1 1				_
19 SECTION 46	Comments	30 June 2019 (An additional budget was allocated to the project, but the target was not revised during SDBIP adjustment)	600 m of roads constructed (Paving) in Indwe by 30 June 2019 (An additional budget was allocated to the project, but the target was not revised during SDBIP adjustment)	1 Shearing shed constructed in Ward 09 by 30 June 2019
2018/20	Achieved/ Not Achieved		Achi	Achi
TATION PLAN -	Actual Achievement (2018/19)	Dordrecht by 30 June 2019 (An additional budget was allocated to the project, but the target was not revised duning SDBIP	adjustment) 600 m of roads constructed (Paving) in Indwe by 30 June 2019 (An additional budget was allocated to the project, but the target was not revised during	Labering shed constructed in Ward 09 by 30 June 2019
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION AS	Annual Target 2018/2019	Dordrecht by 30 June 2019	400 m of roads constructed (Paving) in Indwe by 30 June 2019	1 Shearing shed constructed in Ward 08 by 30 June 2019
ELIVERY AND BL	Actual Performance			Achieved. Specifications were prepared and the service provider has been appointed. Service provider
AL SERVICE DI	Annual Target 2017/2018			Po34 - One (1) Shearing shear constructe d in Ezingqolw eni village in Ward 17 by 30
NOIT	Indicator Code		2.189_2.01_01_t	1,11,1,0034
TILL	Punding Source		MIG	MIG
JATED	tagbud nottspollA		۱ ۵۲۵ ۵۵٬۵۵	00.481 681 1
CONSOLI	Baseline Indicator 2017/2018		200m paved in Indwe	shed shed constructe d in Ward 17
	Key Performa nce Indicator		Number of metres of streets paved	Shearing sheds constructe d

Custodian

Portfoli o of evidenc e annual

Remedi al Action

Reasons for Non-Achieveme nt

Strategy

Strategic Objective

Priority Area

SHOI

Quarterly
Y
Reports
on
construction of
Shearin
g Shed

Construct a shearing shed

To ensure improved infrastruct ure and access to emerging farmer support programm e by June 2019

Local Economic

		Custodian	AT039	SHOI	SHOI	SHOI
			 		100	
		Portfoli o of evidenc e annual	Quarterly y Reports on facilitatio n of Mega Projects	Quarter y Reports complete on certificat e	Quarter V Y Reports. Completi on certificat	Quarterly Y Reports, completi
		Remedi al Action	Tender re- advertis ed			GCC Contract conditio ns have been envoked
		Reasons for Non- Achieveme nt	There was no suitable service provider. Tender was advertised 3 times			Poor performance of the Service provider
	SECTION 46	Comments	None was constructed	1 Vehicle Testing Station constructed in Ward 4 by 30 June 2019	Fencing and Imgation System installed in Cacadu Sports field by 30 June 2019	Construction of indwe sports field still in progress as following activities
	18/201	Achieved beveinta fold	Achi eved	eved	Achi	Not Achi eved
MUNICIPALITY	ATION PLAN - 20	Actual Achievement (2018/19)	None was constructed	1 Vehicle Testing Station constructed in Ward 4 by 30 June 2019	Fencing and Irrigation System installed in Cacadu Sports field by 30 June 2019	Construction of Indwe sports field still in progress as following activities
	CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019	1 Feedlot Constructed in Ward 15 by 30 June 2019	1 Vehicle Testing Station constructed in Ward 4 by 30 June 2019	Fencing and Imgation System installed in Cacadu Sports field by 30 June 2019	1 Sport field in Indwe constructed by 30 June 2019
EMALAHLENI LOCAL MUNICIPALITY	LIVERY AND BU	Actual Performance Performance Performance Completed				
EMAI	SERVICE DE	Annual Target 2017/2018	NV NV			
	TIONAL	noticator eboO	4509_1.11_11_1 1.	1_12_12.4_P129	142.42.5 P1 30	9_21_21_1 151
	UTILL	Bulbru-T Source	снрм	MIG	MIG	MIG
	ATED	fegbuð nottspollA	300 000,00	RY 500 000	790 þ 00,935	000 11 00,000
	CONSOLI	Baseline Indicator 2017/2018	Incomplet e feedlot	Not Applicable	Cacadu Sport field	Lady Frere Sport field in 2016/2017
		Key Performa nce Indicator	Number of Feedlots constructe d	Number of Number of Vehicle Testing Stations Constructe d	Fencing and Irrigation System Installed	Number of Sport fields constructe d
		Strategy	Construct a feedlot	Construct a Vehicle Testing Station	Fence and Irrigate the Sport field	Construct a Sports field
		Strategic Objective		To ensure the availability of well-maintaine d and repaired buildings, amenites and recreation al facilities	to which the public has full access by June 2019	To ensure the availability of well- maintaine d and
		Priority Area		and Recreational Facilities	seitinemA \seitilio	s ⁴ \gnibliu8

Custodian	-	Community Services
Portfoli o of evidenc e annual	certificat	Quarterf y Y Reports o mainten ance of municip al facilities
Remedi al Action	for impleme ntation of penalty clause for late completi on of the project	
Reasons for Non- Achieveme nt		
Comments	executed: Site clearance, earthworks, fencing. Ablution facilities (Progress on going).	9 municipal facilities were maintained by 2019 (ERF 377 Indwe Communications Offices at Cacadu, Indwe Nunicipal Offices, Dordrecht Library, Cacadu Emergency Assembly Point, Cacadu Traffic Station Bengu Community hall, Indwe New Community hall, Indwe New Community hall and Mike Huna
Achieved/ bevelda followed		eved
Actual Achievement (2018/19)	executed: Site clearance, earthworks fencing, Ablution facilities (Progress on going).	9 municipal facilities were maintained by maintained by (ERF 377 Indwe.) Communications Offices at Cacadu, Indwe Municipal Offices. Dordrecht Library, Cacadu Emergency Assembly Point, Cacadu Traffic Station. Bengu Community hall, Indwe New Community hall, Indwe New Community hall and Mike
Annual Actual Annual Target Actual Comments Target Performance 2018/2019 Achievement Occuments 2017/2018 Occupenda		6 municipal facilities maintained (New Community Bengu Zwaartwater Misheko Community Hall Investment Property ERF 377 and Indwe Municipal Offices by 30 June 2019
Actual Performance		Achieved. 1 Municipal aculting a facility of maintained at Boomplaas Hall. 6 Fixed employees appointed. Purchase of material and transpointed. Purchase of material and compositives facilities is underway. Greyspan Community hall fixed and completed on the 27 of October 2017, 90% complete in Zulu Renovation since there were new installation in the 20 october 2017, 90% complete in Zulu Renovation since there were new installation in the 20 october 2017, 90% completed in Zulu Renovation since there were new installation in the 20 october 2017, 90% completed in Zulu Renovation since there were new installation in the 20 october 2017, 90% completed in Zulu Renovation in the 20 october 2017, 90% completed in Zulu Renovation in the 20 october 2017, 90% completed in Zulu Renovation in the 2017, 90% completed in the 2017, 90% c
Annual Target 2017/2018		P035 - 4 municipal facilities maintaine d (Greyspan community hall Boomplaa s Hall and Tsembeyi Library Municipal Offices) by 30 June 2018
Indicator eboO		1.21.21 <u>.</u> 1
Funding Source		xədO
fegbuð noitspolfA		00,000 0£1
Budget Funding Source Indicator Budget Funding Source Indicator Code		4 municipal facilities maintaine d (Harry Gwala, Greyspan, Municipal Offices, Tsembey, and Boomplaa s Library)
Key Performa nce Indicator		Number of municipal facilities mainitaine d
Strategy		Maintain existing municipal facilities (cemeterie s, halls, municipal buildings)
Strategic Objective	repaired buildings, amenities and recreation al facilities to which the public has full access by	June 2019
Priority Area		

	Custodian		Community Services	SHQI
	Portfoli o of evidenc e annual		Quarterly y Reports and utilisation n register	Quarterl y Y Reports on constructon of offices
, , , , , , , , , , , , , , , , , , ,	Remedi al Action			
	Reasons for Non- Achieveme nt			
SECTION 46	Comments	Community Hall)	32 Municipal facilities managed by 30 June 2019	Foundation Phase for Municipal Staff Offices Completed (Foundation Filling and
18/2019	Achieved\		Achi	Achi
ATION PLAN - 20	Actual Achievement (2018/19)	Community Hall)	32 Municipal facilities managed by 30 June 2019	Foundation Phase for Municipal Staff Offices Completed (Foundation
EMALAHLENI LOCAL MUNICIPALITY CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019		32 Municipal facilities managed by 30 June 2019	Foundation Phase for Municipal Staff Offices Completed (Foundation Filling and
EMALAHLENI LOCAL MUNICIPALITY RE DELIVERY AND BUDGET IMPLEME	Actual Performance	and repairs of office aircons, Harry Gwala Community Hall under renovations. Installation of mew back up water system in Cacadu Municipal Offices. Traffic station guard house fixed and installation of window blinds for Cacadu offices of offices of the cacadu offices of offices of the cacadu offices of offic	Achieved. 32 Municipal facilities managed	Achieved, Site has been established and mobile offices relocated
EMAI SERVICE DE	Annual Target 2017/2018		P036 - 32 Municipal facilities managed by 30 June 2018	P037 - two Phase 2 deliverable s conducted by 30 June 2018
TIONAL	Indicator Code		1.12_12.2P036	1.13_13.1_P03
UTILISM	Funding Source		хәdО	хэдО
ATEDI	Budget notasoliA		00,000 058	3 000 000 000
CONSOLIE	Baseline Indicator 2017/2018		Utilisation register	Council Chambers phase 1
	Key Performa nce Indicator	6	Number of municipal facilities managed	Foundation Phase for Municipal Staff Offices Completed
	Strategy		Manage existing municipal facilities	Constructi on of Municipal Staff Offices using alternative
	Strategic Objective			To ensure availability of office space for municipal employee
	Priority Area			Office Space

1/2	nstodian		Community Services	Community Services
	Portfoli o of evidenc e annual		Quarterly y reports on childhood develop ment forums convened d	Registra tion Register s
	Remedi al Action			Registra tion of new library users will be monitore d on a quarterly basis
	Reasons for Non-Achieveme			The Dordrecht Library was affected by the June/July 2018 Community Profest which resulted in damages to the library which where only repaired at November 2018.
SECTION 46	Comments	Compaction) in Ward 4 by 30 June 2019	3 Early Childhood Development Forum meetings by 30 June 2019	Library Users were registered as members by 30 June 2019
18/2019	Achieved/ Not Achieved		eved	Not eved
ATION PLAN - 20	Actual Achievement (2018/19)	Compaction) in Ward 4 by 30 June 2019	3 Early Childhood Development Forum meetings by 30 June 2019	Library Users were registered as members by 30 June 2019
EMALAHLENI LOCAL MUNICIPALITY CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019	Compaction) in Ward 4 by 30 June 2019	3 Early Childhood Development Forum meetings convened by 30 June 2019	200 New Library Users registered as members by30 June 2019
EMALAHLENI LOCAL MUNICIPALITY SE DELIVERY AND BUDGET IMPLEME	Actual Performance		Achieved, 7 Early Childhood Development Forum meetings converned.	Achieved. 387 New library users registered
EMAI SERVICE DE	Annual Target 2017/2018	(Site establishm ent Relocation of Mobile Offices)	P038 - 3 Early Childhood Developm ent Forum meetings convened by 30 June 2018	P040 - 200 New Library Users Gestered as members by 30 June 2018
TIONAL	Indicator Code		1_14_14.1_P038	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
UTITISN	Funding Source		Cpex	×
ATED !	Budget noitscollA		-	
CONSOLIE	Baseline Indicator 2017/2018		3 Early Childhood Developm ent Forum meetings convened	200 new library users registered
	Key Performa nce Indicator	(Foundation Filling and Compaction)	Number of Early Childhood Developm ent Forum meetings convened	Number of new library users registered as members
	Strategy	constructio n methods	Convene early childhood developm ent forum meetings	Promote education and awareness on the library utilization
	Strategic Objective	s by June 2019	To ensure provision of Child Care facilities for Emalablen Communities by June 2019	To ensure provision of library and information services for Emalathen communities by June 2019
	Priority Area		Ch dhood Development	Lbraries

	Custodian	Community Services	Community Services
5	Portfoli o of evidenc e annuel	Ouarted y Reports on Library Committ ee meeting s convene	Lay-Out Plan for Indwe Cemeter Y. Quarterl Y Reports on develop ment of cemeter y
m*	Remedi al Action	Function ality of Library Committees to be monitored a quarterly	Tribunal has approve d the Cemeter y Plans
	Reasons for Non- Achieveme nt	Dordrecht Library was not functional for 6 months	Tribunal could not convene in time
SECTION 46	Comments	5 Library Committee Meetings by 30 June 2019	Cemetery Lay Out Plan was submitted to Council, but Tribunal only approved in August 2019
18/2019	Achieved/ Not Achieved	Not Achi eved	Achi eved
ATION PLAN - 20	Actual Achievement (2018/19)	5 Library Committee Meetings by 30 June 2019	Cemetery Lay Out Plan was submitted to Council, but Tribunal only approved in August 2019
EMALAHLENI LOCAL MUNICIPALITY AL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019	6 Library Committee Meetings convened by 30 June 2019	Layout Plan for Indwe cemetery developed and submitted to Council for approval by 30 June 2019
EMALAHLENI LOCAL MUNICIPALITY SE DELIVERY AND BUDGET IMPLEME	Actual Performance	Achieved. 7 Library Committee meetings convened.	Not Achieved. Report submitted by Service Provider the municipality is waiting for the approval of the District Tribunal. The Draft Cemetery (ayout plan will be submitted to CHDM joint planning tribunal in quarter one of the 2018/2019
EMAL SERVICE DE	Annual Target 2017/2018	P041 - 6 Library Committee Meetings convened by 30 June 2018	P042 - One (1) Cemetery Lay-Out Plan (Indwe) developed and submitted to Council for approvat by 30 June 2018
	Indicator Code	1704237041	Z409_1.81_81_1
TITISNI	Funding Source	xədO	xədO
DATED	pegbug noitsoollA	<u>-</u>	90 000 00
CONSOLIDATED INSTITUTION	Baseline Indicator 2017/2018	6 Library Committee meetings convened	3 existing centetene s
	Key Performa nce Indicator	Number of library committee meetings convened	Lay-Out Plan for Indwe Cemetery developed and submitted to Council for approval
	Strategy		Facilitate developm ent and approval of Layout Plan for Indwe Cemetery
	Strategic Objective		To ensure availability of amenities to which the public has full access by June 2019
	Priority Area		Cemerery Development

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		neiboteu	SHOI	SHOI				
-0		Portfoli o of evidenc e annual	Quarterly y Reports on Land Audit Program mes impleme nted	Quartert y Reports on Formalis ation of Cacadu				
		Remedi al Action						
		Reasons for Non- Achieveme nt						
	SECTION 46	Comments	4 Land Audit Programmes implemented (Rezoning of Sites. Identification of unsurveyed sites. Identification of vacant gvt land identification of municipal land for leasing/dispos all by 30 June 2019	Formal Registration of Cacadu (Extension 3 and 4) by Deeds Office facilitated by 30 June 2019				
EMALAHLENI LOCAL MUNICIPALITY	L SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Achieved/ Not Achieved	eved	Achi				
		Actual Achievement (2018/19)	4 Land Audit Programmes implemented (Rezoning of sites, Identification of unsurveyed sites, Identification of vacant gvt land identification of municipal land for leasing/dispos al) by 30 June 2019	Formal Registration of Cacadu (Extension 3 and 4) by Deeds Office facilitated by: 30 June 2019				
		Annual Target 2018/2019	4 Land Audit Programmes implemented (Rezoning of sites. Identification of unsurveyed sites. Identification of vacant gvt land, identification of municipal land for leasing/disposal) by 30 June 2019	Formal Registration of Cacadu (Extension 3 and 4) by Deeds Office facilitated by 30 June 2019				
	LIVERY AND BUC	Actual Performance						
EMAL	SERVICE DE	Annual Target 2017/2018	840					
	TIONAL	Indicator Code	sera_e.\ri_\ri_!	8819_4.71_71_1				
	UTILL	Funding Source	Opex	XədO				
	ATED	Budget noitscollA	30,000	90.000 03				
39	CONSOLIDATED INSTITUTIONA	Baseline Indicator 2017/2018	Not Applicable	Mavuya Township In 2014/2015 (Indwe)				
		Key Performa nce Indicator	Number of Land Audit Programm es implement ed	Formal Formal Registratio n of Cacadu (Extension 3 and 4) by Deeds Office				
		Strategy	Implement the approved Spatial Developm ent Framewor k	Fachitate Formal Registratio n of Cacadu				
		Strategic Objective	To facilitate the the developm ent of land in a sustainable e manner by June 2019					
		Bend (thoing	gninnsl9 leiteq2					

	Custodian	SHOI	SHai	Budget and Treasury
	Portfoli o of evidenc e annuat	Quarterly reports on community engage ment sessions facilitate d	Quarterly Y Reports on land use applications	Reviewe d Indigent Register Quarter y Reports on free
	Remedi al Action			
	Reasons for Non- Achieveme nt			
SECTION 46	Comments	7 Community engagement sessions facilitated during project implementation by 30 June 2019	Compliant land use applications received. processed and approved by AO or CHDM by 30 June 2019	The 2017/18 indigent applications have been processed in the first quarter, 3 971 indigents have been approved and
18/2019	Achieved beveinced	eved	eved	Achi eved
ATION PLAN - 20	Actual Achievement (2018/19)	7 Community engagement sessions facilitated during project implementation n by 30 June 2019	Compliant land use applications received processed and approved by AO or CHDM by 30 June 2019	3 971 households receiving free basic service (Electricity) by 30 June 2019
EMALAHLENI LOCAL MUNICIPALITY AAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019	7 Community engagement sessions facilitated during project implementation by 30 June 2019	100% Compliant land use land use applications received. processed and approved by AO or CHDM by 30 June 2019	3900 households receiving free basic service (Electricity) by 30 June 2019
EMALAHLENI LOCAL MUNICIPALITY 3E DELIVERY AND BUDGET IMPLEMI	Actual Performance	Achieved. 8 Community engagement facilitated	Achieved. 100% land use applications received. processed and approved.	Achieved. All approved applications were captured, and indigents subsidised monthly. Proposal were developed and submitted for
EMAI SERVICE DE	Annual Target 2017/2018	Pode - 8 Communit y y y engageme nt sessions facilitated dunng project implement ation by 30 June 2018	P047- 100% land use application s received processed and approved by 30 June 2018	P048 - 3700 household s s registered and receiving indigent support (Electricity
TIONAL	Indicator Code	8409_1.91_91_1	7409_1.02_02_1	1_21_1_P048
UTITEN	Funding Source	xədO	хэдО	Opex
ATEDI	Budget	0Ы	30 000,00	00,000 00£ Z
CONSOLIDATED INSTITUTION	Baseline Indicator 2017/2018	ISD Provincial guidelines	Developm ent Register for 2016 SPLUMA By-Law, SDF	3500 household s receiving free basic service (Electricity
	Key Performa nce Indicator	Number of community engageme nt sessions facilitated during project implement atton	Percentage e of complaint land use application s received, processed and approved by AO or CHDM Tribunal	Number of household s receiving free basic service (electricity)
	Strategy	Facilitate community engageme nt sessions during project implement ation	Implement Spatial Planning and Land Use Managem ent (SPLUMA)	Review and update of the Indigent Register
	Strategic Objective	To promote social cohesion during implement atton of projects between communities and the municipalit y by June 2019	To promote an orderly built environme nt by June 2019	To ensure provision of free basic services to indigent communities by June 2019
	Priority Area	Institutional Social Development	Land Use Management	hoqqu2 tnegibnl

	nsibotsuƏ											_									_		_
Portfoli o of	evidenc e annual	basic	301																	_	_		
Remedi	Action																						
Reasons for Non-	Achieveme nt																						
Comments		was receiving free basic	electricity	monthly The	Business plan	developed and	approved in	the second	quarter, The	awareness	campaigns	was	conducted in	all three towns	registration as	per business	plan was done	in the third	quarter. The	indigent	reports was	prepared and	Submilled
pe/	Achleved/ eldoA fold																						
Actual Achievement	(2018/19)																						
Annual Target 2018/2019																							
Actual Performance		approval. Awareness	campaigns	were	and the	ndigent	registrations	were done and	completed in	March 2018	Indigent	application	rorms were	annroved A	total of 3 707	indigents were	registered and	are receiving	electricity	subsidisation.	1 1000000000000000000000000000000000000		
Annual Target	810211102) by 30 June 2018																					
	Indicator Code																						
	Funding Source																						
	segbud tottscollA																						
Baseline Indicator	9107//107																						
Key Performa	Indicator																						
Strategy																							
Strategic Objective																							
	A ylioi19																						

