

## COMMUNITY SERVICES AND HEALTH

DIRECTORATE EXECUTIVE SUMMARY OF THE SERVICE DELIVERY AND BUDGET IMPLEMENTATION PLAN 2020/21

Executive Director (Acting): Vincent Botto
Contact person: Glen Phyfer

Website (for detailed SDBIP): http://www.capetown.gov.za/



## **VISION OF THE CITY**

To be an opportunity city that creates an enabling environment for economic growth and job creation, and to provide assistance to those who need it most. To deliver quality services to all residents in line with the City's citizen-centric focus as one of the key principles in delivering its services. To serve the citizens of Cape Town as a well-governed and corruption-free administration.

In pursuit of this vision, the City's mission is as follows:

- ✓ To contribute actively to the development of its environment, human and social capital
- ✓ To offer high-quality services to all who live in, do business in or visit Cape Town as a tourist
- To be known for its efficient, effective and caring government

This is a one-year plan, giving effect to the IDP and the budget. It sets out the strategies in quantifiable outcomes that will be implemented over the 2020/21 financial year. It considers what was set out in the IDP. It indicates what the Directorate needs to do to deliver on the IDP objectives, how this will be done, what the outcomes will be, what processes will be followed, and what inputs will be used.

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## 1. EXECUTIVE SUMMARY

The Community Services and Health Directorate (CSH) will continue to provide community facilities, spaces and services, as well as developmental programmes in support of building communities and individuals' capabilities towards improved social well-being. In so doing, the Directorate directly supports "the opportunity city", "the caring city" and "the inclusive city", and contributes to "the safe city" and "the well-run city". Community Services and Health Directorate supports the Cape Town Resilience Strategy, and constantly seeks initiatives.

The Directorate is one of the implementing agents of the Social Development Strategy (SDS), and as such, ensures co-ordination across all directorates. Furthermore, within the transversal safe communities working group, the Directorate drives the following transversal work streams through its SD and ECD Department:

- ✓ Integrated youth development strategy, with its implementation plan;
- ✓ Social and situational crime prevention strategy, with its implementation plan; and
- Alcohol and other drug harm minimisation strategy, with its implementation plan.

Service delivery is achieved through five line departments, namely:

- City Health;
- ✓ Library and Information Services;
- Recreation and Parks:
- ✓ Social Development and Early Childhood Development; and
- ✓ Planning, Development and Project Management Office.

Also, three shared service departments, namely:

✓ Support Services, Finance, and Human Resources Business Partner.

This Service Delivery and Budget Implementation Plan (SDBIP) has therefore been developed to ensure delivery on the City's strategies, priorities and objectives as set out in the IDP, SDS and EGS, Community Service and Health Integrated Facilities Provision Framework, and to ensure that mandated core community service business is provided in an efficient, effective and sustainable manner.

# 2. PURPOSE AND SERVICE MANDATE OF THE DIRECTORATE

The purpose of the Directorate is to contribute through its service offering to the health and well-being of the citizens of Cape Town by delivering on specific City priorities set out in the IDP, whilst continuing to provide and maintain a range of core social services relating to community service facilities, services and developmental programmes.

Legislative imperatives: The Constitution of the Republic of South Africa, Act 108 of 1996; sections 4 (2)(j), 16 (1)(b)(1) and 51 (a) of the Municipal Systems Act, No 32 of 2000; section 152 of the Constitution of the Republic of South Africa: "The objects of local government" are... (c) to promote social and economic development; (d) to promote a safe and healthy environment; (e) to encourage involvement of communities/organisations in local government".

Caring city: (Community facility provision) The key focus is to improve the living conditions, health and well-being of the City's communities and individuals through the provision of a range of community facilities, services and developmental programmes. Planned and developed in a joint and integrated manner with internal and external partners and in areas of greatest need, including integrated programmes/facilities in informal settlements.

Inclusive city: (Substance abuse; primary healthcare; social inclusion). It is recognised that there are deep social challenges in Cape Town linked to the country's historical roots, including substance abuse and homelessness, with the youth being the most at risk of falling into the vicious cycle of social ills. Furthermore, criminal activity appears to occur more often in areas of social deprivation and poverty.

