |
| Only 6% of the MIG conditional grant was spent; | |
| In relation to the reconstruction of paved roads in Victor Khanye there were delays in realignment of the design to the storm water as-built, as well as preparation of the master BOQ for phase 2 work packages. | In terms of the reconstruction of paved roads in Victor Khanye; work packages have been issued. |
| There was also challenges with the development of Portion 6 of The Farm Middelburg 231-IR Sanitation Services – Phase 2 – Lower Lying Areas: redesign of the outstanding works | - Development of Portion 6 Of The Farm Middelburg 231-IR Sanitation Services – Phase 2 – Lower Lying Areas: redesign of the outstanding works 3 |
| In terms of the development of the 2nd Phase of the Landfill Site in Delmas, there was no record of decision from DWS. | - Development of the 2nd Phase of the Landfill Site in Delmas: DWS conducted a site visit at the landfill site on the 5 September 2024 |
| When it comes to the Installation of High Mast Lights at Victor Khanye Local Municipality, the challenge was due to long lead time from manufactures in delivering of materials. | Installation of High Mast Lights at Victor Khanye Local Municipality: two mast installed |
| In terms of the drilling, refurbishment of boreholes in rural areas and provision of elevated steel tanks, only 6 were completed | - Drilling, Refurbishment of boreholes in rural areas and provision of elevated steel tanks: RFQ issued |

| Challenges | Measures taken to improve performance |
|--|---|
| Provision of security boundary fencing for all municipal infrastructures: there were delays in preparation of work packages | Provision of security boundary fencing for all municipal infrastructures: |
| 2. Only 9% of the WSIG conditional grant was spent in Q1: | |
| In terms of the sub-contracting work appointed to local SMMEs for the construction of pipe laying faced challenges due to inadequate yellow plant machinery. This resulted in project delays, ultimately affecting budget expenditure. | Project 2: The main contractor procured the services of yellow fleet. Project 3: Tender advertised on the 5 September 2024 and closes 17 October 2024 |
| 3. There was only 66% availability of emergency response vehicles in quarter 1 to comply to the codes of practice; | |
| This was due to the slow turnaround times for receiving orders from Supply Chain caused a delay in emergency vehicle repairs. | - SCM process need to prioritize emergency services maintenance and repair requests |
| 4. Only 50% of new Capital projects were started on time In terms of the appointment of consultants / contractors excluding NDM funded projects; | |
| The Municipality is awaiting feedback from DWS in terms of the development of the 2nd Phase of the Landfill Site in Delmas: Detailed design report submitted to DWS. | - In terms of the provision of Civil Engineering and Construction of Water Related Infrastructure in Reducing the Non-Revenue Water in Sundra and Ellof- Project 3: Tender advertised on the 5 September |
| Delays completion of detailed design in the provision of Civil Engineering and Construction of Water Related Infrastructure in Reducing the Non-Revenue Water in Sundra and Ellof- Project 3. | 2024 and closes 17 October 2024 |
| In terms of the development of Portion 6 Of The Farm Middelburg 231-IR Sanitation Services – Phase 2 – Lower Lying Areas: Project reregistration and design due hard rock refusal requiring alternative methods. | |
| 5. The quarterly state of ambient air quality report was not submitted to HHS Portfolio Committee in Q1; | |
| Consolidated reports from DFFE have not been received for the quarter under review due to service level agreement that expired between DFFE and the service provider. | - Quarterly ambient air quality monitoring reports from DARDLEA will be uploaded from 2nd quarter and submit to HSS |

KPA 1: BASIC SERVICE DELIVERY AND INFRASTRUCTURE DEVELOPMENT

Strategic Goal 1: Improved provision of basic services to the residents of VKLM

Strategic Goal 2: Improved social protection and education outcomes

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------------------------|---------------|--|---------------|----------------|-----------------|---|---------------------|--|------------------------------|-----------------------------|-----------------|------------|-------------------|--|---|
| Service Delivery Led09- 2022 | Sanitation | % of households sanitation connections made for all new paid-up applications by 30 June 2025 (GKPI) | Rw23- 2022 | ED:TS | 1.1. | In house | 100% | 100% of households sanitation connection s made for all new paid-up application s by 30 June 2025 (GKPI) | N/A | N/A | N/A | N/A | N/A | Register of Paid-up Application s and Connection Booklets | N/A |
| | Water | % of households water connections made for all new paid-up applications by 30 June 2025 (GKPI) | | ED:TS | 1.2 | In house | 100% | 100% of households water connection s made for all new paid-up application s by 30 June 2025 (GKPI) | N/A | N/A | N/A | N/A | N/A | Register of Work- Orders and Connection Booklets | N/A |
| Service Delivery | Water | Number of water samples tested per month | Rw23- 2022 | ED:TS | 1.3 | In house | New | 12 water samples tested | 3 water samples tested | 3 | Achieved | None | None | Copy of water quality reports | Target achieved POE was provided |

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------------|---------------------------|---|----------------|----------------|-----------------|--|---------------------|---|--|-----------------------------|-----------------|------------|-------------------|---|---|
| Service Delivery | Water/ Sanitation | Water Services Master Plan and WSDP developed and submitted to Council by 30 June 2025 | Rw30- 2022 | ED:TS | 1.4 | DBSA | 0 | 1 Water Services Master Plan and WSDP developed and submitted to Council | N/A | N/A | N/A | N/A | N/A | Copies of Water Services Master Plan and WSDP and Council Resolution | N/A |
| | Housing | Number of monthly progress reports submitted to the MM with respect to the # of new RDP Housing units provided by the PDoHS | Hs 01- 2022 | ED:TS | 1.5 | In house | 12 | progress reports submitted to the MM with respect to the # of new RDP Housing units provided by the PDoHS | 3 progress reports submitte d to the MM with respect to the # of new RDP Housing units provided by the PDoHS | 3 | Achieved | None | None | Copies of monthly progress reports submitted to the MM | Achieved POE provided for review |
| Project Manage ment | Project Manageme nt | Number of Capital projects (infrastructure) completed in terms of agreed WSIG funding by 30 June 2025. | Rw25- 2022 | ED:TS | 1.6. | Incl. | NEW | 2 Capital projects (infrastruct ure) completed in terms of agreed WSIG funding by 30 June 2025. | N/A | N/A | N/A | N/A | N/A | Copies of practical completion certificates | N/A |

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------------|---------------------------|---|---------------|----------------|-----------------|-----------------------------------|---------------------|--|--|-----------------------------|-----------------|---|--|---|-----------------------|
| | | | | | | (Input Indicat or) | | | | | | | | | |
| Project Manage ment | Project Manageme nt | Number of Capital projects (infrastructure) completed in terms of agreed MIG Funding. | Rw25- 2022 | ED:TS | 1.7. | Incl. | 16 | 6 Capital projects (infrastruct ure) completed in terms of agreed MIG Funding. | N/A | N/A | N/A | N/A | N/A | Copies of practical completion certificates | N/A |
| Service Delivery | Project Manageme nt | % of expenditure of Capital projects in terms of budget excl., NDM funded projects by 30 June 2025 | Rw25- 2022 | ED:TS | 1.8. | 53 420 | 100% | 100% expenditure of Capital projects in terms of budget excl., NDM funded projects | 25% expendit ure of Capital projects in terms of budget excl., NDM funded projects | 7% | Not Achieved | WSIG: The subcontracting work appointed to local SMMEs for the construction of pipelaying faced challenges due to inadequate yellow plant machinery. this resulted in project delays, ultimately affecting budget expenditure. MIG: 1.Reconstruction of paved roads in Victor Khanye: delays in realignment of the design to the stormwater as-bult, as well as preparation of the master BOQ for phase 2 work packages 2.Development of Portion 6 Of The Farm Middelburg 231-IR | WSIG: Project 2: the main contractor procured the services of yellow fleet. Project 3: Tender advertised on the 5 September 2024 and closes 17 October 2024 MIG: 1.Reconstruction of paved roads in Victor Khanye: work packages issued 2.Development of Portion 6 Of The Farm Middelburg 231-IR Sanitation Services – Phase 2 – Lower Lying Areas: redesign of the outstanding works 3. Development of the 2nd Phase of the Landfill Site in Delmas: DWS conducted a site visit at the landfill site on the 5 | Monthly expenditure report | The target is not met |

| Strategic Thrust | Programm e | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|---------------|-----|-------------|----------------|-----------------|---|---------------------|------------------|--------------------|-----------------------------|-----------------|--|--|-----|----------------|
| | | | | | | | | | | | | Areas: redesign of the outstanding works 3. Development of the 2nd Phase of the Landfill Site in Delmas: No record of decision from DWS 4. Installation of High Mast Lights at Victor Khanye Local Municipality: long lead time from manufactures in delivering of materials 5.Drilling, Refurbishment of boreholes in rural areas and provision of elevated steel tanks: Completed 6. Provision of security boundary fencing for all municipal infrastructures: Delays in preparation of work packages | Lights at Victor Khanye Local Municipality: two mast installed 5.Drilling, Refurbishment of boreholes in rural areas and provision of elevated steel tanks: RFQ issued 6. Provision of security boundary fencing for all municipal infrastructures | | |

| Strategic Thrust | Programm e | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|---------------------------|--|---------------|----------------|-----------------|---|---------------------|--------------------------------|-------------------------------------|-----------------------------|-----------------|--|--|------------------------------|----------------------------|
| Service Delivery | Project Manageme nt | % spent on conditional MIG grant by 30 June 2025 | Rw06- 2022 | ED:TS | 1.9. | Incl. | 100% | spent on conditional MIG grant | 25% spent on condition al MIG grant | 6% | Not Achieved | 1.Reconstruction of paved roads in Victor Khanye: delays in realignment of the design to the stormwater as-bult, as well as preparation of the master BOQ for phase 2 work packages 2.Development of Portion 6 Of The Farm Middelburg 231-IR Sanitation Services – Phase 2 – Lower Lying Areas: redesign of the outstanding works 3. Development of the 2nd Phase of the Landfill Site in Delmas: No record of decision from DWS 4. Installation of High Mast Lights at Victor Khanye Local Municipality: long lead time from manufactures in delivering of materials 5.Drilling, Refurbishment of boreholes in rural areas and provision of elevated steel tanks: Completed 6. Provision of security boundary fencing for all municipal infrastructures: Delays in preparation of work packages | 1. Reconstruction of paved roads in Victor Khanye: work packages issued 2. Development of Portion 6 Of The Farm Middelburg 231-IR Sanitation Services – Phase 2 – Lower Lying Areas: redesign of the outstanding works 3. Development of the 2nd Phase of the Landfill Site in Delmas: DWS conducted a site visit at the landfill site on the 5 September 2024 4. Installation of High Mast Lights at Victor Khanye Local Municipality: two mast installed 5. Drilling, Refurbishment of boreholes in rural areas and provision of elevated steel tanks: RFQ issued 6. Provision of security boundary fencing for all municipal infrastructures: | MIG expenditure report | The target is not achieved |

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|---------------------------|--|---------------|----------------|-----------------|--|---------------------|---|---|-----------------------------|-----------------|---|---|--|---------------------|
| Service Delivery | Project Manageme nt | % spent on conditional WSIG grant by 30 June 2025. | Rw06- 2022 | ED:TS | 1.1.0 | Incl. | 100% | 100% spent on conditional WSIG grant | 25% spent on condition al WSIG grant | 9% | Not Achieved | The sub-contracting work appointed to local SMMEs for the construction of pipelaying faced challenges due to inadequate yellow plant machinery. this resulted in project delays, ultimately affecting budget expenditure. | Project 2: the main contractor procured the services of yellow fleet. Project 3: Tender advertised on the 5 September 2024 and closes 17 October 2024 | WSIG expenditure Report | Target not reached |
| | | % of new Capital projects started on time In terms of the appointment of consultants / contractors excluding NDM funded projects by 30 Sept 2024 | Rw06- 2022 | MM | 1.1.1 | Incl. | 100% | 100% new Capital projects started on time In terms of the appointmen t of consultants / contractors excluding NDM funded projects | 100% new Capital projects started on time In terms of the appointm ent of consultan ts / contracto rs excluding NDM funded projects | 50% | Not Achieved | 2. Development of Portion 6 Of The Farm Middelburg 231-IR Sanitation Services – Phase 2 – Lower Lying Areas: Project re- registration and design due hard rock refusal requiring alternative methods 3. Development of the 2nd Phase of the Landfill Site in Delmas: Detailed design report submitted to DWS- awaiting feedback from DWS 6. Provision of Civil Engineering and Construction of Water Related Infrastructure in Reducing the Non-Revenue Water in Sundra and Ellof- Project 3: Project 3: Delays completion of detailed design | 2. Development of Portion 6 Of The Farm Middelburg 231-IR Sanitation Services – Phase 2 – Lower Lying Areas: Project re- registration and design due hard rock refusal requiring alternative methods 3. Development of the 2nd Phase of the Landfill Site in Delmas: Detailed design report submitted to DWS- awaiting feedback from DWS 6. Provision of Civil Engineering and Construction of Water Related Infrastructure in Reducing the Non-Revenue Water in Sundra and Ellof- Project 3: Project 3: Tender advertised on the 5 September 2024 and closes 17 October 2024 | Copies of the individual project appointmen t letters in terms of consultants /contractors | Target not achieved |