	Custodian	AT039	AT039	ATG39
Portfoli	o of evidenc e annual	Quarterly reports on SMIME Information on Dissemination and advisory sessions	Quarterly reports on support provided provided	Licenses
Remedi	al Action			
Reasons	for Non- Achieveme nt			
AL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46 Annual Annual Target Actual Comments		5 SMME Information Dissemination and advisory sessions were facilitated	i SMME (Mpathulo Youth Project) has been successfully supported	36 Business Licenses have been issued
b	Achieved\	Achi	eved	Achi
Actual	Achievement (2018/19)	5 SMME Information Dissemination and advisory sessions were facilitated	1 SMME (Mpothulo Youth Project) has been successfully supported	36 Business Licenses have been issued
Annual Target	2018/2019	4 SMME information dissemination and advisory sessions facilitated by 30 June 2019	1 SMME supported (Mpothulo Youth Project) at (Ward 1) by 30 June 2019	20 Businesses and Hawker licenses issued (6 Indwe, 8 Lady Frere and 6 Dordrecht) by 30 June 2019
Actual	Performance	Achieved. 7 Information Dissemination Sessions on SMME programmes were conducted	Achieved. 1 SMME SUMBE Supported (Auto Styling) production inputs were conducted on the 19th February 2018. Official hand over of production inputs were provided on the 13th June 2018 at Indwe Auto Styling Car Wash.	Achieved, 62 Businesses and Hawkers Ikcensed issued (8 Indwe, 50 Lady Frere
Annual	larget 2017/2018	P049 - 4 SMME Informatio dissemination and advisory sessions facilitated by 30 June 2018	P050 - 1 SMME supported (Auto Styling) in Indwe by 30 June 2018 (Productio n inputs)	P051 - 20 Businesse s and Hawkers licensed (6 Indwe, 6 Lady Frere
	Indicator Gode	2_22_22.1_P049	2 22 22.2 P050	2.22.22.3 51
	Runding Source	xədO	Орех	VədO
	segbu8 noitsoollA	15 000,00	00'000 09	=
Baseline	Indicator 2017/2018	4 SMME information no dissemination and advisory sessions facilitated (Ward 4,11,10,14, and 16)	1 SMME supported (Auto Styling)	20 Businesse s and Hawkers licensed (6 Indwe, 6 Lady Frere
Key	Performa nce Indicator	Number of informatio n dissemination and advisory sessions conducted	Number of SMME's supported	Number of Business and Hawker licenses issued
Strategy		Facilitate SMMEs formalizati on and advisory information n services	Support emergent businesse s to build more economic capacity	Issue licences of businesse s and hawkers
Strategic	Codective	facilitate formalizati on and support developm ent of SMMEs within ELM June 2019		·
\vdash	Priority Area	inamqo	Small Medium and Micro Enterprise Deve	

	Custodian					ΑJ	LO3	ld			Τ	٧	TO39				ATC	ЫЕ		
(a) (c)	Portfoli o of evidenc e annual		Quarterly y reports									Brandin	g Receipts	Onarted	, x	Reports	Livestoc	Marketin	on.	sessions facilitate d
	Remedi al Action	•																		
8	Reasons for Non- Achieveme nt																			
SECTION 46	Comments		3 Advisory sessions	(Crop	Livestock	Improvement)	In Cacadu (1), Indwe (1) and	Dordrecht	centre (1). and 1 farmer's	day conducted in ELM by 30	617 livestock	branded in	June 2019	4 vestock	Marketing	Sessions facilitated in	Indwe (1),	and Cacadu	(2) by 30 June	5013
18/2019	Achieved/ Not Achieved		Achi								Achi	eved		Ach	eved					
ATION PLAN - 20	Actual Achievement (2018/19)		3 Advisory sessions	(Crop	Livestock	Improvement)	In Cacado (1).	Dordrecht	and 1 farmer's	day conducted in ELM by 30	617 Iivestock	branded in	June 2019	4 Livestock	Marketing	Sessions facilitated in	Dordrecht (1).	and Cacadu	(2) by 30 June	EL02
EMALAHLENI LOCAL MUNICIPALITY L SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019		3 Advisory sessions (Crop	Production,	Improvement) in	Cacadu (1),	Dordrecht	Centre (1), and	conducted in	ELM by 30 June 2019	500 livestock	branded in ELM	6.02 510.00	4 Livestock	Marketing	sessions facilitated in	Indwe (1). Dordrecht (1)	and Cacadu (2)	by 30 June 2019	
EMALAHLENI LOCAL MUNICIPALITY JE DELIVERY AND BUDGET IMPLEMI	Actual Performance	and 8 Dordrecht)	Achieved, 3 advisory	session on	production,	branding and	on Genetic	improvement,	ranners Day	conducted on 15 Dec 2017	Achieved.	517 Investock		Achieved, 2	Livestock	Sessions	facilitated, 1 at Oacen in	February and	1 on the 24th	Nganda.
EMAL SERVICE DE	Annual Target 2017/2018	and 8 Dordrecht) by 30 June 2018	P052 - 3 Advisory	sessions	farmer's	day	in ELM by	30 June	9107		P054 -	200	branded in ELM by 30 June 2018	P055 - 2	Livestock	Sessions	facilitated in ELM by	30 June	2018	
	Indicator				750	d⁻l	53	23	2			1_£.	024 52.23		9	390d	_ _4.6	z-1	- - - -	Z
UTITISM	Funding Source					Χŧ	odO	1				>	ope				xəd	0		
DATED	fegbuð noitsoollA				-						-					-				
CONSOLIDATED INSTITUTIONA	Baseline Indicator 2017/2018	and 8 Dordrecht	3 Advisory sessions	and 1 farmer's	day	conducted					200	livestock		2	Livestock	Sessions	facilitated			
	Key Performa nce Indicator		Number of advisory	sessions	farmers	day					Number of	livestock		Number of	Livestock	Sessions	facilitated			
	Strategy		Provide advisory	support to farmers							Brand	Livestock		Market	Livestock					
	Strategic Objective		To promate	and	agricultura	developm	ent by	June 2019												
	Priority Area									Juəwdo	l9ve	יו ספ	griculturs	#						

		Custodian	a. w a 4	_
		Portfoli o of evidenc e annual	Quarterly y Reports on formalis atton of product on assembl y	_
EMALAHLENI LOCAL MUNICIPALITY		Remedi al Action		
		Reasons for Non- Achieveme nt		
	SECTION 46	Comments	2 Production Assembly structures formalised in Tshatshu and Xonxa	
	18/2019	Achieved/ Not Achieved	Achi eved	
	ATION PLAN - 20	Actual Achievement (2018/19)	2 Production Assembly structures formalised in Thatshu and Xonxa	
	AL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019	2 production assembly structures formalised (registed as co-orps) in Tshatshu and Xonxa by 30 June 2019	
	LIVERY AND BUI	Actual Performance	Achieved. 1 stakeholder engagement on production assembles was conducted on the 23/08/17 at Chris Cooperative Centre. Learning and sharing session conducted at Xonxa from 11-14 Dec 2017, 1 production assembly revitalised in the 27 of March 2018. 1 production assembly revitalised in the 27 of March 2018. 1 production assembly revitalised in Xonxa on the 08 of February	2018
EMAL	SERVICE DE	Annual Target 2017/2018	P056 - 2 production assemblie s frevitalized (Commite es)in Tshatshu and Xonxa by 30 June 2018	
	TONAL	Indicator Gode	2_24_24.1_P056	
	UTITSN	Funding Source	хэфО	
	ATED	fagbuð nottspollA	· ·	
	CONSOLIDATED INSTITUTION	Baseline Indicator 2017/2018	production assembly revitalized to Tshatshu and Xonxa	
		Key Performa nce Indicator	Number of of Assembly Stroctures formalised (Registere d)	
		Strategy	Facilitate formalisati on of production assembly structures	
		Strategic Objective		
		Priority Area		

	T		
	Custodian	ATGE	AT039
	Portfoli o of evidenc e annual	Quarterly reports on Capacity building sessions	Funding Proposal Proposal of Submissi on and Follow- Up
	Remedi al Action		29
	Reasons for Non- Achieveme nt		
SECTION 46	Comments	3 Forestry Management Capacity Building Sessions facilitated, and Forestry Committees established in Ward 4, 12 and 2	Development and submission of Funding Proposal on the implementation of Rural Enterprise Development Hub (as per the signed MOU with Ibuyambo Mill)
18/2019	Achieved/ Not Achieved	Achi	eved eved
ATION PLAN - 20	Actual Achievement (2018/19)	3 Forestry Management Capacity Building Sessions facilitated, and Forestry Committees established in Ward 4, 12 and 2	Development and submission of Funding Proposal on the implementation of Rural Enterprise Development Hub (as per the signed MOU with Ibuyambo Mill)
EMALAHLENI LOCAL MUNICIPALITY L SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019	3 Forestry Management Capacity Building Sessions facilitated, and Forestry Committees established in Ward 4, 12 and 2 by 30 June 2019	Development and submission of Funding Proposal on the implementation of Rural Enterprise Development Hub (as per the signed MOU with buyambo Mill) and by 30 June 2019
EMALAHLENI LOCAL MUNICIPALITY SE DELIVERY AND BUDGET IMPLEMI	Actual	Achieved. 3 forestry management committee establishment at ward 2 (Machashu) on the 12th October 2017 ward 6 (Khundulu) on the 21st March 2018, and ward 13 (Machubeni) on the 24th on the 24th	Achieved. Request for funding for dry Land Crop production has been written to CHDM. On 10 Nov 2017 a follow up meeting on the funding proposal with CHDA was conducted at CHDA was Boardroom.
EMAL SERVICE DE	Annual Target 2017/2018	P057 - 3 Forestry Managem ent committee s establishe d in Ward 2, 6 and 13 by 30 June 2018	P059 - Development and Submissio nof Funding Proposals on the implement ation of Rural Enterprise Development Hub (as per the signed MOU with
	Indicator Code	2_25_25.1_8057	2_26_26.2_P059
UTITES	Funding Source	Opex	Opex
ATED II	fegbuð nottspollA		-
CONSOLIDATED INSTITUTIONA	Baseline Indicator 2017/2018	3 Forestry managem ent committee s s establishe d in Ward 2, 6 and 13	RED Hub Facility
	Key Performa nce Indicator	Number of Forestry Capacity Building Sessions facilitated. and Forestry Committee s establishe d	Developm ent and submissio n of funding proposals on the implement attion of Rural Enterprise Developm ent Hub (as per signed MOU with
	Strategy	Facilitate capacity building sessions and establish committee s	Develop and submit Funding Proposal on implement ation of Rural Enterprise Developm ent Hub
	Strategic Objective	To promote sustainable use of Forest Pantation by June 2019	promote economic developm ent within ILM by June 2019
	Priority Area	Forestry Management	

		Custodian		ATO34
fit		Portfoli o of evidenc e annual		Approve d Alien- Invasive Plant Eradicati on Plan
		Remedi al Action		
		Reasons for Non- Achieveme nt		
	SECTION 46	Comments		1 Allen- Invasive Plant Eradication Plan developed and approved by HOD
	18/2019	Achieved/ beveida fold		Achi
7. 1	ATION PLAN - 20	Actual Achievement (2018/19)		1 Allen- Invasive Plant Eradication Plan developed and approved by HOD
MUNICIPALITY	AL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019		1 Alien-Invasive Plant Eradication Plan developed and approved by HOD 30 June 2019
EMALAHLENI LOCAL MUNICIPALITY	LIVERY AND BU	Actual Performance	submitted proposal conducted on the 12th of February 2018 at DRDLAR and on the 7th of March 2018 at Chris Hani District offices. Follow up on submitted proposal conducted on the 07 May 2018 at Ibuyambo Offices (Strategic planning meeting).	
EMAI	SERVICE DE	Annual Target 2017/2018	Ibuyambo Mill) by 30 June 2018	
	TIONAL	Indicator Code		
	UTILL	Funding Source		СНDМ
15	ATEDI	fegbuð nottspollA		R 330 000
	CONSOLIDATED INSTITUTION	Baseline Indicator 2017/2018		Not Applicable
		Key Performa nce Indicator	ibuyambo Mill}	Number of Alten- Invasive Plant Eradicatio n Plan developed and and approved by HOD
		Strategy		Develop Allen- Invasive Plant Eradicatio n Plan
		Strategic Objective		To promote economic developm ent within Emalahlen i LM by June 2019
		Priority Area		Crop Management

Touristi Developitieni and	Heritage Management	Priority Area
	To Implement Tourism and Heritage Managem ent Plan by June 2019	Objective
	Conduct Tourism Roadshow s	Strategy
ï	Number of Tourism Roadshow s conducted	Performa nce Indicator
	2 Tourism Marketing Events conducted	Baseline Indicator 2017/2018
		Budget Allocation
Ope	(Funding Source
2_27_27.4	_P134	Indicator Code
	P060 - 2 Tourism Marketing Events conducted in ELM by 30 June 2018	Annual Target 2017/2018
2017 in Dordrecht, 1 tourism marketing event held on the 27 of March 2018, 1 Tourism Marketing Event will be conducted in a form of a Tourism Roadshow in	Achieved. Data collection on existing cultural groups was conducted on the 10th July 2017 at Lady Frere, Indwe and Dordrecht. Build Up event was conducted 14 November	Actual Performance
	4 Tourism Roadshows conducted in ELM by 30 June 2019	Annual Target 2018/2019
	4 Tourism Roadshows conducted in ELM by 30 June 2019	Actual Achievement (2018/19)
	Achi eved	Achieved/ Not Achieved
	4 Tourism Roadshows conducted in ELM by 30 June 2019	Comments
		Reasons for Non- Achieveme nt
		Remedi al Action
	Quarterl y reports on Roadsh ows conduct ed	Portfoli o of evidenc e annual
PEDTA		Custodian

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	Priority Area	Tourism Development and Heritage Management	Tourism Developn
:	Strategic Objective	To Implement Tourism and Heritage Managem ent Plan by June 2019	
	Strategy	Facilitate grading sessions of tourism establishm ents Conduct Tourism and heritage awareness programs	Conduct Tourism and heritage awareness programs
	Key Performa nce Indicator	Number of tourism establishm ent grading sessions facilitated Number of Heritage events and awareness programm es conducted	Number of Heritage events and awareness programm es conducted
CONSOLID	Baseline Indicator 2017/2018	3 tourism establishm ent grading sessions facilitated in Cacadu. Dordrecht and Indwe	Tourism and Heritage Awarenes s conducted
ATED 1	Budget Allocation	000,00	85 000,00
USTITU	Funding Source	oex Opex	Орех
TIONAL	Indicator Code	.4_P063	2_27_27.4_P063
SERVICE DE	Annual Target 2017/2018	P062 - 3 tourism establishm ent grading sessions facilitated in Cacadu, Dordrecht and Indwe by 30 June 2018 P063 - 1 hentage event and 3 heritage awareness programs conducted in Cacadu,	hentage event and 3 heritage awareness programs conducted in Cacadu, Dordrecht and Indwe by 30 June 2018
SE DELIVERY AND BUDGET IMPLEME	Actual Performance	Achieved. 3 tourism establishment s Grading session was facilitated and conducted on the 11th of November 2017 at Cacadu. on the 26th of January 2018 with ECDC and ECPTA at Dordrecht and another one on the 18th May 2018 with Ms Zondwa at indwe. Achieved. 1 Heritage event was conducted on 26 September 2017 at Bathembu Calabash. 3	Achieved. 1 Heritage event was conducted on 26 September 2017 at Bathembu Calabash. 3 heritage awareness programmes were conducted on 15th August 2017 at
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION	Annual Target 2018/2019	4 tourism establishment grading sessions facilitated in Cacadu (2) Dordrecht (1) and Indwe (1) by 30 June 2019 1 heritage event and 3 hentage awareness programs conducted in Cacadu Dordrecht and Indwe by 30	1 heritage event and 3 heritage awareness programs conducted in Cacadu. Dordrecht and Indwe by 30 June 2019
TATION PLAN - 2	Actual Achievement (2018/19)		1 heritage event and 3 heritage awareness programs conducted in Cacadu. Dordrecht and Indwe by 30 June 2019
018/201	Achieved/ Not Achieved	Achi eved eved	Achi eved
N PLAN - 2018/2019 SECTION 46	Comments	4 tourism establishment grading sessions facilitated in Cacadu (2) Dordrecht (1) and Indwe (1) by 30 June 2019 1 heritage event and 3 heritage event and 3 heritage awareness programs conducted in Cacadu	1 heritage event and 3 heritage awareness programs conducted in Cacadu Dordrecht and Indwe by 30 June 2019
	Reasons for Non- Achieveme nt		
	Remedi al Action		
	Portfoli o of evidenc e annual	Quarterl y reports on tourism grading sessions facilitate d Quarterl y reports on heritage event and awarene ss	Quarterl y reports on heritage event and awarene ss program conduct ed
	Custodian	TA PEDTA	PEDTA

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	Priority Area	= =	<u>-</u>						ng	Mini		_
	Strategic Objective					7	To	streamline	for	accelerati	socio-	economic developm
	Strategy		Facilitate capacity building sessions for Tourism	Establish ments			Provide	administra	suppor			
	Key Performa nce Indicator		Number of capacity building sessions facilitated for	Establish ments			Number of	small- scale	Cooperativ	es	provided with	administra
CONSOLID	Baseline Indicator 2017/2018		Local Tourism Organizati ons				SMME	Support				
ATED	Budget Allocation			-				-				
NTITESN	Funding Source		· <u> </u>	рех	C				×	Ope		
TONAL	Indicator Code			27.6_P064	2_27_2			066	1_P	29.	_29_	2
SERVICE DE	Annual Target 2017/2018		P064 - 4 Local Tourism Organisati on Monitoring	Sessions conducted in Cacadu Dordrecht	and indwe by 30 June 2018		P066 - 5	making	Cooperativ	provided	administra	Support in
SE DELIVERY AND BUDGET IMPLEM	Actual Performance	21 February 2018 at Luphaphasi and at Dordrecht on the 16th of May 2018.	Achieved, 4 LTO monatoring session was conducted on the 20th	September 2017 at Cacadu, on the 14 Nov	2017 in Dordrecht, the other on the	2018 at Indiwe and lastly on the 30th of	Indwe Achieved.	Stakeholder engagement	with brick-	cooperatives	was conducted on	29 August
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019		4 Tourism capacity building sessions for Tourism Establishments facilitated	Cacadu (2). Dordrecht (1) and Indwe (1) by 30 June 2019			5 small scale	Cooperatives	provided with	support in Indwe	(Ward 15) by 30 June 2019	
TATION PLAN - 20	Actual Achievement (2018/19)		4 Tourism capacity building sessions for Tourism Establishment	s facilitated Cacadu (2) Dordrecht (1) and Indwe (1)	by 30 June 2019		5 small scale	Cooperatives	provided with	support in	Indwe (Ward	
)18/201	Achieved/ Not Achieved		Achi eved				Achi	eved				
SECTION 46	Comments		4 Tourism capacity building sessions for Tourism Establishment	s facilitated Cacadu (2) Dordrecht (1) and Indwe (1)	by 30 June 2019		5 small scale	mining Cooperatives	provided with	support in	Indwe (Ward	
	Reasons for Non- Achieveme nt	***										
	Remedi al Action											
	Portfoli o of evidenc e annual		Quarterl y reports				Quarter	y reports				
	Custodian			DTA	PE				Ά	EDT	P	

Priority Are	еа			
ent within ELM by June 2019	Strategic Objective			
	Strategy			
nce Indicator tive support	Key Performa		8	
2017/2018	Baseline indicator	CONSOLI		
Budget Allocation		DATEDI		
Funding Source		NTITISN		
Indicator Code		TIONAL		
2017/2018 by 30 June 2018	Annual Target	SERVICE DE		EMAI
Dordrecht. Support Plan for 2017/2018 was developed and has been implemented. Support plan for brack making cooperatives has been implemented and cooperatives have visited SARS. SEDA	Actual Performance	LIVERY AND BU	STATE OF THE PARTY	EMALAHLENI LOCAL MUNICIPALITY
	Annual Target 2018/2019	CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION	MONICHALIT	ALI INDICIDALITA
(2018/19)	Actual Achievement			
Achieved/ Not Achieve	red	18/2019		
N	Comments	PLAN - 2018/2019 SECTION 46		
nt nt	Reasons for Non-			
Action	Remedi			
evidenc e annuat	Portfoli o of			
Custodian				