Through the Directorate's departments, the broad social challenges and needs are addressed by providing and maintaining a holistic and integrated range of mandated community facilities, functions, services and developmental programmes, including, but not limited to, those mentioned below. The ability to deliver services is resource dependent, and the Directorate continues to assess and prioritise resources and capacity against needs in order to influence future decision making.

- Delivering a comprehensive primary healthcare service, including personal primary healthcare (child health, maternal and women health, noncommunicable diseases, and adult curative care in some larger facilities), matrix and men's clinics, as well as municipal healthcare (also referred to as environmental health services);
- Providing access to the services and resources required for informational, educational, cultural and recreational needs through a free public library service that includes spaces and programmes for social development;
- Providing attractive, safe, accessible and sustainable community facilities and spaces where the citizens of Cape Town can engage in active and passive recreation;
- Providing cemeteries and crematoria, which are an integral part of a dignified and efficient interment service;

- Horticultural services at City of Cape Town facilities;
- Community engagements and social preparation;
- Providing a number of targeted community services programmes focussing on substance abuse, homelessness, youth development, early childhood development, poverty alleviation and vulnerable groups;
- Developing, implementing and maintaining community-orientated arts, culture and heritage programmes, services, infrastructure and partnerships; and
- Upgrading, replacing and providing new community service facilities that are planned and developed in a joint and integrated manner with internal and external partners and in areas of greatest need, including integrated facilities in informal settlements.

## 3. STRATEGIC ALIGNMENT TO THE IDP

Community Services and Health is the lead Directorate for the objectives and programmes within the SFAs of the IDP as represented below.

### **SFA 1: OPPORTUNITY CITY**

#### Objective 1.2: Leveraging technology for progress

Programme 1.2.a Digital city: Technology innovation project: The IT modernisation initiative aims to identify business processes that maximise the usage of facilities and services through the introduction and application of IT systems, such as an appointment booking system for health services and an online facilities and halls booking system.

#### **SFA 2: SAFE CITY**

### Objective 2.1: Safe communities

Programme 2.1.b Holistic crime prevention: ECD informal settlement safety project: The City will assist ECD providers in informal settlements to comply with safety regulations. This process will also include safety audits.

## **SFA 3: CARING CITY**

#### Objective 3.1: Excellence in service delivery

- ✓ Programme 3.1.b Social services facility provision: Social facilities project: The City will provide social services facilities that are equitably distributed and of the required standard, planned and developed in a joint and integrated manner with internal and external partners, in areas of greatest need. A social services facilities provision plan will be developed to inform this process. The process will include seeking and maximising external funding and partnership opportunities.
- ✓ Programme 3.1.b Social services facility provision: Cemetery and crematorium provision project: Increasing urban density and demand for burial space necessitates careful planning of cemeteries and crematoria. The City is developing a strategic framework for the provision of cemeteries. This will include the development of a new cemetery, the extension of the existing cemeteries and the renegotiation of the biodiversity offset agreements to further prolong the lifespan of other cemeteries.

#### Objective 3.2: Mainstreaming basic service delivery to informal settlements and backyard dwellers

Programme 3.2.b Human settlements programme: Informal settlements services project: In aiming for the progressive upgrade of informal settlements, the City intends to achieve ongoing improvement to services and public spaces. Integrated CSH facilities will be developed to respond to this aim.

## **SFA 4: INCLUSIVE CITY**

#### Objective 4.3: Building integrated communities

✓ Programme 4.3.d Substance abuse: Substance abuse treatment project: Matrix sites deliver free evidence and community-based alcohol and drug treatment. Substance abuse treatment takes the form of evidence-led interventions to cater for the needs of individuals of ages above 18 who are at risk or seeking treatment, and brief interventions aimed at those aged 18 and younger.