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|------------------------------------|---|---------------|----------------|-----------------|--|---------------------|---|--|-----------------------------|-----------------|------------|-------------------|--|---|
| Service Delivery | Improved community awareness | Number of community awareness campaigns held in terms of waste management per quarter | Wr02- 2022 | ED:SS | 1.1.2 | In house | 3 | 3 community awareness campaigns held in terms of waste manageme nt | 1 communi ty awarene ss campaig ns held in terms of waste manage ment | 1 | Achieved | None | None | Close-out report for each campaign, pictures and attendance registers. | Target achieved POE was provided |
| | Waste removal | Number of times refuse collection services rendered per week at Ward 1,2,3,4,5,6,7,8 and 9 (GKPI) | Wr01- 2022 | ED:SS | 1.1.3 | 14 672 | | 52 weekly reports on refuse collection services rendered per week at Ward 1, 2, 3, 4, 5, 6, 7, 8 and 9 | 13 weekly reports on refuse collection services rendered per week at Ward 1, 2, 3, 4, 5, 6, 7, 8 and 9 | 13 | Achieved | None | None | Refuse collection schedule and signed refuse collection monthly reports | Target achieved POE was provided |
| Service Delivery | Electricity | % of new households connections with basic levels of electricity as per received applications by 30 June 2025 (GKPI) (excluding Eskom licenced areas) | Es02- 2022 | ED:TS | 1.1.4 | In house | 16 066 | 100% of new households connection s with basic levels of electricity as per received application s | N/A | N/A | N/A | N/A | N/A | Register of Work- Orders and Connection Booklets | N/A |

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|-----------------------------|---|--------------------|----------------|-----------------|---|---------------------|---|---|-----------------------------|-----------------|------------|-------------------|---|---|
| Service Delivery | Electricity | Electricity Master Plan developed and submitted to Council by 30 June 2025 | Es10- 2022 | ED:TS | 1.1.5 | DBSA | 0 | 1 Electricity Master Plan developed and submitted to Council | N/A | N/A | N/A | N/A | N/A | Copy of Electricity Master Plan & Council Resolution | N/A |
| | | Number of monthly reports on customer disconnections conducted due to electricity tempering submitted to MM | Es10- 2022 | ED:TS | 1.1.6 | In house | 4 | 12 monthly reports on customer disconnecti ons conducted due to electricity tempering submitted to MM | 3 monthly reports on customer disconne ctions conducte d due to electricity temperin g submitte d to MM | 3 | Achieved | None | None | Monthly Reports submitted to the MM | Target achieved |
| Service Delivery | Roads | Number of KMs of surfaced roads constructed by 30 June 2025 | Rsw0 2- 2022 | ED:TS | 1.1.7 | Incl. | 4.5km | 1,2KM of surfaced roads constructed by 30 June 2025. | N/A | N/A | N/A | N/A | N/A | Completion /practical completion certificates | N/A |
| | Roads and Storm Water | Number of monthly reports of potholes patched submitted to the MM | Rsw0 7- 2022 | ED:TS | 1.1.8 | In house | 12 | 12 reports of potholes patched submitted to the MM | 3 reports of potholes patched submitte d to the MM | 3 | Achieved | None | None | Monthly pothole patching report submitted to the MM with Photograph | Target achieved POE was provided |

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|-----------------------------|---|--------------------|----------------|-----------------|---|---------------------|--|--|-----------------------------|-----------------|--|--|---|---|
| Service Delivery | Roads and Storm Water | Number of monthly reports on Road Maintenance submitted to the MM | Rsw0 6- 2022 | ED:TS | 1.1.9 | In house | 12 | 12 reports on Road Maintenanc e submitted to the MM | 3 reports on Road Maintena nce submitte d to the MM | 3 | Achieved | None | None | Copy of monthly reports on Road Maintenanc e | Target achieved POE was provided |
| | | Number of monthly reports of storm water drainage systems cleaned & submitted to the MM | Rsw1 0- 2022 | ED:TS | 1.2.0 | In house | 12 | 12 reports of storm water drainage systems cleaned & submitted to the MM | 3 reports of storm water drainage systems cleaned & submitte d to the MM | 3 | Achieved | None | None | Monthly storm water draining systems cleaned reports submitted to the MM | Target achieved POE was provided |
| | Disaster Manageme nt | % availability of emergency response vehicles per quarter to comply to the codes of practice (SANS 10090) | Dm02 -2022 | ED:SS | 1.2.1 | 1 400 | 82% | 80% availability of emergency response vehicles quarter to comply to the codes of practice (SANS 10090) | 80% availabilit y of emergen cy response vehicles quarter to comply to the codes of practice (SANS 10090) | 66% | Not Achieved | Slow turnaround times for receiving orders from Supply Chain cause a delay in emergency vehicle repairs. | SCM process need to prioritize emergency services maintenance and repair requests | Copies of quarterly statistics register | Target not achieved |

| Strategic Thrust | Programm e | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|----------------------------|--|---------------|----------------|-----------------|---|---------------------|--|---|-----------------------------|-----------------|---|-------------------|--|--|
| Service Delivery | Disaster Manageme nt | % response time normal hours (5 min) with respect to the request for emergency services received per month to vehicles out the gate | Dm07 -2022 | ED:SS | 1.2.2 | In house | 91% | 80% response time normal hours (5 min) with respect to the request for emergency services received | 80% response time normal hours (5 min) with respect to the request for emergen cy services received | 82% | Achieved | Response times based on amount of emergency calls received | None | Copies of monthly statistics register | Target over achieved POE was provided |
| | | % response time after hours (10 min) with respect to the request for emergency services received per month to vehicles out the gate | Dm07 -2022 | ED:SS | 1.2.3 | In house | 86% | 85% response time after hours (10 min) with respect to the request for emergency services received | 85% response time after hours (10 min) with respect to the request for emergen cy services received | 85% | Achieved | Response times based on amount of emergency calls received | None | Copies of monthly statistics register | Target achieved POE was provided |

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|----------------------------|--|---------------|----------------|-----------------|---|---------------------|---|---|-----------------------------|-----------------|------------|-------------------|--|--|
| Service Delivery | Disaster Manageme nt | Number of community awareness programmes conducted per quarter with respect to emergency / disaster risk awareness | Dm07 -2022 | ED:SS | 1.2.4 | 0 | 9 | d community awareness programme s conducted with respect to emergency / disaster risk | 1 communi ty awarene ss program mes conducte d with respect to emergen cy / disaster risk | 1 | Not Achieved | None | None | Copy of close-out report with photograph s and attendance registers. | Attendance register and photograph s are not attached as per the means of verification |

| Strategic Thrust | Programm e | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|---------------|---|---------------|----------------|-----------------|---|---------------------|--|---|-----------------------------|-----------------|--|---|--|---|
| Service Delivery | Indigent | Number of new households earning less than R4220 per month provided with access to free basic services by 30 June 2025 (GKPI) | Rw04- 2022 | CFO | 1.2.5 | 0 | 5 465 | 500 new households earning less than R4220 per month provided with access to free basic services | 125 new househol ds earning less than R4220 per month provided with access to free basic services | 1171 | Achieved | In the first quarter of the year, a significant number of indigents have reached the expiration of their status, which has contributed to a noticeable increase in new applications. This influx is largely attributed to the implementation of credit control measures, specifically the blocking of prepaid electricity meters. As a result, many households have sought to reapply for indigent status to regain access to the free basic services. | A key corrective measure to address the issue of indigent status expirations and the influx of applications would be to implement a proactive renewal and notification system. This system could notify beneficiaries 60 to 90 days prior to the expiration of their indigent status, allowing them ample time to reapply without disruption to their services. Additionally, providing workshops or community outreach initiatives to educate residents on the reapplication process and the impact of credit control measures like the blocking of prepaid electricity meters can help ensure that indigent households are well-informed and prepared to maintain their benefits. This would reduce the sudden surge of applications and ensure continuity of service for eligible residents. | Copy of a list of households provided with FBS | Over achieved POE was provided |

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|-------------------------|--|--------------------|----------------|-----------------|---|---------------------|--|--|-----------------------------|-----------------|---|-------------------|---|---|
| Service Delivery | Community Upliftment | Number of initiatives focused on improving the life of designated groups by 30 June 2025 | Vg03- 2022 | ММ | 1.2.6 | 5 000 | 6 | 3 initiatives focused on improving the life of designated groups | 1 initiatives focused on improvin g the life of designat ed groups | 3 | Achieved | Assistance was sort from municipal partners and some of the initiatives were then achieved through partnerships | None | Copy of close-out reports for each initiative | Target achieved POE was provided |
| | | Number of learners provided with financial support (Mayoral community programme) by 31 March 2025 | Led 34- 2022 | MM | 1.2.7 | 600 | 78 | 80 learners provided with financial support (Mayoral community programme) | N/A | N/A | N/A | N/A | N/A | Copies of successful learner application s and report on Registratio n Fee Assistance Fund allocation and Copy of close-out reports | N/A |
| | Community Upliftment | Number of Matric Excellence Awards held by 31 March 2025 | Led 34- 2022 | MM | 1.2.8 | 700 | New | 1 Matric Excellence Awards held | N/A | N/A | N/A | N/A | N/A | Copy of a closeout report for the awards inclusive of photograph s and attendance registers. | N/A |

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|---|---|----------------------|----------------|-----------------|---|---------------------|---|--|-----------------------------|-----------------|---|-------------------|---|---|
| Service Delivery | Environme ntal Protection | Number of trees planted in public and private spaces per quarter | Wr13- 2020 | ED:SS | 1.2.9 | 75 | 0 | 50 trees planted in public and private spaces | N/A | N/A | N/A | N/A | N/A | Copy of close out reports, inclusive of photograph | N/A |
| | Parks | Number of main municipal intersections with ornamental structures maintained per month | Cs 03- 2022 | ED:SS | 1.3.0 | In house | 15 | 12 main municipal intersection s with ornamental structures maintained | 3 main municipal intersecti ons with ornament al structure s maintain ed | 3 | Achieved | None | None | Copy of close out reports, inclusive of photograph s | Target achieved POE was provided |
| | Youth | Number of Youth Imbizo held by 30 June 2025 | Pa27- 2022 | ED:SS | 1.3.1 | 1 200 | 3 | 2 Youth Imbizo held | 1 Youth Imbizo held | 1 | Achieved | None | None | Copy of close-out reports for each Imbizo held inclusive of the attendance registers | Target achieved POE was provided |
| Service Delivery | Mainstream Disability and Gender | Number of events scheduled and held in terms of mainstreaming of gender (man and woman & LGBTQI+), disabled, elderly and children by 30 June 2025 | Vg 01- 05 2022 | ED:SS | 1.3.2 | 550 | 11 | 6 events scheduled and held in terms of mainstreami ng of gender (man and woman & LGBTQI+), disabled, elderly and children | 2 events scheduled and held in terms of mainstrea ming of gender (man and woman & LGBTQI+) , disabled, elderly and children | 4 | Achieved | - Collaboration with Department of Health - There was a LGBQI Awareness Campaign (06 September 2024) - Collaboration the Office of the Premier - There was a Women empowerment workshop (12 -13 August 2024) | None | Copy of close-out reports for each event inclusive of the, photograph s and attendance registers. | Target achieved POE was provided |