	Job Creatio	n	Priority Area	A
		To improve economic developm ent within ELM by June 2019	Strategic Objective	
		Create pobs to reduce unemploy ment in ELM jurisdiction	Strategy	
	pobs created through Communit y Works Programm e Expanded Public Works, Electrificati on and Indigent Programm	Number of reports on Job Creation Projects submitted to Council Structures for noting	Key Performa nce Indicator	
	created	17 Wards with Functional Communit y Works Programm	CONSOLID Baseline Indicator 2017/2018	
	022 000 00 00	1	Budget M Allocation	
	אָם די פֿ	× Ope	Funding Source	
Κ̈́PA	0.2.3 P 06.3 8 8	0.1 0.1 7	Indicator Code	
3: GOOD GO	180 Local People employed in Projects and Reported on EPWP MIS System by 30 June 2018	P067 - 17 Wards Wards with functional Communit y Works Programm emonitored by 30 June 2018	SERVICE DE Annual Target 2017/2018	EMAL
VERNANCE AN	Acmeved. 245 Local People employed in Projected and reported on EPWP (MIS) system.	Achieved. Community Works Programme monitored in all 17 Wards through Meetings	LIVERY AND BU Actual Performance	EMALAHLENI LOCAL MUNICIPALITY
KPA 3: GOOD GOVERNANCE AND PUBLIC PARTICIPATION	People employed in Projects and Reported on EPVVP MIS System by 30 June 2019	4 reports on Job Creation Projects submitted to Council Structures for noting by 30 June 2019	CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46 Baseline Indicator Comments Annual Actual Actual Actual Comments Performance 2018/2019 Achievement Comments Ballo undoc cate 2017/2018 Comments Ballo undoc cate 2017/2018 Comments Comments Actual Actual Comments Comments Actual Comments Comments Actual Comments	MUNICIPALITY
IPATION	People employed in Projects and Reported on EPWP MIS System	4 Reports on Job Creation Project (CWP) were submitted to council structures	Actual Achievement (2018/19)	
	Acni eved	Achi eved	Achieved/ Not Achieved	
	People employed in Projects and Reported on EPWP MIS System	4 Reports on Job Creation Project (CWP) were submitted to council structures	SECTION 46 Comments	
			Reasons for Non- Achieveme nt	
			Remedi al Action	
	Employ ment Contract s Quarterl y Reports	Quarteri y Reports	Portfoli o of evidenc e annual	
	IDHS	Community Services	Custodian	

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	Priority Area	Communication	Customer Care
	Strategic Objective	To ensure fully functional systems of internal and external communic atton by June 2019	To improve Customer Care Managem ent by June 2019
	Strategy	implement Communic ation Strategy programm es	Implement Customer Care Strategy programm es
	Key Performa nce Indicator	Number of Communic ation Strategy programm es implement ed	Number of Customer Carse Care Strategy Programm es Implement ed
CONSOLID	Baseline Indicator 2017/2018	Approved Communic ation and Strategy	Approved Customer Care Strategy
ATED	Budget Allocation	250 000,00	25 000. 00
UTITI SN	Funding Source	Opex	∨ Pe
TONAL	Indicator Code	3_31_31.1_P069	2.3 2.3 2.1 0 7
SERVICE DE	Annual Target 2017/2018	P069 - 1 Communic station Strategy implement ed and reviewed by 30 June 2018	P070 - 5 Customer Care Strategy Programm es Implement ed by 30 June 2018 (Resolutio n of Customer Complaint s, Presidenti al Hotline, Customer Care Meetings, Name Badges
LIVERY AND BU	Actual Performance	Achieved. 1 Newsletter issued. 32 Media statements issued. 15 Advertisement s publicized. 39 Radio talk shows/intervie ws. 5 Outside broadcasting Calendars and diaries procured.	Achieved. Customer Care Committee has been established. Name tags were distributed to the ELM staff. Terms of Reference for Customer Satisfaction Survey developed and approved. Emalahleni & Presidential hotline Customer
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION	Annual Target 2018/2019	Communication Strategy programmes implemented by 30 June 2019	3 Customer Care Strategy Programmes Implemented (Resolution of complaints, 4 Costumer Care Committee Meetings facilitated Development and Implementation of Customer Service Standards) by 30 June 2019
	Actual Achievement (2018/19)	6 Communicatio n Strategy Programmes were implemented.	3 Customer Care Strategy Programmes Implemented (Resolution of complaints, 4 Costumer Care Care Care Committee Meetings facilitated, Development and Implementatio n of Customer Service Standards)
18/2019	Achieved/ Not Achieved	Not Achi eved	Achi eved
PLAN - 2018/2019 SECTION 46	Comments	6 Communicatio n Strategy Programmes were implemented.	3 Customer Care Strategy Programmes Implemented (Resolution of complaints, 4 Costumer Care Committee Meetings facilitated Development and Implementation of Customer Service Standards)
	Reasons for Non- Achieveme nt	Diaries and calendars were not developed due to budgetary constraints.	
	Remedi al Action	Diaries and Calenda rs are scrappe d off due to budget constraints	
	Portfoli o of evidenc e annual	Quarted y reports on impleme ntation of Commu nication Strategy program mes	Quarter y y Reports on Impleme ntation of Custom er Care Strategy
			44 11 11 444 4 4 6491

Municipal Manager's Office

Custodian

Municipal Manager's Office

- 1									_			-													_				_	
	Strategic Objective											То	improve	communit	У	participati	affairs of	the	municipalit	y by June	2019									
	Strategy											Implement	public	participatio	n strategy	programm	e e													
	Key Performa nce Indicator											Number of	Public	Participati	9	Strategy	es	Implement	ed											
CONSOLID	Baseline Indicator 2017/2018											Approved	Public	Participati	on	Strategy														
ATEDI	Budget Allocation																		00	00,	00	250								
NSTITU	Funding Source																			(pex	0								
MONAL	Indicator Code																		071	_P	3.1	_3:	33	3_						
SERVICE DE	Annual Target 2017/2018	Customer Satisfactio	n Survey)									P071 - 1	Public	Participati	9	Strategy	ed by 30	June 2018												
LIVERY AND BU	Actual Performance	addressed. 3 Customer	Committee	Meeting	Dec 2017	Customer	Satisfaction	Survey has	been	presented to	Management	Not	Achieved.	The training of	Ward	Committees	planned in	Cacadu &	Mtsheko Town	Hall on the 16	- 19 October	2017, CDVV	aine nino	27 Nov 17 and	Mayoral	Outreach	Programme	took place on	2017 10 NOV	Dipay III 7107
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019											5 Public	Participation	Strategy	Programmes	Implemented by	Stoz aunt nc							a						
TATION PLAN - 20	Actual Achievement (2018/19)											It is only in the	second	quarter that	we managed	to implement	Participation	Strategy	Programmes.		•									
18/2019	Achieved/ Not Achieved	_										Z Q	Achi	eved																
SECTION 46	Comments											It is only in the	second	quarter that	we managed	to implement	all 5 Public	Strateov	Programmes.											
	Reasons for Non- Achieveme											This is due	õ	postponeme	nt of these	meetings by	stakeholders	is only	facilitating	the seating	depends	entirely to	availability	of						
	Remedi al Action											The	office of	the	Speaker	Will	revive all	commit	ees to	see if	stakehol	ders are	still Keen	continue	200	member	s of	these	committ	ees
	Portfoli o of evidenc e annual											Quarter	<	Reports	on	impleme	ntation	Participa	tion	Strategy										
	Custodian																æ	Offic	s C	jer	nag	Ma	al	icipa	บก	М				
			_			_	_	_	_		_	_	_	_	_	_		_		-							_			

Community Participation

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Priority Area Strategic Objective			
Strategy			Develop a Ward Based Plan Document
Key Performa nce Indicator	Number of Ward Committee Capacity Building Programm es implement ed	Number of Initiation Forum Meetings conducted	ward- based plan document s developed and submitted to Council for approval
Baseline Indicator 2017/2018	t Ward Committee Capacity Building Programm e implement ed	4 Initiation Forum Meetings conducted	ward- based plan prepared by CoGTA
Budget Allocation	200 000.00	50 000.00	500 000,00
Funding Source	Opex	Opex	СНДМ
Indicator Code	1_33_33.2_P135	3_33_33.2_P072	3_33_33.1_P071.1
Annual Target 2017/2018		P072 - 4 Initiation Forum Meetings conducted by 30 June 2018	
Actual Performance		Achieved, 4 initiation meetings conducted	
Annual Target 2018/2019	1 Ward Committee Capacity Building Building Programme implemented by 30 June 2019	4 initiation Forum meetings conducted by 30 June 2019	1 Ward Based Plan document developed and submitted to Council structures for approval by 30 June 2019
Actual Achievement (2018/19)	1 Ward Committee Capacity Building Programme Implemented by 30 June 2019	4 Initiation Forum meetings conducted by 30 June 2019	A service provider for the development of Ward Based Plans was contracted with the assistance of the funds received from the District Municipality. A consolidated was
Achieved/ Not Achieved	Achi eved	Achi eved	Achi eved
Comments	1 Ward Committee Capacity Building Programme Implemented by 30 June 2019	4 Instation Forum meetings conducted by 30 June 2019	A service provider for the development of Ward Based Plans was contracted with the assistance of the funds received from the District Municipality. A consolidated reported was included in
Reasons for Non- Achieveme nt			
Remedi al Action			
Portfoli o of evidenc e annual	Quarterl y Reports on Capacity Building Program mes impleme nled	Quarter y Report on Initiation Forum Meeting s conduct ed	Council resolution on the approval of the Ward Based Plan Ward Based Plan
Custodian	MM"s Office	MM s Office	Municipal Manager's Office

Legal Compliance

	Priority Area														dit	nal Aud	Interr				
	Strategic Objective								*	effective	Audit and	Corporate	e function	that will	improved	e and clean	administra tion by 2019				
	Strategy	_								municipal	internal	controls	execution	of the	Audit Plan						
	Key Performa nce Indicator									based	Internal	Audit Plan	to Audit	Committee	approval		Number of reports on progress against	approved	submitted to AC for		
CONSOLID	Baseline Indicator 2017/2018								3	Risk	based	Internal					4 reports in 2017/18				
ATED	Budget Allocation																-				
UTITESN	Funding Source												рех	0			****	рех	0		
TANOIT	Indicator Code										'6	P07	5.2_	5_3	3_3		P136	35.3_0	_35_3		
SERVICE DE	Annual Target 2017/2018		Ī				5										3				
E DELIVERY AND BUDGET IMPLEM	Actual Performance	Strategy Bylaws	developed Pound By-law	Policies were	submitted to	adoption on	the 26 June	2018					5				6)	8			
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019	-								based Internal	Audit Plan	submitted to	by 31 July 2018				4 progress reports against approved IAP submitted to AC	for noting by 30 June 2019			
ATION PLAN - 2	Actual Achievement (2018/19)	Participation	Newly Developed	Petitions	Policy	Service	Standards	Disaster	Policy	based Internal	Audit Plan	submitted to	Committee.				4 Progress reports against Internal audit	plan submitted to Audit	Committee		
18/2019	Achieved/ Not Achieved									Achi							Achi eved				
SECTION 46	Comments	Participation	Newly Developed	Petitions	Policy	Service	Standards	Disaster	Policy	based internal	Audit Plan	submitted to	Committee.				4 Progress reports against Internal audit plan submitted	to Audit			
	Reasons for Non- Achieveme nt																				
	Remedi al Action																				_
	Portfoli o of evidenc e annual									Risk	Audit	Plan, AC	AC AC	agenda,	nce	register	Progres s Reports	Committ	Agendas	and	register
	Custodian											ce	Offi	M's	M		e	Offic	MM's		

	Priority Area		
	Strategic Objective		
	Strategy	Convene regular audit committee meetings	
	Key Performa nce Indicator	Number of Audit Committee meetings convened	Number of Audit Committee reports submitted to Council for noting
CONSOLID	Baseline Indicator 2017/2018	4 AC meetings in 2018	4 AC reports submitted to council in 2018
ATED	Budget Allocation		
UTCTON	Funding Source	Opex	
ANOIT	Indicator Code	3_35_35.1_P075	3_35_35.2_P076
SERVICE DE	Annual Target 2017/2018	P075 - 4 Audit and Performan ce Committee meetings convened by 30 June 2018	Audit Committee Reports on Governan ce and Implement ation of Internal Controls submitted to Council for noting by 30 June 2018
WEBY AND RE	Actual Performance	Achieved. 6 Performance Audit Committee meeting was convened 5 Audit Committee meeting was convened on 26 July 2017 as well as on 25 August 2017	Achieved. Eight Performance Audit Committee report was submitted to the Council meeting. Eight Audit Committee report was submitted to the Council meeting held on 29 August 2017.
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND RUDGET INDI EMENTATION	Annual Target 2018/2019	4 Audit Committee meetings convened by 30 June 2019	4 Audit Committee reports submitted to council for noting by 30 June 2019
	Actual Achievement (2018/19)	4 audit committee meelings were held during 2018/19 financial year.	4 Audit Committee reports submitted to Council for noting
140/304	Achleved/ Not Achieved	Achi	Achi eved
DI AN - 2048/2019 SECTION 46	Comments	4 audit committee meetings were held during 2018/19 financial year.	. 4 Audit Committee reports submitted to Council for noting
I	Reasons for Non- Achieveme nt		
	Remedi al Action		
	Portfoli o of evidenc e annual	Quarterl y Reports. AC agendas Attenda nce registers AC minutes	Council Agenda Extracts, Actual Report, Council Altenda nce Register s. Council resolution n extract
	Custodian	Municipal Manager's Office	Municipal Manager's Office

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MPA	.C		Priority Area	
	achieve dean administra tion by June 2019		Strategic Objective	
	Implement MPAC Practical Guidelines 2011	Monitor the implement atton of the audit outcome improvem ent plan	Strategy	
quarterly municipal public accounts committee reports submitted to Council for noting	number of municipal public accounts committee meeting convened	Number of follow up reports on the implement atton of the AOIP submitted to AC for noting	Key Performa nce Indicator	
municipal public accounts committee reports submitted	4 MPAC Meetings convened	Audit Outcome Improvem ent Plan 2016/17	Baseline Indicator 2017/2018	CONSOLIO
-	-		Budget Allocation	ATEDI
Opex	Opex	·	Funding Source	ITITISE
3_35_35.4_P078	3_35_35.3_P077	1_35_35.4_P137	Indicator Code	ANGE
P078 - 4 Municipal Public Accounts Committee Reports submitted to Council by 30 June 2018	P077 - 4 Minicipal public accounts committee meetings convened by 30 June 2018		Annual Target 2017/2018	EMAL
Not Achieved. Three municipal public accounts committee reports were submitted to Council.	Achieved. 7 Municipal Public Accounts Committee Meetings Convened on 19 February 2018		Actual Performance	EMALAHLENI LOCAL MUNICIPALITY
4 Quarterly Municipal Public Accounts Committee Reports submitted to Council for noting by 30 June 2019	4 Municipal public accounts committee meetings convened by 30 June 2019	4 follow up reports on the implementation of the AOIP submitted to AC for noting by 30 June 2019	Baseline Indicator Indicator Baseline Baseline Indicator Indicator Baseline Bullocation Bu	MUNICIPALITY
Three (3) Quarterly Reports on the functionality of MPAC were submitted to Council	4 Municipal public accounts committee meetings convened by 30 June 2019	4 follow up reports on the implementation of AOIP submitted to Audit Committee for noting	Actual Achievement (2018/19)	A IS NOTED AND TO
Achi eved	Achi eved	Achi	Achieved/ Not Achieved	200
Three (3) Quarterly Reports on the functionality of MPAC were submitted to Council	4 Municipal public public accounts committee meetings convened by 30 June 2019	4 follow up reports on the implementation of AOIP submitted to Audit Committee for noting	Comments	
The items in the report the report for the 3rd quarter for noting by Council were already tabled to council			Reasons for Non- Achieveme nt	
To comply with the calendar of events			Remedi al Action	
Reports submitte d to Council, minutes	Quarteri y Reports	Actual Reports Agenda of the Audit Committ ee AC resolutio ns register	Portfoli o of evidenc e annual	
Corporate Services	MM's Office	MM"s Office	Custodian	

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	Risk Management		Priority Area
	by June 2019	that the municipalit y operates free of anticipate direct of maladmini stration, fraud and corruption	Objective To ensure
		Risk Managem ent Strategy and Operation al Plan	Strategy
		Risk Managem ent Strategies and Operation al Plan Implement ed	Number of
		Managem ent Strategy and Risk Managem ent Committee	Baseline Indicator 2017/2018
	25 000,00		Budget Allocation
	Орех	···	Funding Source
:	3_36_36.1_P079		Indicator Code
	46	Risk Managem ent Strategy and Operation al Plan implement ed by 30 June 2018	Annual Target 2017/2018
Risk Champions were appointed. Three quarterly reports were prepared and submitted to the Risk Management	Committee for noting. The audit Charter was reviewed and approved by the audit Committee.	The Strategic Risk Register and the Fraud Register were tabled to the Risk Management Committee for approval and the Audit	Performance
		Management Strategy and Operational Plan implemented by 30 June 2019	Annual Target 2018/2019
	i	the mplementation plan of Risk Management Strategy and Operational Plan tabled to the Risk Management Committee.	Actual Achievement (2018/19)
	B	eved	Achieved/ Not Achieved
		the implementation of Risk Management Strategy and Operational Plan tabled to the Risk Management Committee.	Comments
			Reasons for Non- Achieveme nt
			Remedi al Action
	Operatio nal Plan	Reports on impleme ntation of Risk Manage ment Strategy	Portfoli o of evidenc e annual
Munic	ipal Manager's Off	ico	Custodian

CONSOLID	Baseline Indicator 2017/2018	Risk Managem ent Strategy and Risk Managem ent Committee	Fraud Prevention Plan	
ATED II	Budget Allocation		-	-
UTITES	Funding Source	× e		Opex
TONAL	Indicator Code	0 0 8 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	P081	3_37_37.1_P081
SERVICE DE	Annual Target 2017/2018	P080 - 4 Risk Managem ent Committee Meetings convened by 30 June 2018	P081 - 2 Fraud and Corruption Prevention Awarenes	Prevention Prevention Awarenes s Sessions conducted by 30 June 2018
LIVERY AND BU	Actual Performance	Achieved. Risk Management Committee set on the 14 July 2017 and again on the 21 August 2017 for a special Risk Management Committee. Signed minutes of the 1st quarter. Draft minutes convened on second quarter. Other meetings were held on 28 February 2018 and the on 23 April 2018	Achieved. Fraud and Awareness Campaign conducted.	Awareness Campaign conducted. Fraud and Awareness Campaign conducted during the strategic risk assessment conducted
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019	4 Risk Management Committee Meetings convened by 30 June 2019	2 Fraud and Anti - Corruption Prevention Awareness Sessions	Awareness Sessions Conducted by 30 June 2019
ATION PLAN - 20	Actual Achievement (2018/19)	4 Risk Management Committee Meetings convened each quarter of the financial year.	2 Fraud and Anti- Corruption prevention awareness	corruption prevention awareness sessions conducted.
18/2019	Achieved/ Not Achieved	Achi	Achi eved	
SECTION 46	Comments	4 Risk Management Committee Meetings convened each quarter of the financial year.	2 Fraud and Anti-Corruption prevention awareness	Corruption prevention awareness sessions conducted.