- ✓ Programme 4.3.d Substance abuse: Substance awareness and prevention projects: Substance abuse awareness is raised through: Strengthening Families, which focusses on family relationships; a simulation programme to illustrate the consequences of alcohol consumption during pregnancy; soft skills development for learners to equip them to steer clear of substance abuse; commemorating International Foetal Alcohol Syndrome (FAS) Day, as well as International Day Against Drugs and Illicit Trafficking to raise awareness of the consequences of drug and alcohol abuse.
- Programme 4.3.e Primary healthcare: Intergovernmental collaboration project: The Western Cape Health Department and the City are partners in providing personal primary healthcare services, in compliance with the Constitution and governed by an SLA. The City will continue to work with the province to ensure seamless health service delivery, particularly to the vulnerable and poor.
- ✓ Programme 4.3.e Primary healthcare: Complying with national core standards and improving access to services: The City is committed to developing and implementing plans for its clinics to comply with 'ideal clinic' standards. The City will continue to gradually implement measures to ensure comprehensive service provision closer to where people live, such as rolling out antiretroviral treatment (ARV) sites to areas not served at present.
- ✓ Programme 4.3.e Primary healthcare: Environmental health services: The City's environmental health services plays a pivotal role in ensuring a healthy environment and reducing exposure to agents that may cause disease, particularly among the most vulnerable residents of Cape Town in the informal settlements. This is a crucial aspect of the disease prevention and health promotion objectives of primary healthcare.
- Programme 4.3.f Social inclusion: Social inclusion is vital to ultimately reach a state of social cohesion. It generally refers to communities and individuals' abilities to fully participate in society, both socially and economically. To create an enabling environment for social inclusion, the City seeks to understand the underlying challenges facing our communities, and then implement projects to respond to these challenges. Key to achieving this, is the provision of adequate public services and assets as an enabler towards the poor and vulnerable in society being uplifted and assisted. Projects within this programme (each with their own sets of initiatives):
  - Homeless people project: Homeless people are a vulnerable group that require assistance to achieve reintegration into communities and access to employment opportunities. To address this, the City will champion interventions to prevent, rehabilitate and reintegrate homeless people, manage the current Safe Space, while also investigating opportunities to create additional spaces and assist relevant NGOs in order to enable them to increase bed space. (HOMAC PC)
  - Youth development project: Youth development demands a transversal approach, with various stakeholders collaborating to offer targeted interventions aimed at this vulnerable group. Youth development initiatives will be provided in high-risk areas as part of a package of services, opportunities and support to young people.
  - Informal settlements social inclusion project: Social services programmes will be delivered in informal settlements to help build community capacity and improve access to social services and initiatives.
  - Healthy lifestyle project: A number of initiatives will be implemented to address non-communicable diseases, and the social and personal factors associated with them, in an integrated, holistic manner.
     The objective is to promote a healthy lifestyle and generally improve the health, quality of life and well-being of Cape Town's citizens. This, in turn, will enable their full participation in society and foster social cohesion.
  - Literacy project: Initiatives will focus on functional, digital and information literacy. In addition, to help create a reading culture, reading initiatives such as storytelling, reading programmes and formal book clubs will be a strong City focus. This will be another way to promote full participation in society.
  - Social inclusion research project: The City will continue to undertake research to inform the direction and content of social inclusion projects.

## 4. PERFORMANCE PROGRESS AND OUTCOMES

#### **4.1. PAST YEAR'S PERFORMANCE**

Both corporate scorecard indicators for which the Directorate was responsible, were exceeded at the end of the previous financial year.

The Directorate is currently responsible for two corporate scorecard indicators:

- ✓ 3.O: Number of community services facilities in informal settlements; and
- ✓ 4.E: Number of Strengthening Families programmes implemented.

The complete report on the past year's performance is available at: <a href="http://www.capetown.gov.za/en/IDP/Pages/default.aspx">http://www.capetown.gov.za/en/IDP/Pages/default.aspx</a>

#### **4.2. AREAS OF BUSINESS IMPROVEMENT**

The Directorate adopts a culture of excellence and performance. In addition to normal reporting, we will also focus on the following in the financial year:

- ✓ Develop and finalise agreements with Western Cape Provincial Government:
  - City Health: Three-year service level agreement with Provincial Health;
  - Arts and Culture: Agreement with the Provincial Department of Cultural Affairs and Sport;
  - Library and Information Services: Implementation of protocol agreement;
  - Recreation and Parks: Implementation of protocol agreement with the Provincial Department of Cultural Affairs and Sport; and
  - SDECD: Implementation of protocol agreement with DSD.
- ✓ Participate in the review of the City's Social Development Strategy;
- Improve availability of cemeteries and crematoria, which are an integral part of a dignified and efficient interment service;
- Finalise outstanding leases;
- ✓ IT initiatives that improve the ease of doing business;
- Review/assess current leasing/usage arrangements of golf courses with CCT Property Management Department (process to be finalised within five years); and
- ✓ Develop a "Netball 2023" readiness plan.