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|---------------|--|----------------|----------------|-----------------|-----------------------------------|---------------------|--|--|-----------------------------|-----------------|--|---|--|--------------------|
| | V 11 | | 1 105 | ED 00 | 100 | (Input Indicat or) | | | | | | N. | N. | | |
| Service Delivery | Youth | Number of educational initiatives implemented in terms of the Youth by 30 June 2025 | Led35 -2022 | ED:SS | 1.3.3 | 600 | 6 | 6 educational initiatives implemente d in terms of the Youth | educatio nal initiative impleme nted in terms of the Youth | 1 | Achieved | None | None | Copy of close-out reports for each initiative inclusive of photograph s and Attendance Registers | Achieved |
| Service Delivery | Youth | Number of Sports and Arts and Culture events held by 30 June 2025 | Ts07- 2022 | ED:SS | 1.3.4 | 900 | 2 | 4 Sports and Arts and Culture events held | N/A | N/A | N/A | N/A | N/A | Copy of close-out reports for each event, inclusive of photograph s and attendance Registers. | N/A |
| Service Delivery | Libraries | Number of community members utilizing the library facilities monthly | Ls03- 2022 | ED:SS | 1.3.5 | In house | 11831 | 20 000 community members utilizing the library facilities | 5 000 communi ty members utilizing the library facilities | 11452 | Achieved | Libraries received lots of users using the internet for research, applying for jobs, sending emails, making photocopies etc. Many learners also came to the library for school projects | The use of libraries depend on user needs and therefore beyond the control of the library | Copies of monthly summary of the statistics register | achieved |
| | | Number of library awareness campaigns conducted per quarter | | ED:SS | 1.3.6 | 0 | New | 4 library awareness campaigns conducted | 1 library awarene ss campaig ns conducte d | 1 | Achieved | None | None | Copy of close-out report for each campaign conducted, inclusive of attendance registers | Target Achieved |

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|---|---|---------------|----------------|-----------------|--|---------------------|--|---|-----------------------------|-----------------|---|---|---|---|
| Service Delivery | Environme ntal Protection | Number of air quality education and awareness campaigns conducted by 30 June 2025 | Wr10- 2020 | ED:SS | 1.3.7 | In house | New | 3 air quality education and awareness campaigns conducted | 1 air quality educatio n and awarene ss campaig ns conducte d | 1 | Achieved | None | None | Copy of close-out reports for each campaign conducted, inclusive of Attendance Registers. | Target achieved |
| Service Delivery | Environme ntal Protection (Air Quality Manageme nt Plan) | Number of compliance inspections conducted to monitor facility performance in terms of Air Quality Act by 30 June 2025 | Wr10- 2020 | ED:SS | 1.3.8 | In house | New | 4 compliance inspections conducted to monitor facility performanc e in terms of Air Quality Act | 1 complian ce inspection ns conducte d to monitor facility performa nce in terms of Air Quality Act | 1 | Achieved | None | None | Copy of inspections report and Attendance Registers | Target achieved |
| | | Number of the state of ambient air quality reports submitted to HHS Portfolio Committee per quarter | | ED:SS | 1.3.9 | In house | New | 4 state of ambient air quality reports submitted to HHS Portfolio Committee | 1 state of ambient air quality reports submitte d to HHS Portfolio Committe e | 0 | Not Achieved | Consolidated reports from DFFE have not been received for the quarter under review due to service level agreement that expired between DFFE and the service provider. | Quarterly ambient air quality monitoring reports from DARDLEA will be uploaded from 2nd quarter and submit to HSS | An extract of a copy of HSS Monthly Report | Actual performanc e is less than the Target |

| Strategic Thrust | Programm e | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achievem ent | Challenges | Corrective Action | POE | IA Comments |
|---------------------|------------------------|---|---------------|----------------|-----------------|---|---------------------|---|---|-----------------------------|-----------------|---|-------------------|---|--------------------|
| Service Delivery | Mainstream HIV/AIDS | Number of HIV/AID's educational awareness campaigns held each quarter | Vg06- 2022 | ED:SS | 1.4.0 | In house | 5 | 4 HIV/AID's educational awareness campaigns held | 1 HIV/AID' s educatio nal awarene ss campaig ns held | 2 | Achieved | The additional event was in partnership and funded by the Department of Health | None | Copy of close-out report of each campaign held, inclusive of Attendance Registers | Target met |
| Service Delivery | All Services | Number of service delivery reports compiled and submitted to the MM per quarter | As01- 2022 | MM | 1.4.1 | In house | New | 4 service delivery reports compiled and submitted to the MM | 1 service delivery reports compiled and submitte d to the MM | 1 | Achieved | None | None | Copy of signed service delivery reports | Target achieved |

KEY PERFORMANCE AREA 2: Financial Viability and Finance Management

The overall score for this KPA is 68% for the quarter under review.

| KPI Status | KPA 2: Financial viability and Finance Management |
|--------------------------------------|---|
| Target Met (as planned and exceeded) | 21 |
| Target Not Met (below planned) | 10 |
| Total | 31 |
| % Targets met | 68% |
| % Targets not met | 32% |

Performance Highlights for 2024/25 Quarter (1)

| Challenges | Measures taken to improve performance |
|--|--|
| | |
| 33% amounts of households billed collected; | |
| A payment rate of 33% for residential properties may be attributed to several factors, with the primary reason being the financial difficulties faced by households. Many residents may be experiencing unemployment, reduced income, or economic instability, making it challenging for them to prioritize municipal bill payments. | The culture of payment has not been a norm with customers and the implementation of credit control with regards to the blocking of prepaid meters has pushed the customers to start paying for their current account or apply to be an indigent. The customers who have not been paying have also been handed over to debt collectors to for the recovery of arrear debt. Customers also have an option to apply for the debt incentive scheme which the municipality is currently running to ensure that their debt is written off. |
| 2. There was a 79% payment rate of businesses for the first quarter; | |
| The decrease in the payment rate for businesses is due to ongoing disputes between businesses and the municipality regarding electricity billing. | The municipality will continue to bill time of use on businesses which operate for 24hours and will communicate with the businesses to ensure that they understand the technical aspects as to how the municipality arrived to the decision |
| 3. Only 89% of the approved compliant invoices were paid within the 30 days legislated timeframe; | |
| This was due to cash flow constraints. | To ensure that the cash flow situation of the municipality improves, there is full implementation of credit control policy and revenue enhancement strategy. |

4. The Technical Services department (service delivery) exceeded the legislated overtime levels;

This is due to the ageing infrastructure i.e. water, sanitation and electricity that breaks constantly.

- The refurbishment of the ageing infrastructure is being implemented in phases.

KPA 2: FINANCIAL VIABILITY AND FINANCE MANAGEMENT

Strategic Goal 3: Improved compliance to MFMA and VKLM policy Framework

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|------------------------|-----------------------------|---|-------------------|----------------|-----------------|---|---------------------|---|--|-----------------------------|-----------------|--|--|---|---|
| Financial Viability | Financial Manage ment | Approval of MTREF Budget by 31 May 2025 | Mf22 - 2022 | CFO | 2.1 | In house | 1 | 1 Approval of MTREF Budget | N/A | N/A | N/A | N/A | N/A | Copy of the approved Final Annual budget | N/A |
| | | % of amounts of households billed collected per quarter | Mf05 - 2022 | CFO | 2.2 | In house | 30.50% | 75% amounts of househol ds billed collected | 75% amounts of househol ds billed collected | 33% | Not Achieved | A payment rate of 33% for residential properties may be attributed to several factors, with the primary reason being the financial difficulties faced by households. Many residents may be experiencing unemployment, reduced income, or economic instability, making it challenging for them to prioritize municipal bill payments. | The culture of payment has not been a norm with customers and the implementation of credit control with regards to the blocking of prepaid meters has pushed the customers to start paying for their current account or apply to be an indigent. The customers who have not been paying have also been handed over to debt collectors to for the recovery of arrear debt. Customers also have an option to apply for the debt incentive scheme which the municipality is currently running to ensure that their debt is written off. | Copies of the Credit Control and debt collection report | Actual performanc e (33%) is below the target (75%) |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-----------------------------|-----------------------------|---|-------------------|----------------|-----------------|---|---------------------|---|--|-----------------------------|-----------------|---|---|--|---|
| Financial Viability | Financial Manage ment | % of amounts of businesses billed collected per quarter | Mf05 - 2022 | CFO | 2.3 | In house | 94% | 85% amounts of business es billed collected | 85% amounts of business es billed collected | 79% | Not Achieved | The decrease in the payment rate for businesses is due to ongoing disputes between businesses and the municipality regarding electricity billing. | The municipality will continue to bill time of use on businesses which operate for 24hours and will communicate with the businesses to ensure that they understand the technical aspects as to how the municipality arrived to the decision | Copies of the Credit Control and debt collection report | Target not met |
| | | Unaudited Annual Financial Statements (AFS) submitted on or before 31 Aug 2024 | Mf19 - 2022 | CFO | 2.4 | 3 000 | 1 | 1 Unaudite d Annual Financial Statemen ts (AFS) submitte d to AGSA | 1 Unaudite d Annual Financial Statemen ts (AFS) submitte d to AGSA | 1 | Achieved | None | None | Copy of the Unaudited AFS & Proof of submission to AG | Target Achieved |
| Financial Manage ment | Financial Manage ment | Number of interim financial statements prepared and submitted to the MM by 28 February 2025 | Mf19 - 2022 | CFO | 2.5 | 3 000 | 0 | 1 interim financial statemen ts prepared and submitte d to the MM | N/A | N/A | N/A | N/A | N/A | Interim financial statements & acknowled gement of receipt by the MM | N/A |
| | | Number of monthly section 71 MFMA reports submitted to Mayoral committee within legislative timeframes | Mf16 - 2022 | CFO | 2.6 | In house | 12 | 12 section 71 MFMA reports submitte d to Mayoral committe e | 3 section 71 MFMA reports submitte d to Mayoral committe e | 3 | Achieved | None | None | Copy of monthly section 71 report | Achieved POE attached for review |

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-----------------------------|-----------------------------|--|-------------------|----------------|-----------------|---|---------------------|---|---|-----------------------------|-----------------|------------------------|---|--|---|
| Financial Manage ment | Financial Manage ment | Midyear section 72 MFMA report submitted to Executive Mayor within legislative timeframes by 25 January 2025 | Mf17 - 2022 | CFO | 2.7 | In house | 1 | 1 Midyear section 72 MFMA report submitte d to Executiv e Mayor | N/A | N/A | N/A | N/A | N/A | Copy of the Section 72 Report | N/A |
| | | Number of quarterly section 52(d) MFMA reports submitted to Mayoral committee within legislative timeframes | Mf17 - 2022 | CFO | 2.8 | In house | 4 | 4 section 52(d) MFMA reports submitte d to Mayoral committe e | 1 section 52(d) MFMA reports submitte d to Mayoral committe e | 1 | Achieved | None | None | Copy of the quarterly section 52(d) report | Target achieved POE was provided |
| | | % of approved (compliant) invoices paid within 30 days | | CFO | 2.9 | In house | 92% | approved (complia nt) invoices paid | 100% approved (complia nt) invoices paid | 89.15% | Not Achieved | Financial difficulties | Full implementation of credit control policy and revenue enhancement strategy | Copy of the monthly creditors reconciliati on report | Target not met |
| Financial manage ment | Financial Manage ment | % spent on conditional FMG grant per quarter | Mf15 - 2022 | CFO | 2.1.0 | 1 800 | 100% | 100% spent on condition al FMG grant | 25% spent on condition al FMG grant | 26% | Achieved | None | None | Copies of the monthly FMG Report | Target achieved POE was provided |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-----------------------------|-----------------------------|---|-------------------|----------------|-----------------|--|---------------------|---|---|-----------------------------|-----------------|--|---|---|---|
| | | | | | | t R'000 (Input Indicat or) | | | | | | | | | |
| Financial manage ment | Financial Manage ment | % Debt coverage ratio (GKPI) by 30 September 2024 | Mf15 - 2022 | CFO | 2.1.1 | In house | 18% | 45% Debt coverage ratio | 45% Debt coverage ratio | 1.65% | Not Achieved | The debt coverage is still less than 45% | No Corrective major however as it is clear that is less than 45% but the municipality is not at liberty for borrowing since the cash flow does not look good. | Statement of financial position and statement of financial performanc e | The Variance Reason does not show a clear analysis of the municipality did not achieve and/or overachiev ed as planned. |
| | | % outstanding service debtors to revenue (GKPI) by 30 September 2024 | | CFO | 2.1.2 | In house | 32% | 68% Outstandi ng service debtors to revenue | 68% Outstandi ng service debtors to revenue | 49% | Not Achieved | The credit control report for the month of September 2024 had a challenge on indigent billing because the majority of them were expired hence its having an impact on collection rate. | The revenue unit must notify all indigent expires to come and renew their indigent application | Statement of Financial Position, Statement of Financial Performanc e, Notes to the AFS | Target not achieved |
| | | Cost coverage ratio (GKPI) by 30 September 2024 | | CFO | 2.1.3 | In house | 0.26 | 1:3 Cost coverage ratio | 1:3 Cost coverage ratio | 0.29 | Not Achieved | The variance is less that 1 month which should have been the norm. as a result of less cash available in the bank at the year end. | The implementation of credit control and debt collection process will make the municipality to reduce debt and have available balance at year end | Statement of Financial Position, Statement of Financial Performanc e, Notes to the AFS | Target not achieved |