Number of risk
Managem ent
Committee
Meetings
convened

Strategic Objective

Strategy

Key
Performa
nce
Indicator

EMALAHLENI LOCAL MUNICIPALITY

Reasons for Non-Achieveme nt

> Remedi al Action

Portfoli o of evidenc

annual

Custodian

Quarterly
y
Reports
on
Meeting
s
convene

Municipal Manager's Office

Fraud Management

stration, fraud and corruption by June 2019

To ensure that the municipalit y operates free of anticipate d risk of maladmini

Implement
Fraud and
AntiCorruption
prevention
plan

Number of Fraud and Anti -

Corruption
Prevention
Awarenes
s Sessions
Conducted

Quarteri y Report on Corrupti on Preventi on Awarene ss Session

Municipal Manager's Office

	7.1.2	-		
(2)	Strategic Objective	1	To maximize participati on of all external and internal stakehold ers by June 2019	To achieve clean administra tion by June 2019
8	Strategy		Implement IGR strategy	Develop a comprehe nsive Audit Action Plan
	Key Performa nce Indicator		Number of IGR Meetings convened	2017/2018 Audit Action Plan developed and submitted to Council for approval
CONSOLID	Baseline Indicator 2017/2018		IGR terms of reference	2016/2017 Audit Action Plan
ATED	Budget Allocation		9	•
NETE SN	Funding Source		Opex	Opex
TONAL	Indicator Code		3_38_38.1_P082	3_39_39.1_P083
EMAL SERVICE DE	Annual Target 2017/2018		P082 - 4 IGR Engageme nt Sessions conducted by 30 June 2018	P083 - 2016/2017 Audit Action Plan developed and submitted to Council for Approval by 30 June 2018
SE DELIVERY AND BUDGET IMPLEME	Actual Performance	through departments sessions	Achieved. 4 IGR Engagement sessions were convened on the 28th July 2017 October 2017 22 March 2018 18 May 2018	Achieved. Audit Action Plan follow up report was submitted to Audit Committee on 28 Feb 2018 and to Council on 20 March 2018 as well as the 26 April 2018
EMALAHLENI LOCAL MUNICIPALITY CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION DI AN. 2018/2019 SECTION 46	Annual Target 2018/2019		3 IGR Meetings convened by 30 June 2019	2017/2018 Audit Action Plan developed and submitted to Council for Approval by 30 June 2019
TATION PI AN - 20	Actual Achievement (2018/19)		3 IGR Meetings convened	The Audit Action plan was populated with the issued COAFs in the first quarter. The 2017/18 audit action plan was developed and approved by Council in the second quarter. The plan was implemented in the third and fourth quarter and
18/2010	Achieved/ Not Achieved		Achi eved	eved
SECTION 46	Comments		3 IGR Meetings convened	The Audit Action plan was populated with the issued COAFs in the first quarter. The 2017/18 audit action plan was developed and approved by Council in the second quarter. The plan was implemented in the third and fourth quarterly progress
	Reasons for Non- Achieveme nt			
	Remedi al Action			
	Portfoli o of evidenc e annual		Quarterl y Reports on impleme ntation of IGR Strategy	Council resolution approvin g 2017/18 Audit action plan & Two Quarterl y reports submitte d to Audit Committee and Council

Municipal Manager's Office

Custodian

Inter-Governmental Relations

Priority Area

Budget and Reporting

Budget and Treasury

Human Resources	Priority Are	a
To develop the skills of the workforce and unemploy ed youth to enhance their competen cies by June 2019		Strategic
Implement the HRD Strategy		Strategy
Number of HRD Strategy Programm es amplement ed: Training Intervention of Recognition of Prior Learning, Monitoring of Inservice Training and Internal Bursary	nce Indicator	Key
4 HRD strategy programm es implement ed	2017/2018	Baseline
	Budget Allocation	
Opex R	Funding Source	
4_40_40.1_P084	Indicator Code	
P084 - 2 HRD Strategy projects implement ed by 30 June 2018 WSP Training programm es In-service Training programm e Implement e Implement	2017/2018	Annual
Achieved. 4 Training programmes for Councillors have been submitted to SCM for procurement The specification for RPL has also been submitted for advertisement. Internal bursary was adventised during the month of November. 4 training programmes		Actual
KPA 4: MUNICIPAL TRANSFORMATION AND INSTITUTIONAL DEVELOPMENT P084 - 2 HRD HRD Training HRD Training Frogrammes Strategy Frogrammes Frogrammes For Councillors Have been Eath y 30 Horger for Councillors Skills Learnership) by Frogramme Fraining Frogramm For RPL has Base Base Base Horger for RPL has Base Base Horger for RPL has Base Base Base Base Base Base Base Ba		Baseline Annual Actual Annual Target Actual Comments
n was at 83% as at 31 June 2019 LDEVELOPMENT Three training programmes have been implemented. Inservice Training and jearnership programme implemented	(2018/19) (2018/19) progress reports was prepared and submitted. The implementation	Actual
Ach	Achieved/ Not Achieve	ed S
Three training programmes have been implemented. Inservice Training and learnership programme implemented	prepared and submitted. The implementation n was at 83% as at 31 June 2019	Comments
	Achieveme nt	Reasons
	Action	Remedi
Quarterly Report on each program me impleme nted	evidenc evidenc e annual	Portfoli
Corporate Services	Custodian	

	0.00													5														1
	Strategic Objective										7	develop	the skills	or the	by June	2019												
	Strategy										Implement	PMS	Framewor	K Policy	Procedure	Manual												
	Key Performa nce Indicator			_							Level of	_	e with the	Framewor	k Policy	and	Manual											
	Baseline Indicator 2017/2018										Accountab	illy	Agreemen	ts for	and	Practitione	S											
	Budget Allocation																		рех	C								
	Funding Source																			_								
i	Indicator Code																5	P08	1.1_	_4	_41	4						
	Annual Target 2017/2018		0)								P085 -	2017/2018	ΡY	Performan	Accountab	ility	Agreemen	and	ed by 30	June 2018							ř	
	Actual Performance	Programmes Implemented	Secretaries	CPMD, Local	Government	Administration	Electrical	Engineering	Practice and	Welding	Achieved 3	Performance	Agreements	(Directors) and	Accountability	Agreements	signed (3	and 1	Manager).	Performance	Reviews were	convened on	2017, Reviews	were	facilitated and	were	convened on	2018 3
	Annual Target 2018/2019										7500	Performance	and	Accountability	Agreements	implemented by	30 June 2019											
	Actual Achievement (2018/19)		-				-				2000	Performance	and	Accountability	Agreements	9												
110/2013	Achieved/ Not Achieved										2	Ach	eved															
2010/2019 SECTION 46	Comments										2000	Performance	and	Accountability	Agreements	and to sign out												
	Reasons for Non- Achieveme nt											P Reviews	could not be	conducted	as per	timeframe												
	Remedi al Action											Facilitat	Perform	ance	Reviews	legislate	a.	es by 30	June	1000								
	Portfoli o of evidenc e annual											Cuarien	Reports	9	complia	the PMS	Framew	O.K										
- 1																												

Custodian

Individual Performance Management System

Municipal Manager's Office

Implement Number of Approved Employme reports on Employme the nt Equity Implement Plan for atton of 2017/2018 Employme at Equity Plan for Approved Employme at Equity Plan for atton of 2017/2018 Employme at Equity Plan for atton of 2017/2018 Ferviewed Employme at Equity Plan for Ocurcii Structures for noting Structures for noting For Noting Plan Structures for Noting Plan Equity Plan for Plan Employmed and Employmed and Employmed and Employment Employment Employment Employment Employment Plan Equity Plan for 2017/2018 Ferviewed Employment Employment Employment Plan Employment Plan Employment Plan Employment Plan Employment Plan Employment Plan for 2017/2018 Ferviewed Employment
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Plan implement plan for plan for plan for plan for altion of 2017/2018 Plan for plan for plan for altion of 2018/2019 Employme plan for plan for altion of 2018/2019 Employme plan for plan f
Implement Plan for 2017/2018 short of 2018/2019 of of the EE on of the EE on committee of 2018/2019 plan hat have were don the Endity Plan EE plan hat have were don the Endity Plan paproved not the EEP submitted to council short occurrent plan from the EEP submitted to committee and committee of the EEP submitted to committee and committee of the EEP submitteed to committee and complex for noting by 30 ten council of the Council to the Council the Council the Council of the Structures for structures for structure. The submitteed of the EEP submitteed to committee the EEP submitteed to complex for noting by 30 to the Council of the Council of the Structure. The structures for structure the Council of the EEP submitteed to the strike actions. A presentation on the review of the EEP submittee the Employment Equity Plan the End of the EEP submitteed to the strike actions. A presentation on the review of the EEP submittee the Employment Equity Plan the Council of the EEP submittee the Employment Equity Plan hat have were the Employment Equity Plan hat have were the Council of the EEP submitteed to committee the EEP submitteed to committee the Employment Equity Plan hat have were the Council of the EEP submitteed to the Structure. The structures for structure were the Council of the EEP submitteed to the EEP submitteed to committee the Council of the EEP submitteed to the EEP submitteed to the EEP submitteed to committee the Council of the EEP submitteed to the EEP submitteed to the EEP submitteed to committee the Council of the EEP submitteed to the EEP submitteed to committee the Council of the EEP submitteed to the EEP submitteed to committee the Council of the EEP submitteed to conclude the Council of the EEP submitteed to the EEP submitteed to the EEP submitteed to conclude the Council of the EEP submitteed to the EEP submitteed to conclude the Council of the EEP submitteed to th
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Employme and approve on of the EEP submitted to approve of the Equity Plan submitted to the Council to Council to Council to Council to Council simplement and advantage of the Council to Council simplement and an approved to Council to Council simplement and to compiled An an anding by 30 to council simplement and the Council to Council to Council simplement and the Council to Counc
Plan submitted to Council for noting A A A A A A A A A A A A A
June 2018 be submitted June 2019 to the Council held on the 26 June 2018 due to the strike actions. A presentation on the review of the Employment Equity Plan was done to the EE Committee. The situational analysis with Active Economic Population has been compiled. The
to the Council held on the 26 June 2018 due to the strike actions. A presentation on the review of the Employment Equity Plan was done to the stustional analysis with Active Economic Population has been compiled. The
Opex 4_42_42.1_P086
4_42_42.1_
4_42_4
was done to the EE Committee. The situational analysis with Active Economic Population has been compiled. The
Committee. The situational analysis with Active Economic Population has been compiled. The
analysis with Active Economic Population has been compiled. The
Active Economic Population has been compiled. The
Economic Population has been compiled. The
been compiled. The
compiled. The

Corporate Services

Recruitment

Priority Area

Custodian

	Priority Area
	Strategic Objective
	Strategy
	Key Performa nce Indicator
	Baseline Indicator 2017/2018
	Budget Allocation
	Funding Source
	Indicator Code
	Annual Target 2017/2018
presented to the EE Committee on the 14th of November 2017 and presented to the Management meeting on the 21st November 2017. It was also presented to the unit offices namely Indwe and Dordrecht, Annual Report to Dept of Labour was submitted on the 14 Jan 2018. The Employment Equity Plan will be submitted in the Council meeting by the end of October	Actual Performance
	Annual Target 2018/2019
	Actual Achievement (2018/19)
	Achieved/ Not Achieved
	Comments
	Reasons for Non- Achieveme nt
	Remedi al Action
	Portfoli o of evidenc e annual
	Custodian

Human Resources	Priority Area	
To provide Human Resources Support to all Directorat es in the Municipalit y by June 2019	Strategic Objective	
implement the Human Resources Plan	Strategy	
Human Resources Pian Implement ed	Key Performa nce Indicator	
Approved Human Resources Plan	Baseline Indicator 2017/2018	CONSOLID
	Budget Allocation	ATEDI
Opex	Funding Source	NSTITE
4_43_43_1_P087	Indicator Code	JTIONAL
P087 - 1 Human Resources Plan Implement ed by 30 June 2018	Annual Target 2017/2018	SERVICE DE
Not Achieved. The Plan was anly approved in December 2017. Workshops on Presentation of HR Plan were conducted on the following dates: Cacadu 28/09/17 and Indwe and DDX 29/09/17 03 October 2017 the H.R. Plan was presented before the Executive Committee of SAMNVU, 27 November the H.R. Plan was presented before the Executive Committee of SAMNVU, 27 November the H.R. Plan was presented before the Emalahleni Council. The H.R. Plan was adopted on the 14 December 2017: The H.R. Plan was adopted on the 14 December 2017: The H.R. Plan was adopted on the 14 December 2017: The H.R. Plan was adopted on the 14 December 2017: The H.R. Plan was adopted on Resources	Actual Performance	SE DELIVERY AND BUDGET IMPLEME
Human Resources Plan Implemented () by 30 June 2019	Annual Target 2018/2019	EMALANLENI LOCAL MUNICIPALITY CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46
Human Resources Plan Implemented could not be fully implemented	Actual Achievement (2018/19)	FATION PLAN - 20
Not Achi eved	Achieved/ Not Achieved	18/201
Human Resources Plan Implemented could not be fully implemented	Comments	SECTION 46
Due to limited financial resources during the 2017.18 Financial year the Human Resources Plan could not be implemente d	Reasons for Non- Achieveme nt	
impleme ntation plan to be reviewe d in line with the available budget in the 2019.20 financial year	Remedi al Action	
Quarteri y Report on Impleme ntation	Portfoli o of evidenc e annual	
Corporate Services	Custodian	

Shratagic Strategy (Key Description of Conscious Control (Conscious Control (Conscious Control (Conscious Control (Control (Contr		Dula city Aven				\neg					Sof.	and	on/th	nol L	notic	10011	_				
Strategy Key Indicator Performs Indicator Ince 2017/2018 Baseline Ince 2017/2018		Priority Area				_		<u> </u>				De .	earth	narih	pauc	rccu	_				
Comments Compensation) bjective				o ensure	and safe	working	nt for	ouncillors	fficials by	une zu la									
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN 2018/2019 SECTION 48 Babeline Indicator 2017/2018 Pafformance 2018/2019 Achievement 2018/2019/2019/2019/2019/2019/2019/2019/2019		Strategy				Implement	Strategy	Programm es													
Be to Budgetton grant funds and procured for the programmes of programme		Key Performa nce Indicator				Number of	Strategy	Programm	Implement	ed							•				
Reasons Remedi for Non- al Action nt The Personal Fortective issue of Equipment bad for the had insufficient funds Protective e Equipme at was address ed for the new financial year 2019/20 20 in May 2019	CONSOLI	Baseline Indicator 2017/2018				05 OHS	Programm	es	ed												
Reasons Remedi for Non- al Action nt The Personal Frotective the had insufficient funds Protective e Equipment the had al Protective e Equipme nt was address ed for the new financial year 2019/20 20 in May 2019	DATED											00	000	100							
Reasons Remedi for Non- al Action nt The Personal Fortective issue of Equipment bad for the had insufficient funds Protective e Equipme at was address ed for the new financial year 2019/20 20 in May 2019	UTITESN												ex	0							
Reasons Remedi for Non- al Action nt The Personal Frotective the had insufficient funds Protective e Equipment the had al Protective e Equipme nt was address ed for the new financial year 2019/20 20 in May 2019	TONAL							·				088	.1_P	14_4	4_						
Reasons Remedi for Non- al Action nt The Personal Fortective issue of Equipment bad for the had insufficient funds Protective e Equipme at was address ed for the new financial year 2019/20 20 in May 2019	SERVICE DE	Annual Target 2017/2018	S			P088 - 5	Strategy	Programm	implement	ed by 30	(Compens	Operating	Procedure	Operation	Controls, Personnel	Protective	- Adaption	Contractor	Control)		
Reasons Remedi for Non- al Action nt The Personal Fortective issue of Equipment bad for the had insufficient funds Protective e Equipme at was address ed for the new financial year 2019/20 20 in May 2019	SE DELIVERY AND BUDGET IMPLEME	Actual Performance	Plan is in the Implementation stage. The remainder of	activities not achieved in 2017/2018 will be	implemented in 2018/2019	Achieved.	compensation	fund are	awaiting letter	of good	SOPs	workshop are complete	(Indwe and DDX Unit	27/09/17 and Cacadu	data for PPE	sizes was	ELM Offices	Occupational	Health and	Inspections	conducted in
Reasons Remedi for Non- al Action nt The Personal Fortective issue of Equipment bad for the had insufficient funds Protective e Equipme at was address ed for the new financial year 2019/20 20 in May 2019	DGET IMPLEMEN	Annual Target 2018/2019				4 OHS Strategy	(Workman's	Compensation Fund Medical	Exams, Site	Inspections,	Inspections)	30 June 2019									
Reasons Remedi for Non- al Action nt The Personal Frotective the had insufficient funds Protective e Equipment the had al Protective e Equipme nt was address ed for the new financial year 2019/20 20 in May 2019	TATION PLAN - 20	Actual Achievement (2018/19)				3 OHS	Programmes.	The workman's	compensation	fund Medical	SHO	implemented	not procured.								
Reasons Remedi for Non- al Action nt The Personal Frotective the had insufficient funds Protective e Equipment the had al Protective e Equipme nt was address ed for the new financial year 2019/20 20 in May 2019	18/2019					Not	eved														
asons Action Non- Non- Non- Action The rotective issue of the had sufficient for the funds Personal Protective e Equipme at was address ed for the new financial year 2019/20 20 in May 2019	SECTION 46	Comments				3 OHS	Programmes.	The	compensation	fund, Medical	SHO	implemented.	Only PPE was not procured.		-						
W W		Reasons for Non- Achieveme nt				Personal	Equipment	had	funds												
Rep of c		Remedi al Action				The	the of	Budget	Personal	Protectiv	Equipme	nt was	ed for the new	financial year	2019/20 20 in	May	\$107				
tenc unit unit troil arten y y y oor ts on teme thoon DHS tregy		Portfoli o of evidenc e annual				Quarter	Reports	on	ntation	of OHS	onaisyy										
Corporate Services Custodian		Custodian										ices	Serv	orate	Corp						

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Т	Priority Area	Information and Communication Technology
	Strategic Objective	To provide an integrated ICT System that will ensure safety of information by June 2019
	Strategy	Implement ICT projects
	Key Performa nce Indicator	Number of ICT Projects Implement ed
	Baseline Indicator 2017/2018	3 ICT Projects Implement ed
	Budget Allocation	2
	Funding Source	Opex
	Indicator Code	4_45_45.1_P089
	Annual Target 2017/2018	P089 - 2 ICT Projects Implement ed by 30 June 2018 (Infrastruct ure Network Improvem ent, Broadban d)
	Actual Performance	Achieved. Network is maintained on a daily basis with requests from users and reporting on fault logged. SCM processes have been followed. The advent for the installation for traffic station has issued and awarded. Purchase order was generated for service provider to connect the Traffic Station. It is monitored through MTN and Emalahleni IT technicians with regards to network for the institutions.
	Annual Target 2018/2019	2 ICT Projects implemented by 30 June 2019
	Actual Achievement (2018/19)	1 ICT Project implemented (Access to unauthorised websites completely prohibited)
9	Achieved/ Not Achieved	Ach eved
N TENN - 20 10/20 19 OFF HON 40	Comments	1 ICT Project implemented (Access to unauthorised websites completely prohibited)
	Reasons for Non- Achieveme nt	Router installed at the traffic station. Separate data line for water and PMU offices installed. All sites in addition to the Main building have access to WAN services are except for Telephone Managemen t System due to Security issues which prevented integration of 2 networks by different service providers
	Remedi al Action	To consider other options of mstalling Telepho ne at Traffic and PMIU Offices by March 2020
	Portfoli o of evidenc e annual	Quarterl y Reports on Impleme ntation of ICT projects
	Custodian	Corporate Services

Strategy	
Key Performa nce Indicator	Number of quarterly
CONSOLID Baseline Indicator 2017/2018	Approved ICT Governan ce Framewor k
Budget Allocation	-
Funding Source	Opex
Indicator Code	4_45_45.2_P090
SERVICE DE Annual Target 2017/2018	ICT Steering Committee Meetings convened by 30 June 2018
EMALAHLENI LOCAL MUNICIPALITY E DELIVERY AND BUDGET IMPLEME I Actual Annual Targe t Performance 2018/2019 2018/2019 downtime Network points have been installed at the main building	Achieved. ICT Steering Committee Meeting did not take place due unavailability of stakeholders. 6 ICT Steering Committee meetings were convened. Meetings with be properly communicated with the Stakeholders.
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46 Baseline Indicator Service Delivery And Budget Implementation Graph Section Section 4 Annual Target Performance Comments Section Se	4 quarterly reports on the Implementation of the ICT Governance Framework submitted to Council Structures for noting by 30 June 2019
Actual Activerement (2018/19)	3 quarterly reports on the Implementation of the ICT Governance Framework submitted to the Council Structures
Achleved/ Not Achleved	Not Achi eved
Comments	3 quarterly reports on the Implementation of the ICT Governance Framework submitted to the Council Structures
Reasons for Non- Achieveme nt	No availability of stakeholders
Remedi al Action	Proper schedul e of ICT Steering Committee to be approve dby 31st July 2019