# 5. PARTNERS AND STAKEHOLDERS IN THE STRATEGY PLAN

PARTNERS/STAKEHOLDERS	ROLES AND RESPONSIBILITIES
National departments	<ul><li>Policy direction</li><li>Monitoring and evaluation</li><li>Reporting to National Treasury</li></ul>
Provincial departments	<ul><li>Funding and service level agreements</li><li>Protocol agreements</li><li>Policy direction</li><li>Monitoring and evaluation</li></ul>
NGOs, CBOs, Sector-based institutions, Friends-based Groups, Volunteers	Extensive partnerships with a large number of organisations who augment our resources in terms of service delivery.
Other partners	Academic and research institutions make substantial donations and service inputs.
Other directorates	Community Services and Health's departments interact with a number of other directorates/ departments in various forums. An example of this would be the collaboration between the Mayoral Urban Regeneration Programme (MURP) in the Hanover Park Area and at the Bishop Lavis Sports Complex.

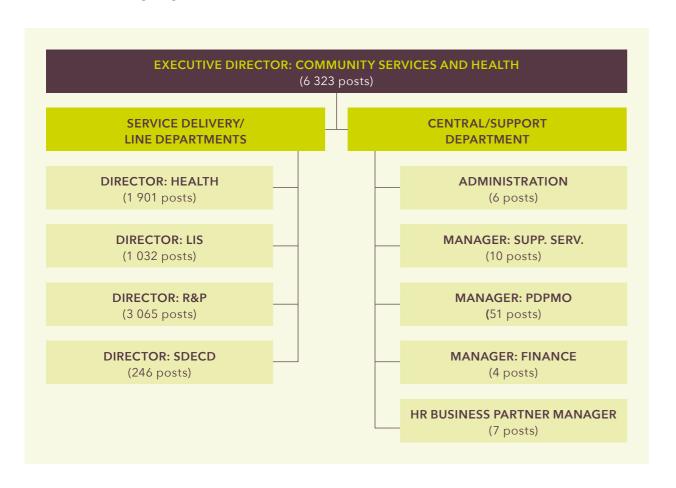
## 6. RESOURCES

## **6.1. SENIOR MANAGEMENT CAPABILITY AND STRUCTURE**

The Directorate is headed by an Executive Director, with its management committee structure as follows:

- Director: City Health;
- ✓ Director: Library and Information Services;
- Director: Recreation and Parks;
- ✓ Director: Social Development and Early Childhood Development;
- ✓ Manager: Planning, Development and Project Management Office; and
- ✓ Shared Services' Managers:
  - Support Services;
  - Finance; and
  - HR.

## 6.1.1. Directorate organogram



#### 6.1.2. Possible outsource services

The Directorate regularly reviews its approach on utilising a combination of own and contracted resources to deliver the services. This has proven to be the most cost-effective resourcing strategy and provides a level of flexibility to respond to organisational needs more speedily than would be the case if these services were exclusively outsourced or performed internally.

## 6.1.3. Lead and contributing Directorate

The Directorate is the lead Directorate for the following IDP programmes:

- ✓ 3.1.b: Social services facility provision;
- 4.3.d: Substance abuse;
- ✓ 4.3.e: Primary healthcare; and
- 4.3.f: Social inclusion.

## **6.2. FINANCIAL INFORMATION**

Please take note that the outcome of the final 2020/21 budget, including any additional requests to BSC for 2020/21 was not concluded at the time of submission of the draft version of this document. Figures below are as per the budget that will be tabled at Council on 27 May 2020.