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-----------------------------|-----------------------------------|---|-------------------|----------------|-----------------|--|---------------------|---|---|--------------------|-----------------|------------|-------------------|---|---|
| Illiust | ille | | LIIIK | IVIIVI/ED | Kei No | Budge | Daseille | rarget | rarget | Perf. | ment | | | | Comments |
| | | | | | | t R'000 (Input Indicat or) | | | | | | | | | |
| Financial manage ment | Supply Chain Manage ment | Number of days taken to conclude and award tenders above R300 000 by 30 June 2025 | SC0 4- 2022 | CFO | 2.1.4 | In house | 67,5 | <90 days taken to conclude and award tenders above R300 000 | <90 days taken to conclude and award tenders above R300 000 | 90 days | Achieved | None | None | Copy of the SCM Register | Target achieved POE was provided |
| | | Number of monthly deviation reports submitted to the Council (Total organisation) | SC0 1- 2022 | CFO | 2.1.5 | In house | 12 | 12 deviation reports submitte d to Council | 3 deviation reports submitte d to Council | 3 | Achieved | None | None | Copy of the quarterly SCM deviation report and Council Resolution. | Target achieved POE was provided |
| | | Number of monthly SCM reports submitted to Council | | CFO | 2.1.6 | In house | 12 | 12 SCM reports submitte d to Council | 3 SCM reports submitte d to Council. | 3 | Achieved | None | None | Copy of the monthly SCM report and Council Resolution | Target achieved POE was provided |
| | | Number of monthly UIFW reports submitted to the Council | | CFO | 2.1.7 | In house | 12 | 12 UIFW reports submitte d to Council | 3 UIFW reports submitte d to Council. | 3 | Achieved | None | None | Copy of UIFW Report and Council Resolution. | Target achieved POE was provided |
| Financial Manage ment | Asset Manage ment | Number of Asset verification reports submitted to Council by 31 March 2025. | As02 - 2022 | CFO | 2.1.8 | In house | | 2 Asset verificatio n reports submitte d to Council by 31 March 2025. | 1 Asset verificatio n report submitte d to Council by 30 Septemb er 2024. | 1 | Achieved | None | None | Copy of the asset verification reports and Council Resolution. | Target achieved POE was provided |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-----------------------------|---|--|-------------------|----------------|-----------------|-----------------------------------|---------------------|--|--|-----------------------------|-----------------|---------------------------------|--|--|---|
| | | | | | | R'000 (Input Indicat or) | | | | | | | | | |
| Financial Manage ment | Asset Manage ment | Fixed Asset Register updated per month. | As02 - 2022 | CFO | 2.1.9 | In house | New | Monthly update of the Fixed Asset Register | 3 Monthly update of the Fixed Asset Register | 3 | Achieved | None | None | Copy of the Fixed Assets Register | Target achieved POE was provided |
| Financial Manage ment | Improved Complian ce to Legislatio n & Policies (Financia | % spent of the total operational Budget per quarter | Mf15 - 2022 | CFO | 2.2.0 | In house | 82% | 95% spent of the total operation al Budget | 25% spent of the total operation al Budget | 21% | Not Achieved | Non-capturing of bulk invoices. | Copies of invoices must be requested while awaiting the originals. | Copy of the quarterly section 52(d) report | Not achieved |
| | Manage ment) | % spent on employee costs in terms of the total operational Budget per quarter | | CFO | 2.2.1 | In house | 34% | <34% spent on employe e costs in terms of the total operation al Budget | <34% spent on employe e costs in terms of the total operation al Budget | 5% | Achieved | None | None | Copy of the quarterly section 52(d) report | Target achieved |
| | | Number of monthly reports submitted to Council in terms of legislated overtime levels (Total Organisation) | | ED:CS | 2.2.2 | In house | 10 | reports submitte d to Council in terms of legislated overtime levels | 3 reports submitte d to Council in terms of legislated overtime levels | 3 | Achieved | None. | None. | Copies of monthly overtime report submitted to Council | Achieved |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-----------------------------|--|---|-------------------|----------------|-----------------|--|---------------------|--|--|-----------------------------|-----------------|------------|-------------------|--|----------------|
| Financial Manage ment | Improved Complian ce to Legislatio n & Policies (Financia I Manage ment) | % of employees exceeding legislated overtime levels stipulated as not more than (40) hours per month per employee (OMM) | Mf15 - 2022 | MM | 2.2.3 | In house | 0% | 0% employe es exceedin g legislated overtime levels stipulated as not more than (40) hours per month | 0% employe es exceedin g legislated overtime levels stipulated as not more than (40) hours per month | 0% | Achieved | None | None | Copies of approved financial overtime schedule | Achieved |
| | | % of employees exceeding legislated overtime levels stipulated as not more than (40) hours per month per employee (CS only) | | ED:CS | 2.2.4 | In house | 0% | 0% employe es exceedin g legislated overtime levels stipulated as not more than (40) hours per month | 0% employe es exceedin g legislated overtime levels stipulated as not more than (40) hours per month | 0% | Achieved | None. | None. | Copies of approved financial overtime schedule | Achieved |

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-----------------------------|--|---|-------------|----------------|-----------------|---|---------------------|---|---|-----------------------------|-----------------|------------|-------------------|--|----------------|
| Financial Manage ment | Improved Complian ce to Legislatio n & Policies (Financia I Manage ment) | % of employees exceeding legislated overtime levels stipulated as not more than (40) hours per month per employee (Finance only) | Mf15 - 2022 | CFO | 2.2.5 | Indicat or) In house | 2.75% | 0% employe es exceedin g legislated overtime levels stipulated as not more than (40) hours per | 0% employe es exceedin g legislated overtime levels stipulated as not more than (40) hours per | 0% | Achieved | None | None | Copies of approved financial overtime schedule | Achieved |
| Financial Manage ment | Improved Complian ce to Legislatio n & Policies (Financia I Manage ment) | % of employees exceeding legislated overtime levels stipulated as not more than (40) hours per month per employee (SS only) (excl., essential services) | Mf15 - 2022 | ED:SS | 2.2.6 | In house | 0.25% | month 0% employe es exceedin g legislated overtime levels stipulated as not more than (40) hours per month | month 0% employe es exceedin g legislated overtime levels stipulated as not more than (40) hours per month | 0% | Achieved | None | None | Copies of approved financial overtime schedule | achieved |

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-----------------------------|--|---|-------------------|----------------|-----------------|---------------------|---------------------|---|---|--------------------|-----------------|---|---|--|--|
| | | | | | | Budge t R'000 | | | | Perf. | | | | | |
| | | | | | | (Input Indicat | | | | | | | | | |
| | | | | | | or) | 10.0-01 | | | | | | | | |
| Financial Manage ment | Improved Complian ce to Legislatio n & Policies (Financia I Manage ment) | % of employees exceeding legislated overtime levels stipulated as not more than (45) hours per month per employee (SS only) (essential services) | Mf15 - 2022 | ED:SS | 2.2.7 | In house | 12.65% | 0% employe es exceedin g legislated overtime levels stipulated as not more than (45) hours per month (essential services) | 0% employe es exceedin g legislated overtime levels stipulated as not more than (45) hours per month (essential services) | 0% | Achieved | None | None | Copies of approved financial overtime schedule | Achieved |
| Financial Manage ment | Improved Complian ce to Legislatio n & Policies (Financia I Manage ment) | % of employees exceeding legislated overtime levels stipulated as not more than (40) hours per month per employee (TS) (excl., essential services) | Mf15 - 2022 | ED:TS | 2.2.8 | In house | 1.25% | 0% employe es exceedin g legislated overtime levels stipulated as not more than (40) hours per month | 0% employe es exceedin g legislated overtime levels stipulated as not more than (40) hours per month | 42% | Not Achieved | Due to water shortage, employees had to work more hours so that community get water frequency | Will improve on the next Quarter, and will rooted employees in order to reduce the overtime | Copies of approved financial overtime schedule | There are employees who exceeded legislated overtime hours |

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-----------------------|--|---|-------------------|----------------|-----------------|---|---------------------|---|--|-----------------------------|-----------------|---|---|--|--|
| Financial Manage ment | Improved Complian ce to Legislatio n & Policies (Financia I Manage ment) | % of employees exceeding legislated overtime levels stipulated as not more than (45) hours per month per employee (TS) (essential services) | Mf15 - 2022 | ED:TS | 2.2.9 | In house | 1.25% | 0% employe es exceedin g legislated overtime levels stipulated as not more than (45) hours per month (essential services) 12 road | 0% employe es exceedin g legislated overtime levels stipulated as not more than (45) hours per month (essential services) 3 road | 42% | Not Achieved | Due to water shortage, employees had to work more hours so that community get water frequency | Will improve on the next Quarter, and will rooted employees in order to reduce the overtime | Copies of approved financial overtime schedule | There are employees who exceeded legislated overtime hours |
| Manage ment | Manage ment & Revenue Enhance ment | traffic safety operations conducted per month | 2022 | EU.55 | 2.3.0 | house | 10 | traffic safety operation s conducte d | traffic safety operation s conducte d | S | Achieved | None | None | close up report for road traffic safety operations conducted inclusive of photograph s | Acrileved |
| | | Number of flammable liquids permits issued by 30 June 2025 | Mf02 - 2022 | ED:SS | 2.3.1 | In house | 35 | 34 flammabl e liquids permits issued | N/A | N/A | N/A | N/A | N/A | Copy of permits register | N/A |
| | | % of trade licenses issued as per approved applications by 30 June 2025 | | MM | 2.3.2 | In house | 7 | 100% trade licenses issued as per approved application s. | N/A | N/A | N/A | N/A | N/A | Copies of application register and copy of Trade license issued. | N/A |

40 | Page

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-----------------------------|--|---|--------------------|----------------|-----------------|--|---------------------|---|--|-----------------------------|-----------------|------------|-------------------|---|--|
| Financial Manage ment | Financial Manage ment & Revenue collection | Number of monthly reports on the implementation of credit control and debt collection policy submitted to Council | SCM 01- 2022 | CFO | 2.3.3 | In house | 4 | reports on the impleme ntation of credit control and debt collection policy submitte d to Council | 3 reports on the impleme ntation of credit control and debt collection policy submitte d to Council | 3 | Achieved | None | None | Copy of Monthly Credit Control Report and Council Resolution | Target achieved |
| | | Number of monthly reports submitted to Council on budget funding plan | | CFO | 2.3.4 | In house | New | reports submitte d to Council on budget funding plan | 3 monthly reports submitte d to Council on budget funding plan | 3 | Not Achieved | None | None | Copies of quarterly budget funding plan reports. | No proof of submission to Council as per the KPI |
| Financial Manage ment | Financial Manage ment & Revenue collection | Number of business licences verifications conducted bi- annually | Mf02 - 2022 | ММ | 2.3.5 | In house | New | 20 business licences verificatio ns conducte d | N/A | N/A | N/A | N/A | N/A | Register of businesses verified and a copy of a close-out report | N/A |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-----------------------------|--|---|-------------------|----------------|-----------------|---|---------------------|--|--|-----------------------------|-----------------|------------|-------------------|--|--------------------|
| Financial Manage ment | Improved Complian ce to Legislatio n & Policies (Financia I Manage ment) | Number of Bank reconciliation submitted to the Municipal Manager within 10 days after the end of the month' | Mf15 - 2022 | CFO | 2.3.6 | In house | New | 12 Bank reconcilia tions submitte d to the Municipal Manager | 3 Bank reconcilia tions submitte d to the Municipal Manager | 3 | Achieved | None | None | Bank reconciliati on and proof of submission | Achieved |
| | Financial Manage ment | Number of monthly reports produced and submitted to the MM on the usage of fuel | SC0 1- 2022 | CFO | 2.3.7 | In house | New | reports produced and submitte d to the MM on the usage of fuel | 3 reports produced and submitte d to the MM on the usage of fuel | 3 | Achieved | None | None | Copy of signed fuel usage report | Target Achieved |