Reports submitte

Corporate Services

Priority Area

Custodian

			_
	Priority Area	Council Support	_
	Strategic Objective	effective system of municipal governance in line with applicable legislation by June 2019	
	Strategy	Statutory Meetings in line with the approved Council Calendar	
	Key Performa nce Indicator	Statutory of Statutory Meetings convened in line with the approved Council Calendar	
CONSOLID	Baseline Indicator 2017/2018	Statutory Meetings convened	
ATED	Budget Allocation		
NTITESN	Funding Source		
MONT	Indicator Code	4_46_46.1_P091	
EMAI SERVICE DE	Annual Target 2017/2018	Statutory Meetings, 4 Council meetings, 4 Standing Committee s and 4 Section 79 Committee Meetings) convened in line with the approved Council calendar by 30 June 2018	
EMALAHLENI LOCAL MUNICIPALITY SE DELIVERY AND BUDGET IMPLEMI	Actual Performance Calendar of Events.	Ordinary Council meeting, 11 Special Council meeting, 17 Executive Committee meetings, 10 Executive Committee meetings, 10 IDP and Budget Stering Committee meetings, 4 Community Services Standing Committee meeting, 5 PEDTA Standing Committee meeting, 5 Corporate Services	Standing
EMALAHLENI LOCAL MUNICIPALITY CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019	Meetings (4 Council Meetings, 4 Standing Committees and 4 Section 79 Meetings) convened in line with the approved Council Calendar by 30 June 2019	
ATION PLAN - 20	Actual Achievement (2018/19)	meetings were held during 2018/2019 financial year in line with the approved Council Calendar of Events: 4 IDHS Standing Committee, 4 Committee, 5 Committee, 5 Committee, 6 Committee, 7 Committee, 8 Committee, 8 Committee, 8 Committee, 8 Committee, 8 Committee, 8 Committee, 9 C	Executive
18/2019	Achieved/ Not Achieved	eved	
SECTION 46	Comments	meetings were held during 2018/2019 financial year in line with the approved Council Calendar of Events: 4 IDHS Standing Committee. 4 Community Services Standing Committee, 4 Corporate Services Standing Committee, 4 Committee, 4 Committee, 4 Committee, 4 ETO Standing Committee, 4 BTO Standing Committee, 4 Page 10 Pand Budget Steering Committee MPAC Meetings, 24 Recently 10 Page	Committee
	Reasons for Non- Achieveme nt		
55	Remedi al Action		_
	Portfoli o of evidenc e annual	Reports on Meeting s convene d	
	Custodian	Corporate Services	

	Pri	iority Area
		Strategic Objective
Council Rules of Order	Inclination	Strategy
Rules of Order Implement ed	O Carlo	Key Performa nce Indicator
Council Rules of Order	A Processing of the Control of the C	Basetine Indicator 2017/2018
	B _L	udget ocation
		nding urce
4_46_46.2_P092	Ind Co	licator de
Council Rules of Order implement ed by 30 June 2018		Annual Target 2017/2018
Memorandum was sent to the office of the Speaker on whether Council intended to review the Standing Rules and orders in the current financial year. A response is still awaited from the office of the	Committee meeting, 5 BTO Standing Committee meeting, 5 Performance Audit Committee meeting, 5 Audit Committee meeting, 4 MPAC meeting, 4 meeting, 4	Actual Performance
Order implemented by 30 June 2019		Annual Target 2018/2019
of Order implemented	Committee meetings, 5 Ordinary Council meetings, 15 Special Council meetings	Actual Achievement (2018/19)
eved	Act Not	hieved/ t Achieved
of Order implemented	meetings, 5 Ordinary Council meetings 15 Special Council meetings	Comments
		Reasons for Non- Achieveme nt
		Remedi al Action
Reports on impleme niation of Council Rules		Portfoli o of evidenc e
Corporate Services	Cus	stodian

~	the Council	e with
com	submitted and	complianc
_	reports	municipal
=	Quarterly	reports on
4	Achieved, 4	P096 - 4
,		

Level Cariban		B-1
Legal Services		Priority Area
To ensure an effective system of municipal governanc e in line with applicable legislation by June 2019		Strategic Objective
Monitor municipal litigation litigation Monitor municipal complianc e with	Prepare and submit quarterly reports on implement atton of Council Resolution s	Strategy
Number of quarterly reports on legal dairns or contingenc y register updates submitted to Council Structures for noting Number of quarterly reports on municipal complianc	Number of quarterly reports on implement ation of Council Resolution prepared and submitted to Council for noting	Rey Performa nce Indicator
4 quarterly reports on legal claims or contingency register submitted 4 Quarterly reports on municipal	Quarterly Reports submitted	Baseline Indicator 2017/2018
769 934 00		Budget Allocation
× O × O		Funding Source
P09144 4 P0916	4_46_46.3_P093	Indicator Code
P094 - 4 reports on legal claims or contingenc y register submitted to Council for noting by 30 June 2018 P096 - 4 reports on municipal complianc e with	P093 - 4 Quarterly requesterns on implement ation of Council Resolution s prepared and submitted to Council for noting by 30 June 2018	Annual Target 2017/2018
Achieved. 4 reports on legal claims is submitted to council structures Achieved. 4 Quarterly reports submitted and the Council	Achieved. Quarterly reports on implementatio n of Council resolutions were submitted to the Council meetings held on a quarterly basis	Actual Performance Order was submitted.
4 quarterly reports on legal claims or contingency register updates submitted to Council Structures for noting by 30 June 2019 4 Quarterly reports on municipal compliance with legislation	4 Quarterly Reports on mplementation of Council Resolutions prepared and submitted to Council for noting by 30 June 2019	Annual Target 2018/2019
4 quarterly reports on legal claims or contingency register updates submitted to Council Structures for noting 4 quarterly reports on municipal compliance with	4 quarterly reports on implementation of Council Resolutions were prepared and submitted to Council for neting.	Actual Achievement (2018/19)
Achi eved Achi eved	Achi eved	Achleved/ Not Achieved
4 quarterly reports on legal claims or contingency register updates submitted to Council Structures for noting 4 quarterly reports on municipal compliance with	4 quarterly reports on implementation of Council Resolutions were prepared and submitted to Council for noting.	Comments
		Reasons for Non- Achieveme nt
		Remedi al Action
Quarteri y Reports Legal Claims register, and reports submitte d to Council Structur es Quarteri y reports submitte d to Council	Quarterf y Reports Council Resoluti ons	Portfoli o of evidenc e annual
Municipal Corporate Services	Corporate Services	Custodian

CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46 **EMALAHLENI LOCAL MUNICIPALITY**

Archives and Records Manageme	nt		Priority Area
effective system of municipal governanc e in line with applicable legislation by June 2019	o ensure	ensure provision of quality legal service by June 2019	Strategic Objective
document managem ent system Facilitate disposal of old records in	implement	the performan ce of appointed panel of external attorneys	Strategy applicable legislation
based file document s converted to EDMS	Number of	reports on performan ce of appointed panel of external attorneys submitted to Council Structures for noting	Key Performa nce Indicator e with legislation submitted to Council Structures for noting
of paper- based filing to EDMS	conversion	submitted on the performan ce of the appointed panel of attorneys	CONSOLID Baseline Indicator 2017/2018 complianc e
,		1	Budget Allocation
Ope ×	, Ope	×	Funding Source
0.1 P09 7 0.2 0.2	⊃ຸ ມ ທ່ຽ	9.3 9.3 5	Indicator Code
conversion of 900 2015/2016 paper-based filing to EDMS by 30 June 2018 Facilitate issuing of destructio	P097 -	Reports on performan ce of appointed attorneys submitted to Council for noting by 30 June 2018	Annual Target 2017/2018 Applicable egislation submitted to Council for noting by 30 June 2018 PD95 4
documents are eligible for EDMS filing. 83,6% of that has been converted Not Achieved. A list of 94 old records have	Achieved.	report on Performance of appointed panel of attorneys is submitted to Council Structures	EMALAHLENI LOCAL MUNICIPALITY EDELIVERY AND BUDGET IMPLEM Actual Annual Targe Performance 2018/2019 2018 Performance 2018/2019 2018 Annual Targe Local Submitted to Council titled report was noting by 30 June 2019 2018 Achieved A Annual Targe A Annual Targe Local Submitted to Council titled report was noting by 30 June 2019 2018
documents converted to EDMS by 30 June 2019 June 2019 1 destruction certificate issued by Provincial Archives for	200 paper-	Reports on performance of the appointed panel of external attorneys submitted to Council Structures for noting by 30 June 2019	CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46 Baseline Indicator 2017/2018 Baseline ge ation conding by 30 June 2019 Annual Target Actual Performance 2018/2019 Applicable resolution Submitted to Legislation Submitted to Structures for noting by 30 June 2019 A Phose 4 A Prosect A
were uploaded Destruction certificate populated	429	Reports on performance of the appointed panel of external attorneys submitted to Council Structures for noting	A Character for noting.
Achi	Achi	eved	Achieved/ Not Achieved
were uploaded Destruction certificate populated	429	Reports on performance of the appointed panel of external attorneys submitted to Council Structures for noting	Comments Comments Legislation submitted to Council structures for noting.
			Reasons for Non- Achieveme nt
			Remedi al Action
docume nts captured in the EDMS	Printout	y reports submitte d to Council Structur es	Portfoli o of evidenc e annuel Structur es
Corporate Services		Corporate Services	Custodian

Priority A	rea
	Strategic Objective
line with applicable legislation	Strategy
Indicator Indicator Indicator Insued by Provincial Archives for disposal of old records facilitated	Key Performa
2017/2018	Baseline Indicator
Budget Allocation	n
Funding Source	
∞ P Indicator © Code	
certificate by Provincial Archives for disposal of 50 old records by 30 June 2018	Annual Target
been identified and submitted to Internal Audit for assessment Disposal Archives and the assessment on the old documents to be disposed was done by Provincial Archives staff Disposal of records was done, and the Destruction certificate was populated. The Standard Operating Procedure will be developed implemented. The Directorate should ensure	Actual Performance
disposal of 35 old records facilitated by 30 June 2019	Annual Target 2018/2019
(2010)	Actual Achievement
Achieved Not Achie	
	Comments
nt Acmeveme	Reasons for Non-
Action	Remedi
annual Audit, report from Internal Audit on assessment and Destruction on Certificat e	Portfoli o of
Custodiar	n

Performs Indicator 2017/2018 and age and a submitted to council to council strategy
rorma Indicator 2017/2018 et allocated 2017/2018/2018 et allocated 2017/2018/2018 et allocated 2017/2018/2018/2018/2018/2018/2018/2018/2018
Budget allocation Performance 2018/2019 Achievement 2018/199 Achievement 2018/199 Achievement 2018/199 Achievement Achieve
Farget 2017/Zoris Performance 2018/2019 Achievement Colling Indicate Policy submitted to Management Submitted to Council Fleet Structures for Locuncil Policy submitted to Council Focuncil Structures for Locuncil Policy Policy Policy Structures for Locuncil Policy Structures for Locuncil Policy Structures for Locuncil Policy Policy Policy Structures for Locuncil Policy Polic
Source incode Source Continue Continue
Target 2019/2019 Achievement 2019/2019 Achievement 2019/2019 Achievement 2019/2019 Achievement 2019/2019 Achievement 2019/2019/2019 Achievement 2019/2019/2019 Achievement 2019/2019/2019/2019/2019/2019/2019/2019/
Performance 2018/2019 Achievement de Council centificate ent submitted to Policy submitted to Policy submitted to Structures for Council counc
2018/2019 Achievement diversity on Achievement diversity on Implementation on of Fleet Management Management Policy submitted to Council Structures for June 2019 noting by 30 June 2019 Pournament Implemented Mayoral Cup Conducted Mayors Cup. Cap Golf Day Was Conducted Mayors Day was Conducted Mayoral Cup Golden Games. Conducted Mayoral Cup Golden Games. Conducted Mayoral Cup Council Cup Golf Day Golf Day Council Cup Mandela Day was Conducted Carnival Council Cup Golf Day Council Cup Golf Day Council Cup Golf Day Council Cup Mandela Day was Conducted Cup Golf Day Golf Day Council Cup Golf Day Council Cup Golf Day Golf Day Council Cup Golf Day Council Cup Golf Day Golf Day Council Cup Golf Day Council Cup Golf Day Golf Day Council Cup Golf Day Golf Day Council Cup Golf Day Council Cup Golf Day Golf Day Council Cup Golf Carnival Could not be Supported and Gamd Carnival Could not be Supported and Carnival Could not be Supported Carnival Could Carnival Could not be Supported Carnival Could Carnival Could not be Supported Carnival Could Carnival Carniv
Achievement (2018/19) Achievement (2018/19) Achievement (2018/19) Achieveme Implementatio n of Fleet Management Policy Submitted to Council Submitted to Council Submitted to Council Siructures for noting Achieveme Management Policy Submitted to Council Siructures for noting Achieveme Management Nanagement Policy Submitted to Council Siructures for noting Achieveme Management Nanagement Policy Submitted to Council Siructures for noting Achieveme Management Nanagement Policy Submitted to Council Siructures for noting Achieveme Management Nanagement Policy Submitted to Council Siructures for noting Achieveme Maragement Management Navoral Cup Managela Day Achi Management Policy Submitted to Council Siructures for noting Council Siructures for noting Achieveme Maragement Management Navoral Cup Achi Management Navoral Cup Navo
Achi Achieved Achieved Not Achieveme Management Policy Submitted to Council Structures for noting Achieveme Management Achieveme Management Council Structures for noting Turnament and Wayoral Cup Achi Mayoral Cup A
4 Reports on Implementation on of Fleet Management Policy Submitted to Council Structures for noting. Q1 the Nelson Mayoral Cup Mandela Day was Conducted. Cup awards. Cup aw
for Non- Achieveme nt Achieveme nt to
Action Action Action Be impleme med in the next financial year. Field band will be supported the signing of the

Quarterly reports on the impleme ntation of the fleet manage ment policy

Corporate Services

Reports on impleme nted program s

Municipal Managers Office

Asset Management

To ensure an an efficient and effective fleet managem ent system by June 2019

Priority Area

Strategic Objective

EMALAHLENI LOCAL MUNICIPALITY

CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46

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Special Programmes

To streamline special programs by ensuring functionality of all programm e's structures by June 2019

	Priority Area																		
	Strategic Objective																		
	Strategy										T.								
	Key Performa nce Indicator	•	-														_	93	
CONSOLID	Baseline Indicator 2017/2018													-	•				
ATEDII	Budget Allocation								Va.										
LILISN	Funding Source																		
TANOIT	Indicator Code																		
SERVICE DE	Annual Target 2017/2018										Ī	ij							
LIVERY AND BL	Actual Performance	July 2017, and on the day a Preschool was supported with	Supported with Building Material, Women forum was re-elected	Wards, 1.	provided for field band to	attend Championship	s in Johannesburg,	2. Golf day was hosted in	Indwe on 25	2017. Mayoral	Tournament Facilitation	commence with the	procurement for the	Mayoral Cup	Sports	Equipment.	Carnival	Supported was done by	was done by
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION	Annual Target 2018/2019												•	•					
	Actual Achievement (2018/19)	Golden Games and Mayoral Cup Awards could	Awards could not be conducted				_												
018/2019	Achieved/ Not Achieved																		
PLAN - 2018/2019 SECTION 46	Comments	Golden Games and Mayoral Cup Awards could	Awards could not be conducted																
	Reasons for Non- Achieveme nt																		
	Remedi al Action	MOU by the municip al	al council.																
	Portfoli o of evidenc e annual																		
	Custodian																		

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ıa T	Priority Area			IIV/AIDS	Н				
Strategic Objective	Objective		To streamline programm es for the prevention of new	HIV/AIDS Infections by June	2019				
Strategy	Strategy		Implement the South African National Strategic Plan on	HIV TB					
Key	Rey Performa nce Indicator		South African National Strategic Plan on HIV, TB	and STIs implement ed					
CONSOLID Baseline Indicator	Haseline Indicator 2017/2018		4 HIV/AIDS Strategy programm es implement	ed					
)ATED II	Budget Allocation		00	300 000.00	3				
UTITISM	Funding Source			Opex					
TONAL	Indicator Code		101	_51.1_P10	51_	4			
SERVICE DE Annual Target	Annual Target 2017/2018		P101 - 4 HIV/AIDS Strategy programm es Implement	ed (STI Education Day.	HIV/Aids Candleligh	t and	Youth	on ,	1 111 770
Actual Parformance	Actual Performance	supporting the Filed band with transportation and catering. 4 Learners supported by paying their tuition fees. Develop a schedule with clear deliverables and deadlines and deadlines and be submitted for approval by Council.	Achieved. 4 HIV/IAIDS Strategy programmes Implemented Ten (10)	Caregivers from Ten (10) CBO's has	been trained on basic	Computer	Training.	Ward Aids	
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION Baseline Annual Actual Annual Target Actual Target Performance 2018/2019	Annual Target 2018/2019		South African National Strategic Plan on HIV. TB and STI (World Aids Day, CBO	Support STI Education TB Day Condom	Distribution	Programme	HIV/Aids	Youth Dialogue	
	Actual Achievement (2018/19)		South African National Strategic Plan on HIV, TB and STI (World Aids	Day, CBO Support, STI Education, TB	Day Condom Distribution	Initiation	Programme,	Candlelight	
18/2019	Achieved/ Not Achieved		Achi eved						
PLAN - 2018/2019 SECTION 46	Comments		South African National Strategic Plan on HIV. TB and STI (World Aids	(World Aids Day, CBO Support, STI Education, TB	Day, Condom Distribution	Initiation	Programme	Candlelight	
Reasons	Reasons for Non- Achieveme nt	S							
Remedi	Remedi al Action								
Portfoli	Portfoli o of evidenc e annual		Quarterl y Reports on mpleme ntation	of Strategy					
$\neg \mid$	Custodian		vices	unity Servic	mmu	Co			

	Priority Area	Γ
	Strategic Objective	
	Strategy	
	Key Performa nce Indicator	
	Basetine Indicator 2017/2018	COMBOLI
	Budget Allocation	
	Funding Source	
	Indicator Code	
conducted by 30 June 2018	Annual Target 2017/2018 and 4 LAC Meetings	1
One (4) Local Aids Council Technical Tesk Team (LAC-TTT) Meeting has been convened and 11 200 Condoms has been distributed HIV/AIDS Youth Dialogue has been successfully conducted on the following Wards - Ward 1 at Mphothulo A/A and Ward 2 at Lututu A/A. Initiation awareness campaigns and Bush Tracking has	Actual Performance Structures has been Trained	
	Annual Target 2018/2019 implemented by 30 June 2019	CONTRACTOR OF THE CONTRACTOR OF THE PROPERTY O
was implemented	Actual Achievement (2018/19) Dialogue on HIV/AIDS)	
	Achieved/ Not Achieved	
was implemented	Comments Dialogue on HIV/AIDS)	01010146
	Reasons for Non- Achieveme nt	
	Remedi al Action	
	Portfoli o of evidenc e annual	
	Custodian	

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Employee Wellness		Priority Area	
appropriate e Human Resource to support all directorate s by June 2019		Objective	
Implement Employee Wellness Programs		эцашуу	
Number of employee wellness programs implement ed	Number of LAC Meetings conducted	Performa nce Indicator	
Employee Wellness programs implement ed	4 LAC Meetings conducted	Indicator 2017/2018	CONSOLID
90 000 00		Budget Allocation	ATEDI
Opex	Орех	Funding Source	UTITES
4_52_52.1_P102	4_51_51.2_P138	Indicator Code	TIONAL
Wellness programs implement ed by 30 June 2018 (Change Managem ent,		Annuar Target 2017/2018	EMAL SERVICE DE
Achieved. Change Management Programme conducted on 29/09/17. The kick off meeting for the Healthy		Performance Performance Three cases two of underage and one for Abuse of initiates Traditional Surgeons Name Tags has Been made for the period of 2018-2020	EMALAHLENI LOCAL MUNICIPALITY Se delivery and budget implemi
2 Wellness programs implemented (Heatthy Lifestyle and Team building programme) by 30 June 2019	4 LAC Meetings conducted by 30 June 2019	2018/2019	EMALAHLENI LOCAL MUNICIPALITY CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATIO
Due to Financial constraints one healthy lifestyle programme was held.	4 LAC Meetings conducted	Actievement (2018/19)	ATION PLAN - 20
Achi eved	Achi eved	Achieved/ Not Achieved)18/2019
Due to Financial constraints, one healthy lifestyle programme was held.	4 LAC Meetings conducted	Comments	N PLAN - 2018/2019 SECTION 46
Healthy Lifestyle programme was held from September 2018 until 31 May 2019. Team		Reasons for Non- Achieveme nt	
A request for more funding will be submitte d to the District (Municip		al Action	
Quarterly reports on Wellnes s Program s implemented	Quarterl y Reports	Portoli o of evidenc e annual	
Corporate Services	Community Services	Custodian	

	Priority Area		Labour
	Strategic Objective		appropriat Be Human Resource to support all Directorat
	Strategy		e sitting of Local Labour Meetings
	Key Performa nce Indicator		Number of Local Labour Forum Meetings Convened
CONSOLID	Baseline Indicator 2017/2018		4 Local Labour Forum Meetings convened
ATED IN	Budget Allocation		*
IUTITISI	Funding Source		Opex
TONAL	Indicator Code		4_53_53.1_P10 3
SERVICE DE	Annual Target 2017/2018	Healthy Lifestyle, Team building programm e)	Local Labour Forums Meetings Convened
EMALAHLENI LOCAL MUNICIPALITY SE DELIVERY AND BUDGET IMPLEMI	Actual Performance	lifestyle programme was held on the 29 November at the Municipal Foyer. The programme commenced on 30 November 2017 for a period of six (6) months. Wellness day for Councillors was held in December 2017. The Wellness Frogrammes Implemented has been submitted to Corporate Services Standing	Achieved, 4 LLF Meetings were convened, on the 08 November 2017 in
EMALAHLENI LOCAL MUNICIPALITY CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	Annual Target 2018/2019		4 Local Labour Forum Meetings Convened by 30 June 2019
TATION PLAN - 20	Actual Achievement (2018/19)		4 Local Labour Forum Meetings Convened by 30 June 2019
18/2019	Achieved/ Not Achieved		Achi eved
SECTION 46	Comments		4 Local Labour Forum Meetings Convened by 30 June 2019
	Reasons for Non- Achieveme nt	Building programme could not be held due to financial constraints.	
	Remedi ad Action	al Support Section) for 2019/20 20 program mes	
	Portfoli o of evidenc e annual		Quarter y Reports on LAC Meeting
	Custodian		Corporate