## 6.2.1. Summary of revenue by source

DESCRIPTION	VOTE 1 - COMMUNITY SERVICES AND HEALTH (R THOUSAND)
Revenue by source	
Sales of goods and rendering of services	(781)
Rental of facilities and equipment	(12 063)
Fines	(2 473)
Transfers and subsidies	(815 606)
Service charges	(43)
Other revenue	(32 011)
Total Revenue (excluding capital transfers and contributions)	(862 977)

## 6.2.2. Summary of operating expenditure by type

DESCRIPTION	VOTE 1 - COMMUNITY SERVICES AND HEALTH (R THOUSAND)
Expenditure by type	
Employee related costs	2 680 618
Finance charges	3 130
Depreciation and asset impairment	172 056
Other materials	533 882
Contracted services	852 992
Transfers and subsidies	39 826
Other expenditure	121 448
Losses	9
Total Primary Expenditure	4 403 961

## 6.2.3. Summary of capital expenditure by type

vote/ Pro Capital de	ogramme/ Total project estimate		outcomes	Current year	revenue	20 Mediun e and expe framework	enditure	Proj inforn	ject nation
- As	mber set class 4	Audited outcome 2017/18	Audited outcome 2018/19	Est. budget 2019/20	Budget year 2020/21	Budget year +1 2021/22	Budget year +2 2022/23	Ward location	New or renewal
Community Services Vario and Health	us New	260 247	294 231	331 634	422 122	314 863	250 706	Multi	Various
Total Capital Expe	nditure	260 247	294 231	331 634	422 112	314 863	250 706	Multi	Various

## 6.2.4. Major projects aligned to PPPM (IDP linkage)

- ✓ IT modernisation
- Upgrade Maitland Crematorium
- ✓ Khaya integrated recreation facility
- ✓ Bellville integrated receation facility
- ✓ New Fisantekraal Clinic
- ✓ Community Services and Health: Facility upgrade
- Regional recreation hubs
- ✓ Books, periodicals and subscriptions
- ✓ Depot upgrades
- ✓ Library upgrades and extensions
- ✓ Hout Bay recreation facility upgrade
- ✓ Delft South Clinic Diabetic Services

Additional projects that could result in capital projects being aligned to PPPM in future have been identified:

- ✓ Upgrades at the Lentegeur Sports Complex;
- ✓ Initiation of an investigation to identify the viability of athletics tracks in the four service delivery areas; and
- $\checkmark$  Initiation of an investigation to identify the viability of one Citywide Aqua Centre.

## 6.2.5. Narrative on Directorate capital programme

The core function of Community Services and Health Directorate (vote 1) is to provide community facilities (libraries, ECDs, clinics and recreational facilities), linked to the IDP's strategic focus area (caring city), objective (excellence in service delivery), and programme (social services facility provision). The capital programme is in the context of the overall capital programme of CCT, which will be tabled at Council on 27 May 2020.

## 7. RISK ASSESSMENT

Management, with the assistance of Integrated Risk Management (IRM), have applied their minds and due care has been taken to ensure that risks which could impact on the Directorate not achieving its objectives are identified, addressed and managed in accordance with the City's approved IRM Policy and Framework. Capacity of staff resources (including environment health practitioners), in order to perform core business, as well as ensure legislative compliance, are constantly under pressure and are assessed against needs. The results of these assessments attempt to influence future decision making. Risk registers are utilised as a management tool in order to manage identified risks of the Directorate. The risks identified and rated equal to or above the Council-approved risk acceptance level will be reported to the Executive Management Team (EMT). The Executive Director to inform/discuss the Directorate's risks with the relevant Mayoral Committee member on a six-monthly basis.

## 7.1. REVENUE RISKS

Due care is taken to ensure that revenue risks which could impact on not achieving the Directorate's objectives are identified, addressed and managed in accordance with the City's approved IRM Policy and IRM Framework.