KEY PERFORMANCE AREA 3: Institutional Development and Transformation

The overall score for this KPA is 94%% for the quarter under review.

| KPI Status | KPA 3: Institutional Development and Transformation |
|--------------------------------------|--|
| Target Met (as planned and exceeded) | 15 |
| Target Not Met (below planned) | 1 |
| Total | 16 |
| % Targets met | 94%% |
| % Targets not met | 6% |

| Challenges | Measures taken to improve performance |
|---|---|
| Only 75% of Internal Audit findings in terms of ICT were resolved; | |
| The current BCP/DR is inadequate located at the remote site, Water treatment whoever the ICT upgrade will address this variance of 25%. | Through, ICT Upgrade infrastructure and Disaster Recovery as Service provision by the Nkangala District Municipality which are waiting for the completion ICT upgrade by VKLM through SCM processes and anticipate that for completion end of Q3. |

KPA 3: INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION

Strategic Goal 4: Improved efficiency and effectiveness of the Municipal Administration

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-------------------------------|---------------------------------------|---|---------------|----------------|-----------------|---|---------------------|---|---|-----------------------------|-----------------|------------|-------------------|---|--------------------|
| Operatio nal Efficiency | Performa nce Manage ment | % of KPIs attaining organisational targets by 30 June 2025 (Total organisation) | Pm02- 2022 | MM | 3.1 | In house | 56% | 100% KPIs attaining organisat ional targets | 75% KPIs attaining organisat ional targets | 80% | Achieved | None | None | Copies of the quarterly consolidate d performanc e report | Target Achieved |
| | Organisa tional Develop ment | Submit a final report to the MM after conducting an employee satisfaction survey by 30 June 2025 | Eq1- 2022 | ED:CS | 3.2 | In house | 1 | 1 final report submitte d the MM after conductin g an employe e satisfacti on | N/A | N/A | N/A | N/A | N/A | Copy of final satisfaction survey evaluation report acknowled ged by MM | N/A |
| | | 2024/25 Calendar of events developed and approved by Council by 30 June 2025 | Pa18- 2022 | MM | 3.3 | In house | 1 | 1 Calendar of events develope d and approved by Council | N/A | N/A | N/A | N/A | N/A | Approved calendar of events and Council Resolution | N/A |

44 | Page

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|---------------------------------------|---------------------------------------|--|---------------|----------------|-----------------|---|---------------------|---|--------------------|-----------------------------|-----------------|------------|-------------------|--|----------------|
| Operatio nal Efficiency | Organisa tional Develop ment | % of employees from previously disadvantaged groups appointed in the three highest Task Grades of management as per the approved 2023-25 EE plan (GKPI) by 30 June 2025. | Eq2- 2022 | ED:CS | 3.4 | In house | 85% | 85% employe es from previousl y disadvant aged groups appointe d in the three highest Task Grades of manage ment | N/A | N/A | N/A | N/A | N/A | Copies of appointmen t letters | N/A |
| Organisa tional Develop ment | Organisa tional Develop ment | % of budget spent implementing the Workplace Skills Plan (GKPI) by 30 June 2025 | Ts06- 2022 | ED:CS | 3.5 | 1 300 | 70% | 100% budget spent impleme nting the Workplac e Skills Plan | N/A | N/A | N/A | N/A | N/A | Copy of an extract from a Section 52 (d) report | N/A |
| | | Number of bi-annual reports submitted to the MM on disciplinary matters reported and finalized by 30 June 2025. | Pa36- 2022 | ED:CS | 3.6 | In house | 100% | 2 reports submitte d to the MM on disciplina ry matters reported and finalized by 30 June 2025. | N/A | N/A | N/A | N/A | N/A | Reports submitted to the MM on disciplinary matters reported and finalized | N/A |

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-------------------------------|---------------------------------------|---|---------------------|----------------|-----------------|---|---------------------|--|---|-----------------------------|-----------------|---|---|---|--|
| Operatio nal Efficiency | Organisa tional Develop ment | % of Internal Audit findings in terms of ICT resolved by 30 June 2025. | Pa13- 2022 | ММ | 3.7 | In house | 57.75% | 100% Internal Audit findings in terms of ICT resolved | 100% Internal Audit findings in terms of ICT resolved | 75% | Not Achieved | The current BCP/DR is inadequate located at the remote site, Water treatment whoever the ICT upgrade will address this variance of 25%. | Through, ICT Upgrade infrastructure and Disaster Recovery as Service provision by the Nkangala District Municipality which are waiting for the completion ICT upgrade by VKLM through SCM processes and anticipate that for completion end of Q3. | Copy of a follow-up on Internal Audit Report | Target not achieved, Internal audit findings are not fully implemente d |
| Operatio nal Efficiency | ICT | Microsoft 365 programme installed and implemented by 31 May 2025. | lt 02-08 2022 | MM | 3.8 | In house | New | Microsoft 365 program me installed and impleme nted by 31 May 2025. | N/A | N/A | N/A | N/A | N/A | Copy Software License | N/A |
| | | Number of ICT Steering Committee reports submitted to the MM per quarter | | MM | 3.9 | In house | 2 | 4 ICT Steering Committe e reports submitte d to the MM per quarter | 1 ICT Steering Committe e report submitte d to the MM per quarter | 1 | Achieved | None. | None. | ICT Steering Committee reports signed by the MM per Quarter | Achieved |

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-------------------------------|-------------------|--|--------------------|----------------|-----------------|---|---------------------|---|---|-----------------------------|-----------------|------------|-------------------|--|---|
| Operatio nal Efficiency | Legal Services | Number of quarterly reports on the status of municipal service level agreements approved by the MM by 30 June 2025 | SCM01 - 2022 | ED: CS | 3.1.0 | In house | 1 | 4 quarterly reports on the status of municipal service level agreeme nts approved by the MM | 1 quarterly report on the status of municipal service level agreeme nts approved by the MM | 1 | Achieved | None | None | Quarterly Reports on the status of municipal service level agreement s approved by the MM | Achieved target met |
| | Legal Services | Number of quarterly reports on the status of municipal legal cases that the municipality is involved in approved by the MM by 30 June 2025 | Mf15- 2022 | ED: CS | 3.1.1 | In house | 1 | 4 quarterly reports on the status of municipal legal cases that the municipal ity is involved in approved by the MM | 1 quarterly reports on the status of municipal legal cases that the municipal ity is involved in approved by the MM | 1 | Achieved | None | None | Quarterly reports on the status of municipal legal cases that the municipality is involved in approved by the MM | Target was achieved POE was provided |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|---------------------------------------|---------------------------------------|--|---------------|----------------|-----------------|---|---------------------|---|--|-----------------------------|-----------------|------------|-------------------|--|---|
| Organisa tional Develop ment | Organisa tional Develop ment | Review and submit organisational structure (aligned to the IDP and Budget) to Council for approval before June 2025 | Eq9- 2022 | ED:CS | 3.1.2 | In house | 1 | 1 Review and submit organisat ional structure (aligned to the IDP and Budget) to Council for approval | N/A | N/A | N/A | N/A | N/A | Copy of an approved annual organogra m by Council and Council Resolution | N/A |
| | | Number of monthly Human Capital reports submitted to Council by 30 June 2025. | Eq10- 2022 | ED:CS | 3.1.3 | In house | 12 | 12 staff Human Capital reports submitte d to Council | 3 staff Human Capital reports submitte d to Council | 3 | Achieved | None | None | Copies of Human Capital reports submitted to Council | Achieved POE was provided |
| Organisa tional Develop ment | Fleet Manage ment | Number of quarterly fleet management reports submitted and approved by the MM | Pa36- 2022 | ED:TS | 3.1.4 | In house | 4 | 4 fleet manage ment report submitte d and approved by the MM | 1 fleet manage ment report submitte d and approved by the MM | 1 | Achieved | None | None | Fleet manageme nt reports approved by the MM | Target achieved POE was provided |
| | Organisa tional Develop ment | Number of job descriptions report submitted and approved by the MM by 30 June 2025 | Eq12- 2022 | ED:CS | 3.1.5 | In house | 0 | 2 job descriptio ns reports submitted and approved by the MM | N/A | N/A | N/A | N/A | N/A | Copy of job description s report signed by the MM | N/A |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|---------------------------------------|---|---|----------------|----------------|-----------------|---|---------------------|--|---|-----------------------------|-----------------|------------|-------------------|---|---|
| Organisa tional Develop ment | Workplac e Skills Develop ment | Workplace Skills Plan (WSP) and Annual Training Report (ATR) submitted to LGSETA on due date 30 April 2024 | Ts04- 2022 | ED:CS | 3.1.6 | In house | 1 | 1 Workplac e Skills Plan (WSP) and Annual Training Report (ATR) submitte d to LGSETA | N/A | N/A | N/A | N/A | N/A | Copies of WSP and ATR submitted to the LG SETA | N/A |
| | | Number of quarterly training status reports submitted to the District | | ED:CS | 3.1.7 | In house | 4 | 4 Training status reports submitte d to the District | 1 Training status report submitte d to the District | 1 | Achieved | None | None | Copy of quarterly training status report submitted to the District | Achieved POE was provided |
| | | Number of skills audit conducted by 31st December 2024. | Pa 12- 2023 | ED:CS | 3.1.8 | COGT A | New | 1 Skills Audit conducte d by the 31st of Decembe r 2024 | N/A | N/A | N/A | N/A | N/A | Skills Audit Report | N/A |
| Organisa tional Develop ment | Workplac e Skills Develop ment | Number of employees trained per quarter in line with the approved 2024/25 WSP | Ts04- 2022 | ED:CS | 3.1.9 | 2 000 | 97 | 87 employee s trained per quarter in line with the approved 2024/25 WSP | employe es trained in line with the approved 2024/25 WSP | 22 | Achieved | None | None | Copies of the quarterly training report. submitted to the District | Achieved, POE is uploaded for review |

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|---------------------------------------|---------------------------------------|--|---------------|----------------|-----------------|--|---------------------|---|--|-----------------------------|-----------------|------------|-------------------|---|---|
| Organisa tional Develop ment | Workplac e Health and Safety | Number of monthly workplace inspections conducted and submitted to the MM | Oh06- 2022 | ED:CS | 3.2.0 | In house | 12 | 12 workplac e inspectio ns conducte d and submitte d to the MM | 3 workplac e inspectio ns conducte d and submitte d to the MM | 3 | Achieved | None | None | Copies of monthly inspection reports submitted to the MM | Achieved POE is provided for review |
| | | Number of quarterly SHE related reports submitted to the MM | | ED:CS | 3.2.1 | In house | 8 | 4 SHE related reports submitte d to the MM | 1 SHE related reports submitte d to the MM | 1 | Achieved | None | None | Copy of the quarterly SHE related reports submitted to the MM | Achieved, POE is provided for review |
| | | Number of employee wellness reports submitted to the MM per quarter | Oh05- 2022 | ED:CS | 3.2.2 | 900 | 114 | 4 employe e wellness reports submitte d to the MM | 1 employe e wellness reports submitte d to the MM | 1 | Achieved | None | None | Copy of the close-out report | Target achieved POE was provided |
| Organisa tional Develop ment | Labour Relations | Number of Local Labour Forum (LLF) meetings agendas processed every quarter as per approved Calendar of Events | Pa36- 2022 | ED:CS | 3.2.3 | In house | 2 | 4 Local Labour Forum (LLF) meetings agendas processe d | 1 Local Labour Forum (LLF) meetings agendas processe d | 1 | Achieved | None | None | Copy of the agenda signed by the Chairperso | Target achieved POE was provided |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-------------------------------|-----------------------------------|--|---------------|----------------|-----------------|---|---------------------|--|---|-----------------------------|-----------------|------------|-------------------|--|---|
| Operatio nal Efficiency | Performa nce Manage ment | 2024/25 Mid-year and 2023/24 Annual Performance Reviews of Section 56 & 54A employees conducted by the 31st of March 2025. | Pm06- 2022 | MM | 3.2.4 | 50 | 1 | 2024/25 Mid-year and 2023/24 Annual Performa nce Reviews of Section 56 & 54A employe es conducte d by the 31st of March 2025. | N/A | N/A | N/A | N/A | N/A | Performanc e Assessmen t Reports and attendance registers. | N/A |
| | | Performance Agreements of Senior Managers signed by 31 July. 2024 | Pm05- 2022 | MM | 3.2.5 | In house | 1 | 5 Performa nce Agreeme nts of Senior Manager s signed | 5 Performa nce Agreeme nts of Senior Manager s signed | 5 | Achieved | None | None | Signed Performanc e Agreement s and proof of submission to CoGTA | Target achieved POE was provided |
| Operatio nal Efficiency | Performa nce Manage ment | Compilation of the Annual Performance Report (2023/24 FY) and submitted to AG by 31 Aug 2024 | Pm02- 2022 | MM | 3.2.6 | In house | 1 | 1 Annual Performa nce Report (2023/24 FY) submitte d to AG | 1 Annual Performa nce Report (2023/24 FY) submitte d to AG | 1 | Achieved | None | None | Copy of APR and proof of submission to AG | Achieved Poe attached. |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|-------------------------------|-----------------------------------|---|---------------|----------------|-----------------|---|---------------------|--|---|-----------------------------|-----------------|------------|-------------------|---|---|
| Operatio nal Efficiency | Performa nce Manage ment | Number of quarterly SDBIP performance reports submitted to Council | Pm02- 2022 | ММ | 3.2.7 | In house | 2 | 4 SDBIP performa nce reports submitte d to Council | 1 SDBIP performa nce report submitte d to Council | 1 | Achieved | None | None | Quarterly SDBIP performanc e report and Council Resolution. | Target achieved POE was provided |