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Integrated Development		Priority Area	
To ensure a developm entally oriented planning institution in line with requirements of local	To provide appropriat e Human Resource to support all Directorat es June 2019	Strategic Objective es by June 2019	
Compliance with the legislated IDP processes and procedure s	Update and Maintain Disciplinar y action database	Strategy	
IDP/PMS and Budget process plan developed and implement ed	Disciplinar y Action database updated and maintaine d	Key Performa nce Indicator	
and Budget Process Plan 2018/2019 developed and approved	2017/2018 disciplinar y action database	Baseline Indicator 2017/2018	CONSOLID
-	-	Budget Allocation)ATED I
Opex	Opex	Funding Source	TILSN
4_54_54.1_P105	4_53_53.2_P104	Indicator Code	INONAL
P105 - IDP/PMS & Budget Process Plan 2018/2019 developed approved and Implement	P104 - Disciplinar y database updated and maintaine d by 30 June 2018	Annual Target 2017/2018 by 30 June 2018	SERVICE DE
Achieved. IDP/PMS and Budget Review Process Plan 2018/2019 was developed and presented to Council	Achieved. Captured and updated on monthly and adhoc basis	Actual Performance Cacadu 03 March 2018 and on the 20 March 2018 and on the 09 May 2018 in Cacadu	ELIVERY AND BU
iDP/PMS & Budget Process Plan 2019/2020 reviewed and Implemented by 30 June 2019	Disciplinary database updated and maintained by 30 June 2019	Annual Target 2018/2019	CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46
IDP/PMS & Budget Process Plan 2019/2020 reviewed and Implemented	Disciplinary database updated and maintained by 30 June 2019	Actual Achievement (2018/19)	TATION PLAN - 2
Achi eved	Achi	Achieved/ Not Achieved	018/2019
IDP/PMS & Budget Process Plan 2019/2020 reviewed and Implemented	Disciplinary database updated and maintained by 30 June 2019	Comments	SECTION 46
		Reasons for Non- Achieveme nt	
		Remedi al Action	
Approve d Process Plan	Quarterl y reports on update and mainten ance of Disciplin ary Databass e	Portfoli o of evidenc e annuel convene d	
PEDTA	Corporate Services	Custodian	

Т	Priority Area																		
Strategic	Strategic Objective	governme nt laws and regulation s by June	2019													V			
Strategy	Strategy						and	implement	responsive	institutiona I plan									
Kev	Key Performa nce Indicator						IDP C	document	developed	and	to Council structures	for);	
Baseline	Baseline Indicator 2017/2018						IDP	developed	2018/2019	reviewed IDP									
1	Budget Allocation											-							
	Funding Source												Орех						
	Indicator Code											P10	54.2	54_	4				
Annual	Annual Target 2017/2018	ed by 30 June 2018					2018/2019	DP	developed	and	to Council	approval by 30	June 2018						
Actual AND BO	Actual Performance	structures for adoption on 29th August 2017. Steering Committee	Meetings were held as part of	Approved IDP	to MEC and	stakeholders.	Situational	analysis report	process was	not fully achieved only	the statistical portion was	reviewed Meetings to	review priorities were	conducted. Draft	Reviewed 2018/2019	IDP was	Council on 29	March 2018. Final IDP	approved and
Baseline Annual Actual Annual Target Actual Actual Comments	Annual Target 2018/2019						and submitted to	Council	approval by 30	June 2019			111						
Actual	Actual Achievement (2018/19)	·					reviewed and	submitted to	Structures for	approval									
70/201	Achieved/ Not Achieved						2 2												
Section 46	Comments						reviewed and	submitted to	structures for	approval									
Reasons	Reasons for Non- Achieveme nt																•		
Remedi	Remedi al Action	-																	
Portfoli	Portfoli o of evidenc e annuai						Resoluti	on .											
	Custodian												EDT	Р					

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Institutional Performance Management Priority A	Area		
Institution al Performan ce Managem ent by June 2019	Strategic Objective		
Implement and review the the Performan ce Managem ent Framework, policies and procedure s	Strategy		
Indicator Indicator Number of Annual reports developed py Council and published	Key Performa		
Annual Report 2016/2017 developed and approved	Baseline Indicator 2017/2018	CONSOLID	
- Budget Allocatio	n	ATEDI	
Opex Funding Source		UTITEN	
4_55_55.1_P107 Indicator Code	,	TIONAL	
P107- 1 Annual Report 2016/2017 developed approved by Council and published by 30 June 2018	Annual Target 2017/2018	. SERVICE DE	EMM
Resolution number OCM 383/05/2018 Draft annual report developed and presented to Council and other structures of Council on the 29th August 2017. Final Draft Annual Report submitted to Council in Dec 2017 for approval, submitted to COGTA for compliance and uploaded on ELM Website.	Actual Performance	LIVERY AND BU	EMALANCENI LUCAL MUNICIPALITY
1 Annual Report for 2017/2018 developed submitted to Council for approval and published by 30 June 2019	Annual Target 2018/2019	CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46	MONICIPALITY
Draft Annual Report developed and adopted by Council in August 2018. submitted to AG as legislatively required and adopted by Council with the oversight report in December 2018. Process plan on the development of the 2018/2019 and presented	Actual Achievement (2018/19)	TATION PLAN - 20	
eved Achieved Not Achie		018/2019	
Draft Annual Report Reveloped and adopted by Council in August 2018. submitted to AG as legislatively required. publicized and adopted by Council with the oversight report in December 2018. Process plan on the development of the 2018/2019	Comments	SECTION 46	
T. CHERRY	Reasons for Non-		
ACCEPTANCE OF THE PROPERTY OF	Remedi	:	
Annual Report, Council Resoluti on on approve d annual report	Portfoli o of		
PEDTA Custodia	n		

		Priority Area	
		Strategic Objective	
		Strategy	
	Implement atton of Performan ce Managem ent Framewor k, Policy and Procedure Manual	Key Performa nce Indicator	
	Reviewed Performan ce Managem ent Framewor k. Policy and Procedure Manual	Baseline Indicator 2017/2018	CONSOLID
	· a	Budget Allocation	ATED II
	Орех	Funding Source	UTILS!
	4_55_55.2_P108	Indicator Code	TIONAL
	P108 - Reviewed Performan ce Managem ent Framewor k simplement ed by 30 June 2018	Annual Target 2017/2018	. SERVICE DE
been been publicized on ELM website. 3rd Quarter report was submitted to Council for noting	Achieved. Draft annual performance report developed and presented to Council and other structures of Council on the 25th August 2017. 1st Quarterly report was submitted to Council structures for noting, Mid- Year Report was prepared and submitted to Council of January 2018	Actual Performance	LIVERY AND BU
been publicized on ELM website. 3rd Quarter report was submitted to Council for noting	Reviewed Performance Management Framework, Policy and Procedure Manual Implemented by 30 June 2019	Annual Target 2018/2019	CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION
	Reviewed Performance Management Framework, Policy and Procedure Manual Implemented	Actual Achievement (2018/19)	
	Achi eved	Achleved/ Not Achieved	018/201
	Reviewed Performance Management Framework, Policy and Procedure Manual Implemented	Comments	PLAN - 2018/2019 SECTION 46
		Reasons for Non- Achieveme nt	
		Remedi al Action	
	Quartert y Page 1 Page	Portfoli o of evidenc e annual	
	PEDTA	Custodian	

Supply Chain Management	1	Priority Area	
proper supply chain protocols in compliance with the MFMA legislation by June 2019	To implement	Strategic Objective	:
Policy and SOP	Implement SCM	Strategy	
Implement ed	SCM Policy and	Key Performa nce Indicator	
Chain Managem ent Policy and SOP	Approved Supply	Baseline Indicator 2017/2018	CONSOLID
•	,	Budget Allocation	ATED
Орех	ı	Funding Source	NSTITL
5_56_56.1_P109		Indicator Code	JIONAL
Procurem ent Plan developed and implement ed by 30 June 2018	P109 - 2017/2018	Annual Target 2017/2018	EMAI SERVICE DE
procurement plan has been developed and approved and implemented.	Achieved.	Actual Performance	EMALAHLENI LOCAL MUNICIPALITY E DELIVERY AND BUDGET IMPLEMI
Policy and SOP implemented (Procurement Plan developed and implemented Supplier Database Updated and 4 SCM Quarterly Reports submitted for noting) by 30 June 2019	Supply Chain Management	Annual Target 2018/2019	EMALAHLENI LOCAL MUNICIPALITY CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION
plan was developed and approved by council in the first quarter. The supplier database was updated monthly and quarterly reports that reflected the implementation in progress was prepared and submitted to Council for noting and has been implemented accordingly. See quarterly reports. The supplier database was also updated monthly, and the 4 quarterly reports was prepared and submitted to Council for	The procurement	Actual Achievement (2018/19)	
		Achleved <i>i</i> Not Achleved	18/2019
plan was developed and approved by council in the first quarter. The supplier database was updated monthly and quarterly reports that reflected the implementation in progress was prepared to Council for noting and has been implemented to Council for noting and has been implemented accordingly. See quarterly reports. The supplier database was also updated monthly, and the 4 quarterly reports was prepared and submitted to Council for council for supplier database was also updated monthly, and the 4 quarterly reports was prepared and submitted to Council for	The procurement	Comments	PLAN - 2018/2019 SECTION 46
		Reasons for Non- Achieveme nt	
		Remedi al Action	
on impleme ntation of the Supply Chain Manage ment Policy ((Procur Plan, Supplier Databas e Advert	Quarterl y reports	Portfoli o of evidenc e annual	
Budget and Treasury	C	Custodian	

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	Strategic Objective								improve	complianc	e and	ō	by June	2019							
	Strategy	Implement SCM	Policy						comprehe	nsive audit	file to	GRAP	Annual	Financial Statement							
	Key Performa nce Indicator	Percentag e of	procureme nt	awarded	to	within the	Pickince	200	GRAP	Compliant	Annual	Statement	developed	and	to AG by	August	2018				
CONSOLID	Baseline Indicator 2017/2018	30% of procureme	nt	ō	suppliers	province		2	Annual	Financial	Statement	ı									
ATEDI	Budget Allocation		<u> </u>										-						_		
บานรง	Funding Source)pe>	(x	Эре	ı					
TONAL	Indicator Code		125	P1	6.1	56_	5_						12	_P1	57.1	57_	5_5				
SERVICE DE	Annual Target 2017/2018	P125 - 30% of	procureme	awarded	to local	by 30	2010 2010		GRAP	compliant	2016/2017	Financial	Statement \$	developed	submitted	31 August	2017				
LIVERY AND BU	Actual Performance	Achieved. The target of	30% of procurement	to allocated to	local suppliers	achieved			The GRAP	compliant AFS	was	submitted by	31 August 2017								
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLA	Annual Target 2018/2019	30% of procurement	awarded to	the province by	30 June 2019				GRAP compliant	Annual Financial	Statements	submitted to AG	by 31 August 2018								
TATION PLAN - 2	Actual Achievement (2018/19)	The quarterly reports that	reflected the	procurement	awarded to	province was	submitted to	noting	GRAP	compliant	Annual	statements	was prepared and submitted	to the Auditor General on 31	August 2018	during the first	of submission	filed.			
18/2019	Achieved/ Not Achieved	Achi							Achi												
N - 2018/2019 SECTION 46	Comments	The quarterly reports that	reflected the	procurement	awarded to	province was	submitted to	noting	The 2017/18 GRAP	compliant	Annual	statements	and submitted	to the Auditor	August 2018	during the tirst	of submission	filed.			
	Reasons for Non- Achieveme nt																î.				
	Remedi al Action						,														
	Portfoli o of evidenc e annual	Quarter y report	on the	010	supplier				Annual	-	Stateme	2017/20	18. Council	Resoluti	noting	readines	submissi s of	on, acknowl	edgeme nt of	of AFS	by AG
	Custodian				T	-4 -	Quel							l'roa	nd.						_

Budget and Treasury

Custodian

Priority Area

Budget and Reporting

Budget and Treasury

L	_	4	h
,			6

		Priority Area
		Strategic Objective
	to all request for information in by Auditor-General Compile and maintain a GRAP compliant fixed assets register	Strategy Respond
	e of submissio n of n of informatio n requested by AG for 2017/2018 and 2018/2019 audit	Key Performa nce Indicator
	RFI Register 2017/18 Fixed Assets Register compiled and maintaine d	Baseline Indicator 2017/2018
	. (6	Budget Allocation
	Opex Opex	Funding Source
	5_57_57.3_P114	Indicator Code
	submissio of of informatio of information of	Annual Target 2017/2018
174	requested information by AG has been submitted 100%. Achieved. The additions register was maintained monthly.	Actual Performance
	submission of information requested by AG for 2017/2018 and 2018/2019 audit by 30 June 2019 GRAP compliant fixed assets register for 2018/19 developed and maintained by 30 June 2019 30 June 2019	Baseline Baseline Annual Actual Actual Annual Target Actual Actual Annual Target Actual Actual
	requested by AG in the first, second and third quarter for the 2018/19 financial years was submitted. The RFI register for the first, second and third quarter was submitted. The assets additions were maintained monthly and submitted quarterly. The GRAP compliant fixed asset register was developed by considerations of quarterly assets additions registers with pnor penoid assets at 30 June 2019.	Actual Achievement (2018/19)
	eved Achi	Achieved/
	requested by AG in the first. second and third quarter for the 2017/18 and third quarter was submitted. The RFI register for the first, second and third quarter was submitted. The assets additions were maintained aubmitted quarterly. The GRAP compliant fixed asset register was developed by consideration of quarterly assets additions registers with prior period assets at 30 June 2019.	Comments
		Reasons for Non- Achieveme nt
		Remedi al Action
	and 2018/20 19 RFI register and FAR for 2018/19	Portfoli o of evidenc e annual
	Budget and Treasury Office Budget and Treasury Office	Custodian

Priority Area	
Strategic Objective	
Strategy Implement the budget and reporting regulation	
Key Performa nce Indicator adjustmen t budget for the 2018/19 financial year compiled submitted to Council	compiled and submitted to Council for approval
CONSOLID Baseline Indicator 2017/2018 2017/18 Adjusted Budget	
Budget Allocation	3.60
Funding Source	Opex
Indicator Code	5_57_57.4_P115
Annual Target 2017/2018 2017/2018 adjustmen t budget compiled and submitted to Council for approval	submitted to Council for approval by 30 June 2018
E DELIVERY AND BUDGET IMPLEMI Actual Annual Targe Performance 2018/2019 2018 Achieved. Approved The 2018/19 budget has been submitted and submitted and approved by financial year adjustment submitted adjustment submitted adjustment submitted and submitted adjustment submitted to compiled and submitted to compiled and adjustment submitted to council for submitted and submitted to council for submitted to council for submitted and submitted to council for submitted and submitted to council for submitted and submitted and submitted to council for submitted and submitted and submitted submitted to council for submitted and submitted subm	approved by Council. The approved adjustment budget was implemented
Baseline Indicator 2017/2018 Bullonger in Annual Farget 2017/2018 Bullonger in Soundill The Souncill The Bullonger in Souncill So	financial year complied and submitted to Council for approval by 31 May 2019
Actual Achievement (2018/19) The approved 2018/19 budget was implemented second quarter. The budget consumption reports was	second quarter. The budget consumption reports was not accurate for the first and second quarter for Directorates to track their expenditure due to system functionality challenges. The adjustment budget was submitted and approved by Council on 28 February 2019 during the adjustment the dugget was submitted submitted and approved by Council on 28 February 2019 during the adjustment budget was submitted quarter. The
eved Not Achieved	
Comments Comments Comments The approved 2018/19 budget was implemented in the first and second quarter. The budget consumption reports was	second quarter. The budget consumption reports was not accurate for the first and second quarter for Directorates to track their expenditure due to system functionality challenges. The adjustment budget was submitted and approved by County 2019 during the third quarter. The adjustment budget was submitted and approved by County 2019 during the third quarter. The adjustment budget was submitted approved by County 2019 during the third quarter.
Reasons for Non- Achieveme nt	
Remedi al Action	
Portfoli o of evidence e annual Council resolutio n approvin g the Adjustm ent Budget for	Adjustm ent Budget for 2018/19
Custodian	Budget and Treasury

ea	Priority Area																_												
Strategic Objective	Objective																												
Strategy																													
Key	Performa nce Indicator	2019/20 Budget	compiled	submitted	to Council	for	approval																						
Baseline Annual Actual Annual Target Actual Comments Indicator Target Performance 2018/2019 Achievement © Comments	Indicator 2017/2018	2018/19Ad justed	Budget																										
	Budget Allocation																												
\neg	Funding Source														x	ре	0												
\neg	Indicator Code												6	·11	I_P	7.1	_5	5_57	é										
Annual Target	Target 2017/2018	P116 - 2018/2019	Budget	and	submitted	to Council	for	approval	by 31 May	2010					0														
Actual	Performance	Achieved. The 2017/18	budget	process plan	developed and	approved by	Council, The	first draft of	revenue	projections	and presented	as per project	plan, Policies	to be reviewed	in 3rd quarter	The	adjustment	budget nas	submitted and	approved by	first draft	budget for the 2018/19	financial year	has been	prepared and	Council. The	20182019	Budget was	Council
Annual Target 2018/2019	2018/2019	2019/20 Budget compiled and	submitted to	approval by 30	June 2019																								
Actual Achievement	Achievement (2018/19)	The 2019/20 Draft budget	was compled	to Council on	28 March	2019 during	the third	quarter for	public	participation.	The final 2018/19	Budget was	tabled and	approved by	Council on 30	May 2019	during the	tourth quarter.											
ed	Achievedi Not Achieved	Achi																					_						
Comments	·	The 2019/20 Draft budget	was compiled	and submitted	28 March	2019 during	the third	quarter for	public	participation	The final 2018/19	Budget was	tabled and	approved by	Council on 30	May 2019	during the	fourth quarter.											
Reasons	for Non- Achieveme nt																												
Remedi	al Action																												
Portfoli	o of evidenc e annual	Council	3	approvin	2019/20	20	Budget																						
	Custodian											ice	Off	ігу	3SU	rea	t T	and	lge	Bud					_				

	Priority Area	
	Strategic Objective	
Prepare MFMA reports as required by the MFMA legislation	Strategy	
Number of MFMA required reports submitted to Treasury for compliance	Key Performa nce Indicator	:
17/19 MFMA reports	Baseline Indicator 2017/2018	CONSOLID
·*	Budget Allocation	ATED
Opex	Funding Source	NSTITE
	Indicator Code	IANOITU
P117 - 8 Monthly, 1 half year and 4 Quarterly MFMA reports developed and submitted to Council by 30 June 2018	Annual Target 2017/2018	- SERVICE DE
Achieved. The 8-monthly section 71, 3 Quarterly Section 52 and 1 Half yearly MFMA report have been prepared and submitted.	Actual Performance	E DELIVERY AND BUDGET IMPLEM
8 Monthly, 1 half year and 4 Quarterly MFMA reports developed and submitted Treasury for compliance by 30 June 2019	Annual Target 2018/2019	EMALAHLENI LOCAL MUNICIPALI IY CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46
8 Monthly, 1 half year and 4 Quarterly MFMA reports developed and submitted Treasury for compliance by 30 June 2019	Actual Achievement (2018/19)	ATION PLAN - 20
Not Achi eved	Achieved/ Not Achieved	018/2019
8 Monthly, 1 half year and 4 Quarterly MFMA reports developed and submitted Treasury for compliance by 30 June 2019	Comments	SECTION 46
The target was not achieved as the reports the reports were not all submitted timeously. The implementation of the mSCOA compliant financial system caused numerous delays in the finalization of the monthly system close-off resulting in the municipality being unable to prepare and submit all its reports within the legislated in the metal significance as stipulated in the municipality being unable to prepare and submit all its reports within the legislated in the municipality being unable to prepare and submit all its reports within the legislated in the municipality being unable to prepare and submit all its reports within the legislated in the legislated in the legislated in the municipality system control the legislated in the legislated i	Reasons for Non- Achieveme nt	
The municip ality will hold monthly engage provider and Provinci all issues that have caused and my cause delays in the closing of the engage ments.	Remedi al Action	
8 Monthly 1 half year and 4 Quarterl y MFMA reports with proof of submissi on to Mayor and Treasury	Portfoli o of evidenc e annual	
Budget and Treasury Office	Custodian	