# 8. OBJECTIVES AND INDICATORS OF THE DIRECTORATE SCORECARD

The Community Services and Health 2020/21 Directorate scorecard is attached as annexure A. The Directorate also reports on corporate scorecard indicators as presented below:

ALIGNMENT TO IDP	INDICATOR	BASELINE (JUNE 2020 TARGET)	TARGET SEP 2020	TARGET DEC 2020	TARGET MAR 2021	TARGET JUN 2021
SFA 3: Caring city Objective 3.1: Excellence in service delivery Programme 3.2.b: Human settlements programme	3.O: Number of community services facilities in informal settlements	01	1	1	1	2
SFA 4: Inclusive city Objective 4.3: Building integrated communities Programme 4.3.d: Substance abuse programme	4.E: Number of Strengthening Families programmes implemented	10 <sup>1</sup>	2	6	12	18

<sup>&</sup>lt;sup>1</sup>Covid-19 updates subject to Council approval 30 June 2020.

## 9. AUTHORISATION

The undersigned do hereby indicate their agreement with the contents of this document.

	NAME	SIGNATURE	DATE
Executive Director (Acting): Community Services & Health	Mr Vincent Botto	for	20/5/020
Mayoral Committee Member: Community Services & Health	Councillor Zahid  Badroodien	<del>1</del>	26/3/2020

## 10. APPENDICES

Annexure A: 2020/21 Community Services and Health Directorate Scorecard

										70
		RESPONSIBLE PERSON	Director: City Health	Director: City Health	Director: City Health	Director: City Health	Director: City Health	Director: City Health	Director: LIS	Director: Recreation and Parks
		30 JUN 21	2 300	≥75%	ω	1 300	1 000	20 000	102 000	48
	ETS	31 MAR 21	1 725	≥75%	4	975	750	17 125	ΑΛ	36
ARD	TARGETS	31 DEC 20	1 150	≥75%	4	650	200	11 416	Τ⁄Α	24
2020/21 COMMUNITY SERVICES AND HEALTH DIRECTORATE SCORECARD		30 SEP 20	575	≥75%	0	325	250	5 708	ΑΛ	12
HEALTH DIRECT	ANNUAL	TARGET 30 JUNE 2021	2 300	≥75%	ω	1 300	1 000	20 000	102 000	48
ICES AND I	ANNUAL	TARGET 30 JUNE 2020	2 103	≥73%	4	1 200	1 000	19 708	25 500	New Indicator
UNITY SERV		BASELINE 2018/19	2 258	83%	New Indicator	New Indicator	1 204	New definition	28 220	New Indicator
2020/21 COMM		INDICATOR	Number of clients screened at the Substance Abuse Treatment Centres	% of clean drug tests of clients within the programme	Number of Live well challenge initiatives implemented	Number of Assessments conducted at Matrix® Sites	Number of Health and Hygiene Interventions related to informal settlements completed	Number of monitoring visits to informal settlements to identify potential Health Hazards	Average number of library visits per library	Number of Active Communities Recreation Programmes implemented as
		LEAD DIR.	CSH	CSH	CSH	CSH	CSH	CSH	CSH	CSH
		CSC IND.	-	-	-	-	-	-	9.E.3H 88D	-
	OIDP	LINKTO	Prog. 4.3.d Substance Abuse	Prog. 4.3.d Substance Abuse	Prog. 4.3.d Substance Abuse	Prog. 4.3.d Substance Abuse	Prog. 4.3.f Social Inclusion	Prog. 4.3.e Primary Healthcare	Prog. 4.3.f Social Inclusion	Prog. 4.3.f Social Inclusion
	ALIGNMENT TO IDP	OBJECTIVE	4.3 Building Integrated Communities	4.3 Building Integrated Communities	4.3 Building Integrated Communities	4.3 Building Integrated Communities	4.3 Building Integrated Communities	4.3 Building Integrated Communities	4.3 Building Integrated Communities	4.3 Building Integrated Communities
		STRATEGIC FOCUS AREA	SFA 4: Inclusive city	SFA 4: Inclusive city	SFA 4: Inclusive city	SFA 4: Inclusive city	SFA 4: Inclusive city	SFA 4: Inclusive city	SFA 4: Inclusive city	SFA 4: Inclusive city