KEY PERFORMANCE AREA 4: Good Governance and Public Participation

The overall score for this KPA is 88% for the quarter under review.

| KPI Status | KPA 4: Good Governance and Public Participation |
|--------------------------------------|---|
| Target Met (as planned and exceeded) | 29 |
| Target Not Met (below planned) | 4 |
| Total | 33 |
| % Targets met | 88% |
| % Targets not met | 12% |

| Challenges | Corrective Action |
|--|---|
| Only 59% of Council resolutions were resolved or implemented; | |
| Most of the Council Resolutions that are still pending have reliance to external stakeholders and other departments. | Council Resolutions not implemented in Quarter 1 will be prioritized in Quarter 2.The municipality will also ensure that through the IGR structures, those resolutions are implemented. |
| 2. 45% of the Risk Management Plan was executed; | |
| The execution per quarter of Risk Based Internal Audit Plan was not approved by the Audit Committee by the 31st July 2024 due to delays of the Risk Committee to deal with the plan. The plan was however subsequently approved by the Audit Committee on the 25th September 2024. | The municipality will streamline future planning to the risk management processes to reflect actual activity. |
| 3. 26% of the Internal Audit findings were resolved as per the audit plan; | |
| This is due to unavailability of funds to implement some findings. | Through the implementation of the credit control programme, funds will be allocated to implement to address the findings. |

KPA 4: GOOD GOVERNANCE AND PUBLIC PARTICIPATION

Strategic Goal 5: Improve community confidence in the system of local government

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|------------------------|------------------------|---|-------------------|----------------|-----------------|--|----------------------|---|--|-----------------------------|-----------------|------------|-------------------|---|------------------------------|
| Good Governa nce | Good Governa nce | % of total MPAC resolutions raised and resolved per quarter | Pa29 - 2022 | MM | 4.1 | In house | 50% | 80% MPAC resolutio ns raised and resolved | 80% MPAC resolutio ns raised and resolved | 80% | Achieved | None | None | Copies of the quarterly MPAC resolutions raised and the respective managers response | Achieved POE attached. |
| | Risk Manage ment | % execution per quarter of Risk Management Plan in line with detailed time schedule (total organisation) | Pa07 - 2022 | MM | 4.2 | In house | 85% | 85% execution of Risk Manage ment Plan in line with detailed time schedule | 85% execution of Risk Manage ment Plan in line with detailed time schedule | 85% | Achieved | None | None | Copies of the Quarterly Risk Reports, and minutes of the Risk Manageme nt Meetings | Achieved POE attached. |
| Good Governa nce | Good Governa nce | Obtain an improved audit opinion from the annual audit outcome from AGSA | Pa08 - 2022 | MM | 4.3 | In house | Qualified Opinion | Unqualifi ed Opinion | N/A | N/A | N/A | N/A | N/A | Copy of the Auditor General's final audit report | N/A |
| | | % of AG Management Letter findings resolved (in terms of the Audit Action Plan) by 30 June 2025 (Total organization) | Pa11 - 2022 | CFO | 4.4 | In house | 68% | 85% AG Managem ent Letter findings resolved (in terms of the Audit Action Plan) | N/A | N/A | N/A | N/A | N/A | Copy of the quarterly AG Action Plan status report | N/A |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|------------------------|------------------------------------|---|-------------------|----------------|-----------------|-----------------------------------|---------------------|--|---|-----------------------------|-----------------|------------|-------------------|--|------------------------------|
| | | | | | | R'000 (Input Indicat or) | | | | | | | | | |
| Good Governa nce | Good Governa nce | Draft Consolidated Annual Report submitted to AG on or before the 31 Aug 2024 | Mf15 - 2022 | ММ | 4.5 | In house | 1 | 1 Draft Annual Report compiled and submitte d to the office of the Auditor General | 1 Draft Annual Report compiled and submitte d to the office of the Auditor General | 1 | Achieved | None | None | Copy of Annual Report and proof of submission to AG | Achieved |
| | | Number of Ward operational plans submitted to Council by 30 June 2025. | Pa24 - 2022 | MM | 4.6 | 1 000 | 0 | 9 Ward operation al plans submitte d to Council | 9 Ward operation al plans submitte d to Council | 9 | Achieved | None | None | Copy of annual Ward operational reports submitted to Council and Council Resolution | Achieved POE attached. |
| Accounta bility | Communi ty Participat ion | Number of Quarterly Ward Committee Functionality reports submitted to Council. | Pa22 - 2022 | MM | 4.7 | In house | 4 | 4 Ward Committe e Function ality reports submitte d to Council | 1 Ward Committe e Function ality report submitte d to Council | 1 | Achieved | None | None | Copies of quarterly ward committee Functionalit y reports submitted to Council and Council Resolution. | Achieved POE attached. |

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|------------------------|------------------------------------|--|-------------------|----------------|-----------------|--|---------------------|--|---|-----------------------------|-----------------|------------|-------------------|--|------------------------------|
| Accounta bility | Communi ty Participat ion | Number of Quarterly Community outreach meetings facilitated and attended | Pa21 - 2022 | MM | 4.8 | or) 320 | 3 | 4 Communi ty outreach meetings facilitated and attended | 1 Communi ty outreach meeting facilitated and attended | 1 | Achieved | None | None | Copy of the quarterly outreach report, inclusive of the attendance register | Achieved POE attached. |
| Good Governa nce | Good Governa nce | Submission of final audited consolidated Annual Report to Council by the 31 Jan 2025 | Mf15 - 2022 | MM | 4.9 | In house | 1 | 1 Annual report tabled before council | N/A | N/A | N/A | N/A | N/A | Copy of Final Annual Report and Council Resolution. | N/A |
| | | Submission of Oversight Report to Council by the 31 March 2025 | | MM | 4.1.0 | In house | 1 | 1 Oversight report submitte d to Council | N/A | N/A | N/A | N/A | N/A | Annual Oversight Report and Council Resolution. | N/A |
| | | 2024/25 IDP Review Process Plan approved by Council by 31 Aug 2025 | Mf20 - 2022 | MM | 4.1.1 | In house | 1 | 1 IDP process plan develope d and approved by Council | 1 IDP process plan develope d and approved by Council | 1 | Achieved | None | None | Copy of approved IDP review Process Plan and Council Resolution. | Achieved POE attached. |
| | | Final IDP tabled and approved by Council by 31 May 2025 | Mf20 - 2022 | MM | 4.1.2 | In house | 1 | 1 Final IDP tabled and approved by Council by 31 May 2025. | N/A | N/A | N/A | N/A | N/A | Copy of Final IDP and Council resolution | N/A |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|------------------------|------------------------|---|-------------------|----------------|-----------------|---|---------------------|---|--|-----------------------------|-----------------|------------|-------------------|--|------------------------------|
| Good Governa nce | Good Governa nce | Number of new/reviewed policies, strategies and By- Laws approved by Council by 30 June 2025 (OMM) | Pa37 - 2022 | ММ | 4.1.3 | In house | 11 | 10 new/revie wed policies, strategie s and By- Laws approved by Council | N/A | N/A | N/A | N/A | N/A | Council Resolution of all approved policies, strategies and By- Laws. | N/A |
| | | Number of monthly Section 80 Committee agendas generated as per the approved Calendar of Events | Pa33 - 2022 | ED:CS | 4.1.4 | In house | 17 | 36 Section 80 Committe e agendas generate d | 9 Section 80 Committe e agendas generate d | 9 | Achieved | None | None | Copies of signed Section 80 Committee agendas | Achieved POE attached. |
| Good Governa nce | Good Governa nce | Final SDBIP approved by Executive Mayor within 28 days after approval of Budget | Pa32 - 2022 | MM | 4.1.5 | In house | 1 | 1 Final SDBIP approved by Executiv e Mayor | N/A | N/A | N/A | N/A | N/A | Copy of Final approved SDBIP and Acknowled gement letter by the Mayor | N/A |
| | | Adjusted Budget and SDBIP approved by Council by the end of February 2024 | Pa32 - 2022 | ММ | 4.1.6 | In house | 1 | 1 Adjusted Budget and SDBIP approved by Council | N/A | N/A | N/A | N/A | N/A | Copy of Adjustment Budget and SDBIP and Council Resolution. | N/A |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|------------------------|------------------------|--|-------------------|----------------|-----------------|--|---------------------|--|---|-----------------------------|-----------------|---|--|--|------------------------------|
| | | | | | | t R'000 (Input Indicat or) | | | | | | | | | |
| Good Governa nce | Good Governa nce | % of Council meetings resolutions resolved per quarter (Total organisation) | Pa35 - 2022 | MM | 4.1.7 | In house | 46.50% | 100% Council meetings resolutio ns resolved | 100% Council meetings resolutio ns resolved | 59% | Not Achieved | Most of the Council Resolutions are still pending due to reliance to external stakeholders and other departments. 22 are still pending. Only 7 were not achieved. | Council Resolutions not implemented in Quarter 1 will be prioritized in Quarter 2. | Copy of quarterly status report of Council resolutions resolved | Not Achieved. |
| | | Number of monthly Ordinary Council meeting agendas generated as per the approved Calendar of Events | Pa35 - 2022 | ED:CS | 4.1.8 | In house | 9 | 11 Ordinary Council meeting agendas generate d | 3 Ordinary Council meeting agendas generate d | 3 | Achieved | None | None | Copy of signed Council agendas | Achieved POE attached. |
| Good Governa nce | Good Governa nce | Number of monthly ordinary MAYCO agendas generated as per the approved Calendar of Events | Pa34 - 2022 | ED:CS | 4.1.9 | In house | 7 | 11 Ordinary MAYCO agendas generate d | 3 Ordinary MAYCO agendas generate d | 3 | Achieved | None | None | Copy of signed Mayoral Committee agendas | Achieved POE attached. |
| | | Number of quarterly Compliance Register Reports submitted to Council | Pa38 - 2021 | MM | 4.2.0 | In House | New | 4 Quarterly Complian ce Register Report submitte d to Council | 1 Quarterly Complian ce Register Report submitte d to Council | 1 | Achieved | None | None | Copy of quarterly Complianc e Register Report and Council Resolution | Achieved POE attached. |
| | | Number of MPAC committee reports submitted to Council per quarter | Pa29 - 2022 | MM | 4.2.1 | In house | 3 | 4 MPAC committe e reports submitte d to Council | 1 MPAC committe e reports submitte d to Council | 1 | Achieved | None | None | Copy of MPAC Report and Council Resolution. | Achieved POE attached. |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|------------------------|------------------------|---|-------------------|----------------|-----------------|--|---------------------|---|--|-----------------------------|-----------------|---|---|---|------------------------------|
| | | | | | | t R'000 (Input Indicat or) | | | | | | | | | |
| Good Governa nce | Good Governa nce | Draft 2025/26 IDP tabled before Council for adoption by 31 March 2025 | Mf20 - 2022 | ММ | 4.2.2 | In house | 1 | 1 Draft 2024/25 IDP tabled before Council for adoption by 31 March 2025 | N/A | N/A | N/A | N/A | N/A | Copy of the Draft 2024/25 IDP and Council Resolution | N/A |
| | Risk Manage ment | % execution per quarter of Risk Management Plan in line with detailed time schedule (OMM) | Pa17 - 2022 | MM | 4.2.3 | In house | 25% | 85% execution per quarter of Risk Manage ment Plan | 85% execution per quarter of Risk Manage ment Plan | 45% | Not Achieved | The OMM had 20 Risks and only 9 were implemented/addressed. These 9 emanate from the Strategic Support unit. the 11 remaining fall under Service Delivery unit. | The Service Delivery unit has been requested to implement and address the outstanding risks within Quarter 2. | Copy of the Risk Monitoring Report | Not Achieved. |
| Good Governa nce | Risk Manage ment | % execution per quarter of Risk Management Plan in line with detailed time schedule (Finance only) | Pa17 - 2022 | CFO | 4.2.4 | In house | 60% | 85% execution per quarter of Risk Manage ment Plan | 85% execution per quarter of Risk Manage ment Plan | 87% | Achieved | None | None | Copy of the Risk Monitoring Report | Achieved POE attached. |
| | | % execution per quarter of Risk Management Plan in line with detailed time schedule (SS only) | Pa17 - 2022 | ED:SS | 4.2.5 | In house | 77% | 85% execution per quarter of Risk Manage ment Plan | 85% execution per quarter of Risk Manage ment Plan | 100% | Achieved | All Risk items have been implemented for the quarter | None | Copy of the Risk Monitoring Report | |