Expenditure Management		Priority Area	
To proper expenditur e managem ent in compilanc e with legislation by June 2019		Strategic Objective	
Perform reconciliati on of payroll		Strategy	
Number of payroll reconcillations performed.		Key Performa nce Indicator	
12 Payroll reconciliati ons (2017/18)		Baseline Indicator 2017/2018	CONSOLIE
-		Budget Allocation	ATED !
Opex		Funding Source	UTITISM
5_58_58.1_P118		Indicator Code	TIONAL
P118 - 12 payroll reconciliat ons prepared and balanced to the general ledger by 30 June 2018		Annual Target 2017/2018	SERVICE DE
Achieved. The 12 payroll reconciliations prepared and reconciled to the GL		Actual Performance	EMALAHLENI LOCAL MUNICIPALITY DE DELIVERY AND BUDGET IMPLEME
12 payroll reconciliations prepared and balanced to the general ledger by 30 June 2019		Annual Target 2018/2019	EMALAHLENI LOCAL MUNICIPALITY CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION
12 payroll reconcillations (Salary control (Salary control) reconcillations) were prepared and balanced monthly to the General ledger and submitted quarterly for the 2018/19 financial year.		Actual Achievement (2018/19)	
Achi eved		Achleved/ Not Achieved	18/2019
The payroll reconcillations (Salary control reconcillations) were prepared and balanced monthly to the General ladger and submitted quarterly for the 2018/19 financial year.		Comments	PLAN - 2018/2019 SECTION 46
		Reasons for Non- Achieveme nt	
	able to close off the month within a reasona ble time and ensure that all reports ar prepare d and submitte d timeousl y to Treasury	Remedi al Action	
12 Monthly payroll reconcul ations signed off		Portfoli o of evidenc e annual	
Budget and Treasury Office		Custodian	

	Priority Area
	Strategic Objective
within 30 days	Strategy
of creditors within 30 days	Key Performa nce Indicator
ageing and Unpaid creditors reports for 2017/2018	CONSOLIC Baseline Indicator 2017/2018
-	Budget mi
Opex	Funding Source
5_58_58.2_P119	Indicator Code
payment of creditors within 30 days as per legislated framework by 30 June 2018	SERVICE DE Annual Target 2017/2018
been paid within the stipulated 30 days for the first quarter. Sebata is assisting the municipality to clear errors on the Age analysis report that shows that a few creditors are outstanding beyond 30 days.	Actual Performance Achieved
within 30 days as per legislated framework by 30 June 2019	CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46 Baseline Indicator Indicator Control In
has paid all creditors within the 30 days legislated time frames. The creditor's age analysis could not be submitted in time during the first quarter due to delays in month closures due to mSCOA implementation challenges Creditor's age analysis was submitted in the second. third and fourth	Actual Achievement (2018/19)
e	Achieved/
municipality has paid all creditors within the 30 days legislated time frames. The creditor's age anallysis could not be submitted in time during the first quarter due to delays in month closures due to mSCOA implementatio n challenges. Creditors age analysis was submitted in the second, third and fourth quarters.	Comments The
	Reasons for Non- Achieveme nt
	Remedi al Action
S ageing and (Unpaid Creditors reports for 2018/20 19	Portfoli o of evidenc e annual
Budget and Treasury Office	Custodian

	Revenue Management	Priority Area	
	To increase the amount of revenue collected annually by June 2019	Strategic Objective	
Implement credit control and debt collection policy	Compile 2018/19 Suppleme ntary Valuation roll.	Strategy	į
%(Percent age) Improvem ent in the revenue collection rate	2018/19 Suppleme ntary Valuation roll compiled and signed off	Key Performa nce Indicator	
60 % Collection rate	2017/18 General Valuation Roll	Baseline Indicator 2017/2018	CONSOLID
-	300 000,00	Budget Allocation	ATED II
Opex	Opex	Funding Source	STITU
5_59_59.2_P121	5_59_59.1_P120	Indicator Code	TIONAL
P121 - 65% collection rate of revenue billed achieved by 30 June 2018	P120 - 2016/2017 General valuation roll compiled and approved by 30 June 2018	Annual Target 2017/2018	SERVICE DE
Achieved. Non- Implementation of activities as per the Revenue Enhancement Strategy. The 65% collection	Achieved. The service provider to conduct the General Valuation has been appointed. The Section 181 Activity plan was developed. The Draft Valuation roll was tabled for reviewal and was opened to community for objections. The General Valuation roll was submitted to Council for noting	Actual Performance	EMALAHLENI LOCAL MUNICIPALITY DE DELIVERY AND BUDGET IMPLEME
67% revenue collection rate achieved by 30 June 2019	Supplementary valuation roll compiled and certified by 30 June 2019	Annual Target 2018/2019	EMALAHLENI LOCAL MUNICIPALITY CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION
The collection rate was at 18% at the end of May 2019.	supplementary valuation roll was compiled and certified on 6 June 2019 during the fourth quarter	Actual Achievement (2018/19)	
Not Achi eved	Achi	Achieved/ Not Achieved	18/2019
The collection rate was at 18% at the end of May 2019.	supplementary valuation roll was compiled and certified on 6 June 2019 during the fourth quarter.	Comments	PLAN - 2018/2019 SECTION 46
The implementati on of the mSCOA compliant financial system caused numerous delays in the		Reasons for Non- Achieveme nt	
The municip ality had appointe d a service provider to assist the municip		Remedi al Action	
Quarted y Reports on collectio n rate achieve d	Certified Supplem entary Valuation n Roll by Valuer Council resolution n approvin g SV	Portfoli o of evidenc e annual	
Budget and Treasury	Budget and Treasury Office	Custodian	

	Priority Area	
	Strategic Objective	
	Strategy	
	Key Performa nce Indicator	
	Baseline Indicator 2017/2018	CONSOLI
	Budget Allocation	DATED II
	Funding Source	UTITISN
	Indicator Code	TIONAL
	Annual Target 2017/2018	SERVICE DE
annual target has not been achieved at 30 June 2018. Achieved collection rate for the year is 36.36%. The debt collections have started in the month of June 2018 to initiate the debt collection processes. They are currently in the process of issuing demand letters to all businesses and farmers with arrear accounts. Strengthen monitoring mechanisms of the Revenue Enhancement Strategy.	Actual Performance	EMALAHLENI LOCAL MUNICIPALITY SE DELIVERY AND BUDGET IMPLEM
	Annual Target 2018/2019	CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION
	Actual Achievement (2018/19)	
	Achieved/ Not Achieved	18/2019
	Comments	PLAN - 2018/2019 SECTION 46
dosure and consequently the municipality was not able to calculate the collection rates at reporting time for the first three quarters.	Reasons for Non- Achieveme nt	
ality with debt collection. The effective ness of this collection nexercise was also hampered by system challenges such as account as account as account as account the earning the year. The service provider will continue to assist the municipality with collections in the 2019/20 financial year. A	Remedi al Action	4
	Portfoli o of evidenc e annual	
	Custodian	

	Key Performa nce Indicator	Number of revenue streams registers that are balanced to general ledger developed
CONCO	Baseline Indicator 2017/2018	Registers
A TED I	Budget Allocation	1
LILLI	Funding Source	× op
ANGE	Indicator Code	9.31 9.31 2.21
EMAL	Annual Target 2017/2018	P122 - 4 Registers for revenue streams that are balanced to general ledger developed by 30 June 2018
EMALAHLENI LOCAL MUNICIPALITY	Actual Performance	Achieved. The registers that balances to the GL were prepared monthly
EMALAHLENI LOCAL MUNICIPALITY CONSOI IDATED INSTITUTONAL SERVICE DELIVERY AND BLIDGET INDI EMENTATION DI AN. 2018/2019 SECTION 18	Annual Target 2018/2019	4 revenue streams registers that are balanced to general ledger developed by 30 June 2019
ייייטוו טו און א	Actual Achievement (2018/19)	4 revenue streams registers were prepared and balanced to the General Ledger monthly and submitted quarterly.
10000	Achieved/ Not Achieved	Achi eved
	Comments	The 4 revenue streams registers were prepared and balanced to the General Ledger monthly and submitted quarterly.
	Reasons for Non- Achieveme nt	

enhance ment commit commit ee has been establish ed and meeting s have been schedul ed for the 2019/20 financial

Register s that balance general ledger votes for eNatis pre-paid electricit y new connecti ons. disconn ections and reconne ctions. hall deposits

Budget and Treasury Office

Portfoli o of evidenc e annual

Custodian

Develop revenue streams registers **Priority Area**

Strategic Objective

Strategy

Priority Area	Cash Management
Strategic Objective	To ensure efficient effective cash flow managem ent by June 2019
Strategy	Perform Cost coverage calculation In line with legislation Develop Investmen t register that balances to the general ledger and bank
Key Performa nce Indicator	Cost Coverage ratio exceeding 2 2 2 2 Investmen t register that balances to the general ledger and bank statement s
Baseline Indicator 2017/2018	2017/18 cost coverage ratio ratio 2017/18 2017/18 Investmen t register
Budget Allocation	
Funding Source	Орех Орех
Indicator Code	5_60_60.2_P124
Annual Target 2017/2018	P123 - Cost - Coverage ratio exceeding 2 maintaine d by 30 June 2018 P124 - investment register that balances to general ledger and bank statement developed.
Actual Performance	Achieved. The cost coverage report for the fourth quarter has been prepared and show a ratio exceeding 2 Achieved. The investment registers that balances to the GL was prepared monthly.
Baseline Baseline Annual Actual Annual Target Actua	Cost -coverage ratio exceeding 2 maintained by 30 June 2019 30 June 2019 investment register that balances to general ledger and bank statement developed and maintained by 30 June 2019
	municipality maintained a cost coverage ratio of above 2 for the financial year. The cost coverage reports were prepared and submitted quarterly. The overall cost coverage ratio at 30 June 2019 was 1:4 433. The investment register was maintained monthly throughout the year by reconciling it to General.
Achieved/ Not Achieved	Achi eved
tual theyement Comments Na/19) Achieved/ Not Achieved/ Not Achieved/	maintained a cost coverage ratio of above 2 for the financial year. The cost coverage reports were prepared and submitted quarterly. The overall cost coverage ratio at 30 June 2019 was 1 1 4 433. The investment register was maintained monthly throughout the year by reconciling it to General
Reasons for Non- Achieveme nt	
Remedi al Action	
Portfoli o of evidence annual refuse and rates properly rentals reconcil	Report indicatin g the cost coverage e ratio
Custodian	Budget and Treasury Office Office

Strategy Key Baseline nce 2017/2018 to Indicator Indicat	Key Performa nce Indicator developed and maintaine d	Key Performa nce Indicator developed and maintaine d	CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2018 Key Baseline Indicator nee 2017/2018 et al. 2017/2018 Indicator Grading Gradi		Priority Area Objective	
				statement 5	Strategy	
CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENT Baseline Indicator 2017/2018 Target Target 2017/2018 Ball Foo Inco dictor and maintainne diby 30 June 2018	CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 20 Baseline Indicator 2017/2018 Target 2017/2018 Target 2017/2018 Performance 2018/2019 (2018/19) Baseline Indicator Consolidation Co	CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 Baseline Indicator 2017/2018 Target Performance 2018/2019 Annual Actual Actual Performance 2018/2019 Target 2017/2018 Target Performance 2018/2019 Target Performance 2018/2019 Target Performance 2018/2019 Target Performance 2018/2019 Actual Actual Actual Performance 2018/2019 Target Performance 2018/2019	CONSOLIDATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46 Baseline Indicator 2017/2018 Target 2017/2018 Target 2017/2018 Target 2017/2018 Performance 2018/2019 (2018/19) Target Actival 4 Comments 5 Comments 6 Comments 6 Comments 6 Comments 6 Comments 7 Comments 8 Comments 7 Comments 8 Comments 8 Comments 8 Comments 9	developed and maintaine d	Key Performa nce Indicator	
ATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENT Annual Actual Performance 2018/2019 Ballocating by 30 June 2018	ATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 20 Annual Actual Target Actual Target Actual Target Delivement 2018/2019 Ball under and Inco Inco Inco Inco Inco Inco Inco Inco	ATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 Annual Actual Annual Target Actual Achievement Target 2017/2018 Ball Indian Annual Target Achievement 40 (2018/19) Ball Indian Annual Target Actual Achievement 40 (2018/19) Ball Indian Annual Target Achievement 40 (2018/19) Ball Indian Annual Target Actual Achievement 40 (2018/19) Ball Indian Annual Target Actual 40 (2018/19)	ATED INSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46 Annual Actual Target Actual Target Actual Target 2018/2019 Actual Target Actual		Baseline Indicator 2017/2018	CONSOLID
NSTITUTTONAL SERVICE DELIVERY AND BUDGET IMPLEMENT Annual Actual Target Performance 2018/2019 From dice and maintaine d by 30 June 2018	NSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 20 Annual Actual Target Actual Target Performance 2018/2019 (2018/19) From Incompleted Performance and maintaine diby 30 June 2018 Service DELIVERY AND BUDGET IMPLEMENTATION PLAN - 20 Annual Target Actual Ac	NSTITUTIONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 Annual Actual Target Performance 2018/2019 Target 2017/2018 Target Performance 2018/2019 Target Actual Actual Actual Actual General Gener	NSTITUTTONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46 Annual Target Performance 2018/2019 Actual Actual Actual Target 2018/2019 Actual Actual Actual Actual Comments (2018/19) From diode and maintaine do bank maintaine do by 30 June 2018 June 2018 Actual Actual Actual Actual Actual Actual Comments (2018/19) Actual A		Budget Allocation	ATEDII
TONAL SERVICE DELIVERY AND BUDGET IMPLEMENT Annual Actual Target Target 2017/2018 at a 2017/2018 and maintaine d by 30 June 2018	TONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 20 Annual Actual Performance 2018/2019 Actual Actu	TONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 Annual Actual Target Actual Actual Actual Target Actual Actua	TONAL SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46 Annual Actual Target Actual Actual Actual Target Performance 2018/2019 (2018/19) Target Quintine Gold Performance Actual Actual Actual Activation of Comments (2018/19) Target Performance 2018/2019 (2018/19) Target Actual Actual Actual Actual Activation of Comments (2018/19) Target Performance 2018/2019 (2018/19) Target Actual Actu		Funding Source	UTITIES
SERVICE DELIVERY AND BUDGET IMPLEMENT Annual Actual Target Performance 2018/2019 and maintaine d by 30 June 2018	SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 20 Annual Target 2018/2019 Actual Actual Actual Actual Actual Actual Actual Target 2018/2019 Actual Actua	SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 Annual Actual Target Performance 2018/2019 (2018/19) and and maintaine d by 30 June 2018 June 2018 SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 Annual Actual Actual Actual Actival Government Series Actival Statements Statements Submitted Operatory.	SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN - 2018/2019 SECTION 46 Annual Actual Target 2018/2019 Actival Achievement 2018/2019 (2018/19) Each Achievement 2018/2019 Achievement 2018/2019 Achievement 2018/19) and and and and and was submitted 0 puarterly 0 counterly 0 counterl		Indicator Code	TIONAL
ANLENI LOCAL MUNICIPALI IY LIVERY AND BUDGET IMPLEMENT Actual Performance 2018/2019	Actual Annual Target Actual Ac	Artual Annual Target Actual Actual Actual Actual Actual Actual Achievement Quil/2019 Performance 2018/2019 Achievement Quil/2018/19) Bank Statements and was submitted outstrety.	Artual Annual Target Actual Activement (2018/2019) (2018/19) Comments bank statements and was submitted ouarterly counterly	and maintaine d by 30 June 2018	Annual Target 2017/2018	SERVICE DE
DGET IMPLEMENT Annual Target 2018/2019	Annual Target 2018/2019 Actual 2018/2019 Actival Achievement (2018/19) bank statements and was submitted nuarterly	Annual Target Actual 2018/2019 Actual Actual 2018/2019 Actual Act	Annual Target Actual 2018/2019 Actual Actual Actual Actual (2018/19) Actual A		Actual Performance	LIVERY AND BU
	Actual Actual Achievement (2018/19) bank statements and was submitted quarterly	Actual Achievement (2018/19) Achievement (2018/19) bank bank statements and was submitted quarterly	Actual Ac	,,,,	Annual Target 2018/2019	DGET IMPLEMEN
M8/2019 SECTION 46 Comments Comments For Non- Achieveme bank statements and was submitted outsteld		Reasons for Non- Achieveme nt			Remedi al Action	
Reasons for Non- Achieveme nt	Reasons for Non- Achieveme nt		Remedi al Action		Portfoli o of evidenc e ennual	
Reasons Remedi for Non- Achieveme Action	Réasons Remedi for Non- Achieveme Action nt	Remedi al Action			Custodian	MIL

Chapter 4 – Organisational Development Performance (Performance Report Part II)

Component A: Introduction to the Municipal Personnel

4.1Employee Totals, Turnover and Vacancies

Employees (T4.1,1)	Year -1	2018/2019			
Description	Employees No.	Approved Posts No.	Employees No.	Vacancies No.	Vacancies
Amenities	46	50	46	4	4
Electricity	18	18	07	11	11
Environmental Services	13	13	5	8	8
Housing	9	9	8	1	1
Local Economic					
Development	10	12	10	2	2
Public Safety	51	51	18	33	33
Roads	20	21	20	1	1
Solid Waste					
Management Services	70	70	39	31	31
Total	237	244	153	91	91

Vacancy Rate : Year 2018/2019 (T 4,1.2)	and the second second second		
Description	Total Approved Posts No.	Vacancies (Total Time vacancies exist using fulltime equivalents) No.	Vacancies (as a proportion of total posts in each category) %
Municipal Manager	1	1	0%
CFO	1	0	0%
Other S56 Managers (excl. Finance Posts)	5	1	20%
Law Enforcement	36	19	55.6%
Fire Fighters	6	6	100%
Middle Management Level (excl. Finance			
Posts)	17	5	35.3%
Middle Management Level (Finance Posts) Highly Skilled Supervisors (excluding Finance	3	0	0%
Posts)	44	21	50%
Highly Skilled Supervisors (Finance Posts)	10	0	0%

Total	123	53	

4.1.2 Comment on Vacancies and Turnover

ELM is undergoing an overview of municipal programmes, roles and responsibilities, linking them to Directorate mandates and function. This is done in order to allocate appropriate human resources so as to achieve service delivery targets.

15 permanent appointments were made during 2018/2019 financial year of which 2 were new budgeted vacant positions and 13 were vacated positions due to resignations, retirements, deaths and dismissals.

Component B: Managing the Municipal Workforce

4.2 Introduction to Municipal Workforce

Workforce management is a core function of each line manager in municipality. In order to ensure reasonable standardisation and consistency in the handling of the workforce, disciplinary procedures and conditions of service are developed at a central level by the National and Provincial divisions of the South African Local Government Bargaining Council (SALGBC) and, where relevant, at a local level between management and the representative unions SAMWU and IMATU and are then implemented by line management. Conditions of service of senior managers are based up on the regulations promulgated by the Minister of Cooperative Governance and approved by Council.

In addition to the above, a wide range of policies, procedures and directives are approved by relevant approval authorities after due consultation with stakeholders such as Council, the Municipal Manager and Senior Management. Such policies, procedures and directives are then circulated to all staff for implementation and compliance.

4.3 Policies and By-Laws

Council had adopted in 2016/2017 Financial year, a framework for policy development, which is currently being utilised when developing and/or reviewing policies and strategies within the municipality.

The following policies were reviewed and there were no By Laws developed or reviewed during 2018/2019 financial year.

	HR Policies and Pla	ns	
	Name of Policy	Completed	Reviewed
		%	%
1	Supply Chain Management Policy	100%	100%
2	Recruitment and selection Policy	100%	100%
3	Leave Management Policy	100%	100%
4	Performance Management Framework	100%	100%
5	Fleet Management Policy	100%	100%
6.	Public Participation Policy	100%	100%

	HR Policies and Pla	ns	
(1)	Name of Policy	Completed	Reviewed
		%	%
7.	Petitions Management Policy	100%	100%
8.	Disaster Recovery Plan	100%	100%
9.	Institutional Service Standards	100%	100%

The Human Resources Plan and the Organisational Structure (2017-2022) were developed and approved during 2017/2018 financial year and will be reviewed when need arise until 30 June 2022.

4.3.1 Comment on Workforce Policy Development (PLEASE REMOVE THE PARAGRAPH BELOW)

The finalisation of the Human Resource Development Policy will close a major gap which currently exists in the organisation. This policy has been drafted and is under consultation with the stakeholders.