TARGETS	31 DEC 20 31 MAR 21 30 JUN 21 PERSON	Plan Plan Director: Implemented according to according to milestones milestones	Director: A/T A/T 10% Recreation and Parks	Director: 80 90 120 Recreation and Parks	Director: 80 90 120 Recreation and Parks	Director: 10 10 Recreation and Parks	6 12 20 Director: SD&ECD	2 5 6 Director:
	30 SEP 20	Plan Implemented I according to milestones	T/A	30	30	10	2	<b>₫</b> 2
ANNUAL	TARGET 30 JUNE 2021	Plan Implemented according to milestones	10%	120	120	10	20	9
ANNUAL	TARGET 30 JUNE 2020	New Indicator	New Indicator	100	100	10	101	∞
	BASELINE 2018/19	New Indicator	New Indicator	New Indicator	New Indicator	10	19	S : W :
	INDICATOR	Public Open Space Mowing- Season Readiness and Management Plan implemented according to established milestones	Percentage utilisation rate of Community Halls	Number of facility (community centres, halls) audits conducted	Number of open space facilities audits conducted	Number of identified areas where trained EPWP Facility Protection Officers have been deployed	Number of Strengthening Families programmes implemented	Number of initiatives implemented to effect the
	LEAD DIR.	CSH		CSH	CSH	CSH	CSH	CSH
	CSC IND.	-	C88 H23.5	-	-	-	C2C 4'E	-
IDP	LINK TO PROGRAMME	Prog.3.1.a Excellence in service delivery	Prog.3.1.a Excellence in service delivery	Prog. 3.1.b. Social Facilities Provision	Prog. 3.1.b. Social Facilities Provision	Prog. 3.1.b. Social Facilities Provision	Prog. 4.3.d Substance Abuse	Prog. 4.3.d Substance
ALIGNMENT TO IDP	OBJECTIVE	3.1 Excellence in service delivery	3.1 Excellence in service delivery	3.1 Excellence in service delivery	3.1 Excellence in service delivery	3.1 Excellence in service delivery	4.3 Building Integrated Communities	4.3 Building Integrated
	STRATEGIC FOCUS AREA	SFA 3: Caring city	SFA 3: Caring city	SFA 3: Caring city	SFA 3: Caring city	SFA 3: Caring city	SFA 4: Inclusive city	SFA 4:

<sup>1</sup> Covid-19 updates subject to Council approval 30 June 2020.

	ALIGNMENT TO IDP	OIDP					ANNUAL	ANNOAL		TARG	TARGETS		
	OBJECTIVE	LINKTO	CSC IND.	LEAD DIR.	INDICATOR	BASELINE 2018/19	TARGET 30 JUNE 2020	TARGET 30 JUNE 2021	30 SEP 20	31 DEC 20	31 MAR 21	30 JUN 21	RESPONSIBLE PERSON
SFA 4: Inclusive city	4.3 Building Integrated Communities	Prog. 4.3.f Social Inclusion	-	CSH	Number of youth development initiatives implemented	New Indicator	6	6	2	4	9	6	Director: SD&ECD
SFA 4: Inclusive city	4.3 Building Integrated Communities	Prog. 4.3.f Social Inclusion	-	CSH	Number of youth participating in youth development interventions	22 091	12 000	18 000	1 500	4 500	10 500	18 000	Director: SD&ECD
SFA 4: Inclusive city	4.3 Building Integrated Communities	Prog. 4.3.f Social Inclusion	-	CSH	Number of #YouthStartCT entrepreneurial challenges hosted	<b>-</b>	<del>-</del>	<b>-</b>	Project plan approved	Engaging possible partners	MOA signed	<del>-</del>	Director: SD&ECD
	2.1. Safe Communities	Prog. 2.1.b Holistic Crime Prevention	-	CSH	Number of interventions in ECDs implemented based on assessments conducted in previous year	New Indicator	New Indicator	100	27	24	72	100	Director: SD&ECD
SFA 4: Inclusive city	4.3 Building Integrated Communities	Prog. 4.3.f Social Inclusion	-	CSH	Number of initiatives implemented in support of the Cape Town Resilience Strategy	New Indicator	New Indicator	Ю	0	0	0	Ю	Director: SD&ECD
SFA 4: Inclusive city	4.3 Building Integrated Communities	Prog. 4.3.f Social Inclusion	-	CSH	Number of mural art initiatives implemented	New Indicator	New Indicator	2	0	7	4	9	Director: SD&ECD
SFA 4: Inclusive city	4.3 Building Integrated Communities	Prog. 4.3.f Social Inclusion		CSH	Establish an additional Safe Space	New Indicator	New Indicator	Safe Space established	Site identification	Submit land use approval application	Renovations completed	Safe Space established	Director: SD&ECD
SFA 4: Inclusive city	4.3 Building Integrated Communities	Prog. 4.3.f Social Inclusion		CSH	Number of transversal informal settlement initiatives	New Indicator	New Indicator	ω	0	0	0	ω	Transversal