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|------------------------|------------------------|---|-------------------|----------------|-----------------|---|---------------------|--|--|-----------------------------|-----------------|--|-------------------|---|------------------------------|
| Good Governa nce | Risk Manage ment | % execution per quarter of Risk Management Plan in line with detailed time schedule by (TS) | Pa17 - 2022 | ED:TS | 4.2.6 | In house | 21% | 85% execution per quarter of Risk Manage ment Plan | 85% execution per quarter of Risk Manage ment Plan | 96% | Achieved | None | None | Copy of the Risk Monitoring Report | Achieved POE attached. |
| | | Number of Risk Management reports submitted to the Risk Management Committee per quarter | | ММ | 4.2.7 | In house | 4 | 4 Risk Manage ment reports submitte d to the Risk Manage ment Committe e | 1 Risk Manage ment reports submitte d to the Risk Manage ment Committe e | 1 | Achieved | None | None | Copy of quarterly Risk Manageme nt Committee report | Achieved POE attached. |
| | | Number of Risk Management Committee reports submitted to the Audit Committee per quarter | Pa04 - 2022 | ММ | 4.2.8 | In house | 4 | 4 Risk Manage ment Committe e reports submitte d to the Audit Committe e | 1 Risk Manage ment Committe e reports submitte d to the Audit Committe e | 1 | Achieved | None | None | Copies of Risk Manageme nt Committee reports | Achieved POE attached. |
| Good Governa nce | Risk Manage ment | % execution per quarter of Risk Management Plan in line with detailed time schedule (CS only) | Pa17 - 2022 | ED:CS | 4.2.9 | In house | 85% | 85% execution per quarter of Risk Manage ment Plan | 85% execution per quarter of Risk Manage ment Plan | 100% | Achieved | The department managed to execute the risk management plan by 100% | None | Copy of the Risk Monitoring Report | Achieved POE attached. |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|------------------------|------------------------|---|-------------------|----------------|-----------------|---|---------------------|--|--|-----------------------------|-----------------|--|---|--|------------------------------|
| Good Governa nce | Risk Manage ment | Number of Internal Audit reports submitted to the Audit Committee per quarter | Pa10 - 2022 | MM | 4.3.0 | In house | 4 | 4 Internal Audit reports submitte d to the Audit Committe e | 1 Internal Audit reports submitte d to the Audit Committe e | 1 | Achieved | None | None | Copy of the quarterly IA progress report | Achieved POE attached. |
| Good Governa nce | Internal Audit | Number of Audit Committee reports submitted to Council per quarter | Pa10 - 2022 | MM | 4.3.1 | In house | 3 | 4 Audit Committe e reports submitte d to Council | 1 Audit Committe e reports submitte d to Council | 1 | Achieved | None | None | Copy of quarterly AC report submitted to Council and Council Resolution | Achieved POE attached. |
| | Good Governa nce | Action Plan on issues raised by the Auditor General compiled and tabled to Council by 31 January 2025 | Pa08 - 2022 | CFO | 4.3.2 | In house | 0 | 1 Action Plan on issues raised by the Auditor General compiled and tabled to Council | N/A | N/A | N/A | N/A | N/A | Copy of approved Action Plan and Council Resolution. | N/A |
| | Internal Audit | Review Risk Based Internal Audit Plan and submit to Audit Committee by 31 July 2024 | Pa08 - 2022 | MM | 4.3.3 | In house | 1 | 1 Review Risk Based Internal Audit Plan and submit to Audit Committe e | 1 Review Risk Based Internal Audit Plan and submit to Audit Committe e | 0 | Not Achieved | Delayed due to risk Management Processes to be finalised. The plan was subsequently finalised and approved by the audit committee. | Will streamline future planning to the risk management processes to reflect actual activity | Reviewed Risk Based Internal Audit Plan submitted to Audit Committee | Not Achieved. |

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|--|---|--|-------------------|----------------|-----------------|-----------------------------------|---------------------|---|---|--------------------|-----------------|-----------------------|------------------------------------|---|------------------------------|
| | | | | | | Budge t | | J. 1 | . 0 | Perf. | | | | | |
| | | | | | | R'000 (Input Indicat or) | | | | | | | | | |
| Custome r Relations hip Manage ment | Custome r/ Stakehol der Relations hip Manage ment | Number of quarterly Customer Complaint reports submitted to Council (inclusive of Presidential Hotline) | Pa39 - 2022 | MM | 4.3.4 | In house | 3 | 4 Custome r Complain t reports submitte d to Council | Custome r Complain t reports submitte d to Council | 1 | Achieved | None | None | Copy of quarterly Customer Complaint reports and Council Resolution | Achieved POE attached. |
| Good Governa nce | Good Governa nce | % of Internal Audit Findings resolved per quarter as per the Audit Plan (Total Organization) | Pa10 - 2022 | MM | 4.3.5 | In house | 42% | 100% Internal Audit Findings resolved as per the Audit Plan | 100% Internal Audit Findings resolved as per the Audit Plan | 26% | Not Achieved | Cash flow constraints | Escalate to MM, and monitor weekly | Copy of the quarterly internal audit report | Not Achieved. |
| | | Number of new/reviewed policies, strategies and By- Laws approved by Council by 30 June 2025 (B&T only) | Pa37 - 2022 | CFO | 4.3.6 | In house | 21 | 19 new/revie wed policies, strategie s and By- Laws approved by Council | N/A | N/A | N/A | N/A | N/A | Council Resolution of all approved policies, strategies and By- Laws. | N/A |
| Good Governa nce | Good Governa nce | Number of new/reviewed policies, strategies and By- Laws approved by Council by 30 June 2025 (CS only) | | ED:CS | 4.3.7 | In house | 5 | 05 new/revie wed policies, strategie s and By- Laws approved by Council | N/A | N/A | N/A | N/A | N/A | Council Resolution of all approved policies, strategies and By- Laws | N/A |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|------------------------|--------------------------|---|-------------------|----------------|-----------------|---|---------------------|--|--------------------|-----------------------------|-----------------|------------|-------------------|---|----------------|
| Good Governa nce | Good Governa nce | Number of new/reviewed policies, strategies and By- Laws approved by Council by 30 June 2025 (SS only) | Pa37 - 2022 | ED:SS | 4.3.8 | In House | 0 | 5 Number of new/revie wed policies, strategie s and By- Laws approved by Council | N/A | N/A | N/A | N/A | N/A | Council Resolution of all approved policies, strategies and By- Laws. | N/A |
| | | Number of new/reviewed policies, strategies and By- Laws approved by Council by 30 June 2024 (TS only) | Pa37 - 2022 | ED:TS | 4.3.9 | In house | New | 1 new/revie wed policies, strategie s and By- Laws approved by Council by 30 June 2024 (TS only) | N/A | N/A | N/A | N/A | N/A | Council Resolution of all approved policies, strategies and By- Laws. | N/A |
| | Youth Develop ment | Review and Adoption of the Youth Development Strategy by 30 June 2025. | | ED:SS | 4.4.0 | In- House | New | 1 Youth Develop ment Strategy reviewed and adopted by the 30th of June 2025 | N/A | N/A | N/A | N/A | N/A | Copy of the reviewed and adopted Youth Developme nt Strategy and the Council Resolution | N/A |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|--|---|---|-------------------|----------------|-----------------|-----------------------------------|---------------------|--|---|-----------------------------|-----------------|------------|-------------------|--|------------------------------|
| | | | | | | (Input Indicat or) | | | - | | | | | | |
| Good Governa nce | Improved Complian ce to Legislatio n & Policies(Public | Number of Municipal firearms inspections conducted per month | Tp03 - 2022 | ED:SS | 4.4.1 | In house | 12 | 12 Municipal firearms inspectio ns conducte d | 3 Municipal firearms inspectio ns conducte d | 3 | Achieved | None | None | Copies of firearms inspections forms | Achieved POE attached. |
| | Safety) | Number of Cemeteries Management Forum Meetings Scheduled & held per quarter | Cs01 - 2022 | ED:SS | 4.4.2 | In house | 3 | 4 Cemeteri es Manage ment Forum Meetings Schedule d & held | 1 Cemeteri es Manage ment Forum Meetings Schedule d & held | 1 | Achieved | None | None | Copy of close out report for each forum meeting inclusive of Attendance Registers | Achieved POE attached. |
| Custome r Relations hip Manage ment | Custome r/ Stakehol der Relations hip Manage ment | Number of Customer satisfaction survey conducted by 30 June 2025 | Pa20 - 2022 | ММ | 4.4.3 | In house | In house | 1 Custome r satisfacti on survey conducte d | N/A | N/A | N/A | N/A | N/A | Report on Customer satisfaction survey submitted to the MM | N/A |
| | | Number of monthly updates of the Municipal social media accounts | | ММ | 4.4.4 | In house | New | 12 monthly updates of the Municipal social media accounts | 3 monthly updates of the Municipal social media accounts | 3 | Achieved | None | None | Copy of dated screenshot s of social media accounts updates. | Achieved POE attached. |
| | | Number of quarterly newsletter(s) published | | MM | 4.4.5 | 600 | 1 | 4 newslette r(s) published | 1 newslette r(s) published | 1 | Achieved | None | None | Copy of quarterly newsletter(s) published | Achieved POE attached. |

| Strategic Thrust | Program me | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|--|--|---|-------------------|----------------|-----------------|--|---------------------|---|---|--------------------|--------------|------------|--|--|------------------------------|
| | | | | | | Budge t R'000 (Input Indicat | | - | | Perf. | | | | | |
| Custome r Relations hip Manage ment | Custome r/ Stakehol der Relations hip | Number of radio slots secured for the Executive Mayor per quarter | Pa18 - 2022 | MM | 4.4.6 | or) 200 | 1 | 4 radio slots secured for the Executiv e Mayor | 1 radio slot secured for the Executiv e Mayor | 1 | Achieved | None | None | Copy of confirmatio n from the radio station | Achieved POE attached. |
| | Manage ment | Number of legislated notices approved by the MM and published per quarter | | MM | 4.4.7 | 500 | 3 | 5 legislated notices approved by the MM and published | 1 legislated notices approved by the MM and published | 1 | Achieved | None | None | Copy of approved notices published | Achieved POE attached. |
| | | Number of monthly updates of the Municipal Website as per Section 75 of the MFMA. | | MM | 4.4.8 | In house | New | 12 monthly updates of the Municipal Website as per Section 75 of the MFMA | 3 monthly updates of the Municipal Website as per Section 75 of the MFMA | 8 | Achieved | None | The targets of three (3) will be amended in line with MFMA 75 legislation. | Dated Municipal Website screen shots. | Achieved POE attached. |
| | Strategic Planning | Strategic Planning Lekgotla report Submitted to Council by 30 June 2025. | Mf20 - 2022 | ММ | 4.4.9 | In house | 1 | 1 Strategic Planning Lekgotla report Submitte d to Council by 30 June 2025. | N/A | N/A | N/A | N/A | N/A | Close-out report, attendance register and Council Resolution | N/A |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Perf. | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|------------------------|----------------------|--|-------------------|----------------|-----------------|---|---------------------|--|---|-----------------------------|-----------------|------------|-------------------|---|------------------------------|
| Good Governa nce | Security Services | Number of quarterly status reports on monitoring of Municipal security services submitted to the Municipal Manager per quarter | Tp03 - 2022 | ED:SS | 4.5.0 | In house | New | 4 status reports on monitorin g of Municipal security services submitte d to the Municipal Manager | 1 status report on monitorin g of Municipal security services submitte d to the Municipal Manager | 1 | Achieved | None | None | Quarterly Security Reports and Acknowled gement of receipt by MM | Achieved POE attached. |