On a broad level, the municipality is undergoing a process of reviewing all policies to ensure that they are relevant and up to date.

4.4 Occupational Health and Safety (OHS)

The following strategies were implemented

- Implementation of the Occupational Health and Safety Policy
- Coordinating Payment to Workmen's Compensation (compliance with workmen's compensation commissioner and a letter of good standing)
- Operational controls and procedures
- Contractors controls
- Medical Checks

It should be noted that the municipality could not purchase the Personal Protective Equipment/Clothing during 2018-2019 due to financial constraints. All OHS structures are functional and they are convened as per the approved Council Calendar of Events.

4.4 Labour Relations

The Labour Relations Division has performed the following function as expected:

- Convening Sessions and conducting Policy Road-Shows with user departments in all units. (Cacadu, Dordrecht & Indwe)
- Financial Disclosures of Councillors and Officials through completion of Declaration of Interest Forms and Signing of the Code of Conduct and Ethics by all employees including Councillors.
- Inducting all new employees on the brief history of the municipality and the origin of Local Government as
 third sphere of governance, vision, mission, composition of the council, administration, the units and offices
 that form this municipality, Human Resource Policies and Labour Relations Policies.
- Representing the Municipality at South African Local Government Bargaining Council for Conciliation Case and Arbitration Case Hearings.

- Providing Human Resource and Labour Relations advices including update on new Amendments and Case
 Laws to both employees and employers.
- Communicate all Collective Agreements including Salary and Wage Collective Agreements and Circulars to both employees and management.
- Managing municipal interaction and correspondence relating to Labour issues between our Municipality and SALGA including SALGBC.
- Participating in Municipal Adhoc projects and Committees as and when needed.

NUMBER AND PERIOD OF SUSPENSIONS:

Table below illustrate the management of cases by the Labour Relations Unit during 2017/2018 financial year.

SUSPENSIONS	DISMISSALS	PENDING CASES	WARNINGS
			ISSUED
1	4	3	0

The Local Labour Forum is fully functional and the employer and employee relations are stable.

4.5 Fleet Management

The Municipality has 3 pool vehicles of which one was repossessed, seven (7) Community Services vehicles, 3 Infrastructure Development and Human Settlement of which one was repossessed and 1 for Planning Economic Development, Tourism and Agriculture.

There are sixteen (16) Plant Machinery and one was burnt during community protests nine (9) Trailers.

There are seven (7) accidents and 2 incidents of tyre theft reported for 2018/2019 financial year.

DIRECTORATE	CURRENT STATUS	CURRENT AGE	RECOMMENDATIONS
DIRECTORATE	CURRENT STATUS	CURRENT AGE	RECOMMENDATIONS
MM's Office	Good condition	4	
MM's Office	Good condition	2	
Community Services	Not in good condition. Auction is recommended	7	It should await for the finalisation of the fuel theft pending case.
Corporate Services	Good condition	4	
Corporate Services	Good condition	4	
Community Services	More damages were identified in the car after it was sent for repairs of minor problem. It should be sent to fix the latest identified problem	5	
Community Services	Good condition	4	
PEDTA	Good condition	2	
IDHS	Good condition	2	
Community Services	Good condition	2	
Community Services	In good condition	7	
Community Services	Has not been used since October 2018, have problem with engine, an amount of R264 000.00 is needed to fix the truck. It is with Nissan in Queenstown	4	When budget is available, it is recommended that the truck should be fixed.
IDHS	It is with union diesel garage. Company needs payment before fixing. An amount of R55 000.00 is needed.	10	
Community Services	Good condition	5	
	DIRECTORATE MM's Office Community Services Corporate Services Corporate Services Community Services Community Services PEDTA IDHS Community Services Community Services Community Services	DIRECTORATE CURRENT STATUS MM's Office Good condition MM's Office Good condition Community Services Good condition Corporate Services Good condition Corporate Services More damages were identified in the car after it was sent for repairs of minor problem. It should be sent to fix the latest identified problem Community Services Good condition Community Services Good condition DHS Good condition Good condition Community Services In good condition	DIRECTORATE CURRENT STATUS CURRENT AGE MM's Office Good condition Aution is recommended Corporate Services Good condition Corporate Services Good condition Community Services More damages were identified in the car after it was sent for repairs of minor problem. It should be sent to fix the latest identified problem Community Services Good condition Community Services Good condition Community Services Good condition Community Services Good condition 2 Community Services Good condition 2 Community Services Good condition 7 Community Services Has not been used since October 2018, have problem with engine, an amount of R264 000.00 is needed to fix the truck. It is with Nissan in Queenstown It is with union diesel garage. Company needs payment before fixing. An amount of R55 000.00 is needed.

Tractor-CCW-	Community Services	Good condition,	24	
543-EC		minor issues		
Tractor-CCW- 550-EC	Community Services	Have not been used since March 2019. From March 2019 until June 2019 there was no budget to fix the damages. Quotation has not been sourced due to	24	
		procurement processes on hold.		
Tractor-BRN- 739-EC	Community Services	Good condition, minor issues	25	
Mahindra-HLN- 752-EC	Community Services	Good condition	4	
Nissan Hardbody HJP-267 EC	Community Services	Working but not in good condition	4	To be attend to before the problem worsens
Single cab bakkie JCG 196 EC	IDHS	Good Condition	2	
Tractor-FTS- 128-EC	Community Services	Good condition	7	
Tractor-CKM- 266-EC	Community Services	Last used in July 2018. Have major problems.	51	Auction is recommended
Grader-DFG- 421-EC	IDHS	Have not been in use since November 2017. There is a problem with an engine. Delay is due to financial constraints.	15	Its has reached its life span therefore it is recommended that it should be auctioned
TLB-loader- DDX-995-EC	IDHS	Have not been in use since March 2019. There is a problem with jerks which can be replaceable.	15	It is still in good condition therefore fixing is recommended
Wc-truck-DFD- 935 -EC	IDHS	Went for repairs during the time orders were on hold. It is still with Jackson.	15	It still in good condition
T/truck-DFD- 932-EC	IDHS	Not in good condition and it is consuming a lot of money for repairs.	15	Recommended for auction
Roller	IDHS	Has not been used since June 2018. Has a problem preventing its movement. It need a lot of money to be fixed and there is no budget	3	
Roller Bomag	IDHS	Has not been used since June 2017. Has a problem with vibrator. It has not	3	When fixed it should be placed to one of the Satellite Offices.

	1	1 1 1 1 1 1 1 1	т	
		been prioritised due to the		
		fact that another		
		alternative of roller was		
		used		
Excavator	IDHS	Good working condition	3	
Pad foot roller	IDHS	Good working condition	3	
T/truck –HFT- 991-EC	IDHS	Good working condition	5	
w/c truck-HGB-	IDHS	While taken for	5	
926-EC		roadworthy it was picked		
		up that there were minor		
		repairs. It is with Jackson,		
		no rentals, an amount of		
	1	R18 000 is needed to fix		
		the problem.	<u> </u>	
TLB HVK 291EC	IDHS	Has not been used since	3	
		June 2018, was burn during		
		protests. Insurance has		
		made pay out amounting		
		to R590 000.00		
TLB HVK 292 EC	IDHS	Has not been in use since	3	
		February 2019. Has a	-	
		problem with the engine.		
		Fleet Management to		ľ
		_		
		source quotations for fixing		
T/2 1 115T	15.15	the TLB	_	
T/truck-HFT- 986-EC	IDHS	Good Condition	5	
Grader HVK	IDHS	Has not been used May	3	
293		2019, Have electrical faults		1
		and it could not be		
		repaired due to financial		
		constraints		
Lowbed-HGH-	IDHS	It was taken for	5	
813-EC		roadworthy, now is fixed.		
		Cannot be taken because		İ
		trailers sent for roadworthy		
		are loaded on it.		
HCK 40EEC	IDUS		-	
HGK 495EC	IDHS	Good Condition	5	
Trailer				
BWR 774 EC	Community Services	No lights	26	
	(Indwe)			
BZY 096 EC	Community Services	Not working, since June	39	
	(DDX)	2018, wheel bearings &		
	(00/1)	lights		
BZY 100 EC	Community Comings		24	
D41 100 EC	Community Services	Working Conditions, no	24	
	(DDX)	lights, minor issues		

BZY 102 EC	Community Services (DDX)	Working Conditions, no lights, minor issues, tyres	21	
FBZ 279 EC	Community Services (Cacadu)	Not in good condition, did not pass roadworthy tests, faults identified amounted to R44 000.00 rand needed to fix	11	
BVB 2643 EC	Community Services (Indwe)	Not working, since June 2016, hydraulic pipes, brakes & lights	44	
FFG 382 EC	PEDTA	Good Condition	10	
FTS 142 EC	Community Services (Cacadu)	Not in good condition, did not pass roadworthy tests	7	
FTS 139 EC	Community Services (Indwe)	Not in good condition, did not pass roadworthy tests faults identified amounted to R39 000.00 rand needed to fix	7	

4.6 Records Management

The Electronic Document Management System (EDMS) is in place since 2016 and is partially used by employees. Champions from all directorates were trained on how to utilise the system and the division is trying by all means to enforce its use. The municipality is also intending to have a help desk facility to assist when there is a need with the service provider.

4.7 Wellness

The Municipality could not financially support its function of ensuring wellness of employees. A request was sent to the Chris Hani District Municipality. The Emalahleni Municipality was provided with a Healthy Lifestyle which includes Healthy Lifestyle, weight loss and body building programmes, for fifty officials for a period of nine (9) months effective from 01 September 2018 until 30 June 2019.

4.8 Skills Development and Training

		Numbe	Number of skilled employees required and actual as at (30 June 2019)	yees required a	nd actual as at (30 June 2019)		
Occupational	Gender	Employees in				Skills Matrix		
Categories	·	post as at 30 June (2019)	Learnerships (CPMD-MF)	Skills progra short	Skills programmes & other short courses		Total	
		No.	Actual: End of 2018/2019	2018/2019 Target	Actual: End of 2018/2019	Actual: End of 2018/2018	Actual: End of 2018/19 (Actual Learnerships plus	2018/2019 Target
Councillors	Female	18	1	18	14	15		8
	Male	16	0	16	10	10	0	16
MM and s56	Female	2	0	0	0	0	0	0
	Male	3	0	0	0	0	Q	0
Middle Management	Female	5	0	0	0	2	2	-
	Male	6	2	0	0	2	2	2
Junior Management,	Female	25	0	0	0	0	0	0
Technicians and								
Professionals	Male	27	0	0	0	0	0	0
Clerical	Female	30	0	10	10	0	10	10
	Male	15	0	0	0	0	0	0
e Operators and	Female	0	0	0	0	0	0	0
Drivers	Male	27	0	10	0	0	0	0
Flamentary Workers	Female	22	0	5	0	0	0	0
	Male	55	0	15	0	0	0	0
Interne and Traingee	Female	9	1	0	-	-	-	2
	Male	4	3	0	3	e	e	-
Sub total	Female	108	11	16	13	9	15	37
	Male	157	14	22	15	11	17	21
Total		265	25	38	28	21	32	28

MFMA: MUNICIPAL REGULATIONS ON MINIMUM COMPETENCY LEVELS

SIX MONTHLY IMPLEMENTATION REPORT: SCHEDULE

Every municipality must submit this schedule to National Treasury disclosing for the 6 months ending 31 December and 30 June:
1. the total number of financial and supply chain management officials employed by the municipality and each of its municipal entities, and of those officials:

- 2. how many have undertaken a competency assessment, and
- how many have complying performance agreements, including the attainment of competencies as a performance target.
 Should you wish to provide additional information please include comments in the box below or forward a separate letter to the

The schedule must be submitted no later than one month after the 6 month period end (i.e.30 January and 30 July). No extension of time will be given. This information must also be reflected in the municipality's Annual Report as at the end of the financial year to which the report relates. A municipal entity must submit its information to the parent municipality no later than 20 January and 20 July and also reflect this in its own Annual Report. National Treasury MFMA Implementation Unit, Private Bag X115, Pretoria, 0001.

To save the file press the following keys at the same time with Caps Lock off. Ctrl-Shift-S. Save file as: Muncde_COM_ccyy_Sn.xls (e.g. GT411_COM_2008_S1.xls) The electronic return must be emailed to Igdatabase@treasury.gov.za.

DECLARATION: The Municipal Manager/ Chief Executive Officer certifies this to be a true and accurate record of the implementation of the MFMA Municipal regulations on Competency Levels for officials in the municipality and/ or municipal entity for the six month period.	Manager/ Chief Executive O	fficer certifies this to officials in the muni	o be a true and accu cipality and/ or mun	rrate record of the in	nplementation of the six month period.	e MFMA Municipal
Municipal Manager/ CFO name:	Mr. Gerald Patrick De Jager	De Jager		Email:	dejagerg@emalahlenilm.gov.za	enitm.gov.za
Telephone:	047 878 2000			Date (ccyy/mm/dd):	2019/07/30	
Mun Code:	EC136			Municipality Name:	Emalahleni (Ec)	
Financial Year:	2018/19			Six Month Period: S2 Jan - June	S2 Jan - June	
Description	A. Total number of officials employed by municipality (Regulation 14(4)(a) and (c))	B. Total number of officials employed by municipal entities (Regulation 14(4)(a) and (c)	Consolidated: Total of A and B	Consolidated: Competency assessments completed for A and B (Regulation 14(4)(b) and (d))	Consolidated: Total number of officials whose performance agreements comply with Regulation 16 (Regulation 144()())	Consolidated: Total number of officials that meet prescribed competency levels (Regulation 14(4)(e))
Financial Officials			3 10 11 1			

Accounting officer	0	0	0	0	0	0
Chief financial officer	-	0	-	-	-	-
Senior managers	3	0	е	m	60	2
Any other financial officials	22	0	22	6	0	13
Supply Chain Management Officials						
Heads of supply chain management units	1	0	-	-	0	-
Supply chain management senior managers	0	0	0	0	0	0
TOTAL	27	0	27	14	4	17
Comments	The municipality has 02 Finance Manage Internal Audit intern is still to be enrolled.	02 Finance Managers still to be enrolled.	ment interns and 01 I	The municipality has 02 Finance Management interns and 01 Internal Audit intern. 02 interns are currently attending and 01 Internal Audit intern is still to be enrolled.	interns are currently a	ttending and 01

4.8.1 Comment on Skills Development and Related Expenditure and on the Financial Competency Regulations

The HRD strategy was developed and approved for implementation in December 2015 and its due for review in January 2020. The following projects are in the strategy and are implemented:

- 1. Workplace Skills Plan (WSP) training programmes
- 2. In service Training
- 3. Learnerships
- 4. External Bursaries

CHAPTER 5 - FINANCIAL PERFORMANCE

INTRODUCTION

Chapter 5 contains information regarding financial performance and highlights specific accomplishments. The chapter comprises of three components:

Component A: Statement of Financial Performance Component B: Spending Against Capital Budget

Component C: Other Financial Matters

The Annual Financial Statements reflect the continued progress being made by the Municipality to ensure a financially viable institution, which can withstand a certain degree of financial volatility and continue to operate for the benefit of its inhabitants

Government grants and subsidies have also contributed to the significant increase in revenue, resulting from improved capital spend occurring within the Municipality. This is particularly important as it has a direct impact on the lives ELM's constituent community.

ELM is exposed to continued inflationary pressures and continues to attempt to manage these pressures through cost containment initiatives. These on-going initiatives attempt to alleviate any undue pressure being placed on the community through excessive general expenditure.

An area of particular concern is the need to increase spending on the maintenance of ageing infrastructure and other assets so as to enable them to achieve their full estimated useful lives. The Municipality has recognised that it is imperative for additional funding to be provided within the repairs and maintenance budget to address this need.

COMPONENT A: STATEMENTS OF FINANCIAL PERFORMANCE

INTRODUCTION TO FINANCIAL STATEMENTS

The total deficit for the year is R 3,524 million which is an unfavourable variance of R17 690 million in comparison to the budgeted surplus of R14 166 million.

Total revenue is slightly lesser than the expected budgeted amount of R 67 386 million as the actual revenue was R 164 900 million resulting in underperformance of R 2 486 million or -1,48%.

Income from service charges increased by R10 906 million when compared to the previous year resulting from improved billing of Electricity debtors and the annual increases.

Total expenditure totalled R 213 250 million in comparison to a budget of R195 477m, thus resulting in an unfavourable variance of R17 773 million. The largest contributors to this variance were the increase caused by debt impairment of R10 535 million (75.58% more than the budgeted amount), loss on derecognition on assets of R9 549 million which was not budgeted for, and R 10 568 million which was provided for the settlement of the Magwayi Lawsuit.

5.1 STATEMENTS OF FINANCIAL PERFORMANCE EMALAHLENI MUNICIPALITY

STATEMENT OF FINANCIAL PERFORMANCE FOR THE YEAR ENDED 30 JUNE 2019

	Notes	2019 R	2018 R
REVENUE			(Restated)
Revenue from Non-exchange Transactions		175,040,570	163,028,518
Taxation Revenue		4,527,291	5,211,974
Property Rates	19	4,527,291	5,211,974
Transfer Revenue		168,109,940	155,419,736
Government Grants and Subsidies - Operating Government Grants and Subsidies - Capital	20 20	123,284,528 44,825,412	121,753,786 33,665,950
Other Revenue		2,403,340	2,396,808
Actuarial Gains Fines, Penalties and Forfeits Interest Earned - Receivables from Non-exchange Transactions	13 27	853,763 8,612 1,540,965	846,504 56,133 1,494,171
Revenue from Exchange Transactions		34,685,146	20,802,750
Licences and Permits	21	1,744,786	1,640,120
Service Charges	22	23 929 420	13.023.060
Sales of Goods and Rendering of Services	23	304,059	129,239
Rental from Fixed Assets	24	893,643	813,070
Interest Earned - External Investments	25	870,360	1,182,620
Interest Earned - Receivables from Exchange Transactions	26	3.743.460	3,359,794
Agency Services Operational Revenue	28	800,266 2,399,153	74,505 580,342
Total Revenue		209,725,717	183,831,268
EXPENDITURE		 	
Employee related cost	29	(81,209,853)	(74,700,209)
Remuneration of Councillors	30	(13,002,783)	(12,466,471)
Bad Debts Written Off Contracted Services	24	(1,509,338)	(5,260,944)
Depreciation and Amortisation	31 32	(20,507,472)	(21,032,977)
Actuarial Losses	13	(24,223,300) (90,050)	(22,152,333)
Finance Costs	33	(1,585,888)	(1,838,481)
Bulk Purchases	34	(9 624 972)	(13 258 882)
Inventory Consumed	35	(2 096 530)	(2.762.957)
Operating Leases		(168 944)	(322 305)
Transfers and Subsidies	36	(10,945,603)	(1,727,781)
Operational Costs	37	(27,679,523)	(26,065,767)
Total Expenditure		(192,644,256)	(181,589,107)
Operating Surplus/(Deficit) for the Year		17,081,460	2,242,161
Reversal of Impairment Loss/(Impairment Loss) on Receivables	38	(10,534,649)	(7,135,908)
Derecognition of fixed assets Gains/(Loss) on Sale of Fixed Assets	2.5	(9,549,698) (521,245)	(753,529)
NET SURPLUS/(DEFICIT) FOR THE YEAR		(3,524,131)	(5,647,275)
		(-,,,,)	(=,=,=,=,=,=,

COMMENT ON FINANCIAL PERFORMANCE:

REVENUE BY SOURCE

Property Rates - penalties & collection charges

There was a 13% decrease in the billed amount when compared to the previous year, this was due to the corrections made on the consumer's accounts in relation to property values.

Interest earned - external investments

Investment revenue yielded R 175 thousand lower than anticipated, due to less interest earned on unspent grants invested. This is 16.75% lesser than budgeted.

Transfers recognised - operational

A negative variance was experienced of R 3 602 million (-2.84%) as revenue is only recognised when funds are spent or when conditions of the grants are met.

Other revenue

Other revenue received was R 365 thousand less than expected, due to underperformance of Agency fees and amounts received from the Insurance being lower than budgeted amount.

EXPENDITURE BY TYPE

Debt impairment

The debt impairment figure is calculated using the approved methodology on the debt book as at 30 June 2019. This figure allows ELM to make a realistic provision taking into account the ageing of the outstanding debtors at year end. The budget for debt impairment is based on the 12 months' average collection rate. Debt impairment as at 30 June 2019 was 75.58% more than the budget and this was due to the low collection rate experienced.

Transfers and grants

The transfers and grants budget was 7448% overspent due to the provision made for the payment of Magwayi lawsuit settlement.

Other expenditure

These included derecognition of the landfill site, loss on disposal of assets and actuarial losses which were all not budgeted for. Finance charges and other expenditure were also slightly overspent due to limited available budget.