KEY PERFORMANCE AREA 5: Spatial Rationale

The overall score for this KPA is 86% for the quarter under review.

| KPI Status | KPA 5: Spatial Rationale |
|--------------------------------------|--------------------------|
| Target Met (as planned and exceeded) | 6 |
| Target Not Met (below planned) | 1 |
| | |
| Total | 7 |
| | |
| | |
| % Targets met | 86% |
| % Targets not met | 14% |

| Challenges | Measures taken to improve performance |
|---|--|
| Only 40 property inspections were conducted in terms of compliance to the Land scheme and Building Regulations; | |
| Insufficient awareness and human capital. | - Intensify awareness of the program and request ward committees to assist the program |

KPA 5: SPATIAL DEVELOPMENT

Strategic Goal 6: Increase regularisation of built environment

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Performan ce | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|--------------------------------------|---|---|---------------|----------------|-----------------|---|---------------------|--|--|---------------------------------------|-----------------|------------|-------------------|--|------------------------------|
| Land Tenure and Spatial Develop ment | Land Tenure and Spatial Develop ment | % of new registered building plan applications received and approved (referred back) within agreed timeframes of 28 days. | Sd07- 2022 | MM | 5.1 | In house | 100% | 100% new registered building plan application s received and approved (referred back) | 100% new registered building plan application s received and approved (referred back) | 100% | Achieved | None | None | Copy of application Register | Achieved |
| Land Tenure and Spatial Develop ment | Land Tenure and Spatial Develop ment | % of (category 2) land use applications received and processed within 90 days by authorised officer | Sd06- 2022 | ММ | 5.2 | In house | 100% | 100% (category 2) land use application s received and processed | 100% (category 2) land use application s received and processed | 100% | Achieved | None | None | Copy of the land use applications report and register | Achieved POE attached. |
| | | % of (category 1) land use applications received and referred to Nkangala District Tribunal within 90 days from VKLM | Sd06- 2022 | MM | 5.3 | In house | 100% | 100% (category 1) land use application s received and referred to Nkangala District Tribunal | 100% (category 1) land use application s received and referred to Nkangala District Tribunal | 100% | Achieved | None | None | The list of registered applications received and referred to NDM (Land tribunal) | Achieved POE attached. |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Performan ce | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|---|---------------------|---|---------------|----------------|-----------------|---|---------------------|---|---|---------------------------------------|-----------------|---|---|---|------------------------------|
| Land Tenure and Spatial Develop ment | Building Control | Number of quarterly reports on building contraventions notices issued submitted to the MM | Sd06- 2022 | MM | 5.4 | In house | 80% | 4 Quarterly Reports on building contraventi ons notices issued submitted to the MM | 1 Quarterly Report on building contraventi ons notices issued submitted to the MM | 1 | Achieved | None | None | Copy of quarterly reports submitted and signed by the MM. | Achieved POE attached. |
| | | Number of property inspections conducted per quarter in terms of compliance to the Land scheme and Building Regulations | | MM | 5.5. | In house | New | 6400 property inspections conducted in terms of compliance to the Land scheme and Building Regulation s | 1000 property inspections conducted in terms of compliance to the Land scheme and Building Regulation s | 40 | Not Achieved | Insufficient awareness and human capital | Intensify awareness of the program and request ward committee to assist program | Close-out report with signed inspection forms | Not achieved target not met |
| | Land Audit | Land Audit report developed and submitted to the MM by 30 June 2025 | Sd06- 2022 | MM | 5.6 | In house | New | 1 Land Audit report developed and submitted to the MM | N/A | N/A | N/A | N/A | N/A | Copy of land audit reports submitted to the MM | Not Achieved. |

| Strategic Thrust | Program me | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Performan ce | Achieve ment | Challenges | Corrective Action | POE | IA Comments |
|--------------------------------------|---------------|---|---------------|----------------|-----------------|---|---------------------|---|--|---------------------------------------|-----------------|------------|-------------------|---|--------------------|
| Land Tenure and Spatial Develop ment | Land Audit | Number of quarterly reports on cases of Land Invasion reported and resolved submitted to the MM | Sd09- 2022 | MM | 5.7. | In house | New | 4 Quarterly Reports on cases of Land Invasion reported and resolved submitted to the MM | 1 Quarterly Report on cases of Land Invasion reported and resolved submitted to the MM | 1 | Achieved | None | None | Land invasion reports submitted and signed by the MM | Target achieved |
| | | Number of Quarterly reports on Land Contraventions notices issued submitted to the MM by 30 June 2025. | | MM | 5.8. | In house | New | 4 Quarterly reports on Land Contraventi ons notices issued submitted to the MM | 1 Quarterly report on Land Contraventi ons notices issued submitted to the MM | 1 | Achieved | None | None | Copy of quarterly report of building contravention notices issued signed by the MM. | Target achieved |
| | Land Audit | Spatial Development Framework (SDF) reviewed and adopted by Council by 30 June 2025. | Sd06- 2022 | MM | 5.9. | In house | New | 1 Spatial Developme nt Framework (SDF) reviewed and adopted by Council | N/A | N/A | N/A | N/A | N/A | Copy of the SDF document submitted to Council and Council Resolution. | N/A |

KEY PERFORMANCE AREA 6: Local Economic Development

The overall score for this KPA is 100% for the quarter under review.

| KPI Status | KPA 6: Local Economic Development |
|--------------------------------------|-----------------------------------|
| Target Met (as planned and exceeded) | 5 |
| Target Not Met (below planned) | 0 |
| | |
| Total | 5 |
| | |
| % Targets met | 100% |
| % Targets not met | 0% |

| Challenges | Measures taken to improve performance |
|------------|---------------------------------------|
| None | - None |

KPA 6: LOCAL ECONOMIC DEVELOPMENT

Strategic Goal 7: Increased economic activity and job creation

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Performan ce | Achievement | Challenges | Corrective Action | POE | IA Comments |
|---|---|--|--------------------|----------------|-----------------|---|---------------------|---|--------------------|---------------------------------------|-------------|------------|-------------------|--|----------------|
| Economic Growth and Developme nt | Economic Growth and Developme nt | Number of MOU's signed with respect to external Social Responsibility Programmes by 30 June 2025 | Led03 - 2022 | MM | 6.1 | In house | 1 | 2 MOU's signed with respect to external Social Responsibil ity Programme s | N/A | N/A | N/A | N/A | N/A | Copy of the signed MOU's | N/A |
| | | Number of bi- annual reports submitted to Council with respect to CSI and SLP Programme of both Business and Mining organisations by 30 June 2025. | | MM | 6.2 | In house | σ, | 2 CSI and SLP Programme of both Business and Mining organisatio ns Report submitted to Council | N/A | N/A | N/A | N/A | N/A | Copies of bi-annual reports submitted to Council | N/A |

| Strategic Thrust | Programm e | KPI | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Performan ce | Achievement | Challenges | Corrective Action | POE | IA Comments |
|---|---|---|--------------------|----------------|-----------------|---|---------------------|---|--|---------------------------------------|-------------|---|-------------------|--|------------------------------|
| Economic Growth and Developme nt | Economic Growth and Developme nt | Number of total work opportunities created through labour intensive programmes by 30 June 2025 (GKPI). | Led09 - 2022 | ED:TS | 6.3 | In house | New | 121 work opportunitie s created through labour intensive programme by 30 June 2025 (GKPI). | 30 work opportuni ties created through labour intensive program me by 30 June 2025 (GKPI). | 78 | Achieved | Provision of Civil Engineering and Construction of Water Related Infrastructure in Reducing the Non- Revenue Water in Delpark- the contractor opted to employ more labour at the early stage of the project | None | Job opportunity report | Achieved POE attached. |
| Economic Growth and Developme nt | Economic Growth and Developme nt | Number of skills development initiatives scheduled and held in terms of the youth bi-annually | Led35 - 2022 | ED:SS | 6.4 | 400 | 4 | 2 skills developme nt initiatives held for the youth | N/A | N/A | N/A | N/A | N/A | Copy of close-out report inclusive of Attendance Register. | N/A |
| | | Number of SMME's and Cooperatives capacity building skills workshops held by the 30 June 2025 | Led10 - 2022 | MM | 6.5 | 200 | 4 | 2 SMME's and Cooperativ es skills workshop held | 1 SMME's and Cooperat ives skills workshop held | 1 | Achieved | None | None | Copy of close-out reports inclusive of Attendance Register. | The target was achieved |

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Performan ce | Achievement | Challenges | Corrective Action | POE | IA Comments |
|---|---|--|--------------------|----------------|-----------------|--|---------------------|---|---|---------------------------------------|-------------|------------|-------------------|---|---|
| Economic Growth and Developme nt | Economic Growth and Developme nt | Number of EPWP Full Time Equivalent (FTE's) created through social, culture and environment initiatives per quarter | Led09 - 2022 | ММ | 6.6 | 1 361 | 587 | 170 EPWP Full Time Equivalent (FTE's) created through social, culture and environmen t initiatives | 40 EPWP Full Time Equivalent (FTE's) created through social, culture and environme nt initiatives | 170 | Achieved | None | None | Copy of monthly DPW Summary report | Achieved |
| Economic Growth and Developme nt | Economic Growth and Developme nt | Number of new investments attracted into the local economy by 30 June 2025. | | MM | 6.7 | In house | NEW | 2 Direct/Non- direct Investment into the local economy | N/A | N/A | N/A | N/A | N/A | Copy of the signed MOUs | N/A |
| | | Acquisition of an industrial site by 30 June 2025. | | MM | 6.8 | Extern al | NEW | 1 industrial site acquired by the 30 June 2025 | N/A | N/A | N/A | N/A | N/A | Report submitted to Council and a Council Resolution | N/A |
| | | Launch of Local Economic Development (LED) Forum by 30 September 2024. | | MM | 6.9 | In house | NEW | 1 Local Economic Developme nt (LED) Forum launched by 30 September 2024. | 1 Local Economi c Develop ment (LED) Forum launched by 30 Septemb er 2024. | 1 | Achieved | None | None | Close-out report with attendance register | Target achieved POE was provided |

| Strategic Thrust | Programm e | КРІ | IDP Link | Resp. MM/ED | SDBIP Ref No | Annua I Budge t R'000 (Input Indicat or) | 2023/24 Baseline | Annual Target | 1st Qtr. Target | 1st Qtr. Actual Performan ce | Achievement | Challenges | Corrective Action | POE | IA Comments |
|---|---|--|--------------------|----------------|-----------------|---|---------------------|---|--|---------------------------------------|-------------|------------|-------------------|--|---|
| Economic Growth and Developme nt | Economic Growth and Developme nt | Launch of the Local Tourism Committee (LRC) by 30 June 2024 | Led09 - 2022 | MM | 6.1 | In house | NEW | Local Tourism Committee (LRC) launched by 30 September 2024. | Local Tourism Committe e (LRC) launched by 30 Septemb er 2024. | 1 | Achieved | None | None | Close-out report with attendance register | Target achieved POE was provided |
| | Youth Developme nt | Youth Development Summit held by 30 June 2025 | Pa30- 2022 | ED:SS | 6.11. | 650 | 0 | 1 Youth Developme nt Summit held by 30 June 2025. | N/A | N/A | N/A | N/A | N/A | Council resolution to host the event and close out summit report | N/A |

I, LINDINE MARTORY MAHLANGU the Acting Municipal Manager of the Victor Khanye Local Municipality, hereby certify that the Quarter 1 Performance Report and supporting documentation for the period July 2024 to September 2024 has been prepared in accordance with the Municipal Finance Management Act and the regulations made under the Act.

SIGNED BY THE ACTING MUNICIPAL MANAGER: MS LM MAHLANGU

SIGNATURE