		RESPONSIBLE PERSON	Manager: PD&PMO	Manager: PD&PMO	Manager: PD&PMO	Manager: PD&PMO	Manager: PD&PMO	Manager: PD&PMO
		30 JUN 21	7	4	95%	95%	16	%06
	TARGETS	31 MAR 21	τ-	A/T	95%	95%	A/T	40%
ARD	TARG	31 DEC 20	<del>-</del>	Τ/A	62%	95%	Α/T	25%
ORATE SCOREC		30 SEP 20	ζ-	Α⁄Τ	95%	95%	A/T	10%
HEALTH DIRECT	ANNOAL	TARGET 30 JUNE 2021	0	4	95%	95%	91	%06
ICES AND H	ANNUAL	TARGET 30 JUNE 2020	<del>-</del>	4	95%	95%	6	%06
JNITY SERVI		BASELINE 2018/19	-	m	98,81%	97,63%	7	%80′66
2020/21 COMMUNITY SERVICES AND HEALTH DIRECTORATE SCORECARD		INDICATOR	Number of Community Services Facilities in informal settlements	Number of IT initiatives that improve the ease of doing business	Percentage of projects screened in SAP PPPM	Percentage of 2020/21 Project Managers comments completed in SAP PPPM	Number of Community Services facilities developed/ upgraded with National Grant funding	Percentage spend of National Grant funding
		LEAD DIR.	CSH	Corp Serv	CSH	CSH	CSH	CSH
	DP	LINKTO CSC PROGRAMME IND.	Prog. 3.2.b Human Settlements CS	Prog. 1.2.a Digital City	Prog. 5.1.a Efficient, Responsible and Sustainable City Services	Prog. 5.1.a Efficient, Responsible and Sustainable City Services	Prog. 3.1.b Social Services Facility Provision	Prog. 3.1.b Social Services Facility Provision
	ALIGNMENT TO IDP	OBJECTIVE	3.2 Mainstreaming basic service delivery to informal settlements and backyard dwellers	1.2 Leveraging Technology for Progress	5.1 Operational sustainability	5.1 Operational sustainability	3.1 Excellence in service delivery	3.1 Excellence in service delivery
		STRATEGIC FOCUS AREA	SFA 3: Caring city	SFA 1: Opportunity city	SFA 5: Well-run city	SFA 5: Well-run city	SFA 3: Caring city	SFA 3: Caring city

		202	0/21 COMM	UNITY SERV	ICES AND H	HEALTH DIRECTO	2020/21 COMMUNITY SERVICES AND HEALTH DIRECTORATE SCORECARD ANNUAL ANNUAL		TARGETS		
LINK TO CSC DIR. PROGRAMME IND.	LEAD DIR.		INDICATOR	BASELINE 2018/19	TARGET 30 JUNE 2020	TARGET 30 JUNE 2021	30 SEP 20	31 DEC 20	31 MAR 21	30 JUN 21	RESPONSIBLE PERSON
Prog. 1.3.b W. CSH Exp Creation (E	-	Se Exp Work	Community Services and Health: Number of Expanded Public Works Programme (EPWP) work opportunities	11 498	7 363	000 8	2 000	4 000	000 9	8 000	Manager: EPWP
Prog. 1.3.b Mayor's Job . CSH Time Creation (F	·	Ser Nun Time (F)	Community Services and Health: Number of Full Time Equivalent (FTE) work opportunities created	2 872	1 192	1 192	298	596	894	1 192	Manager: EPWP
Prog. 1.3.a Corp budge Skills Serv Work		Perd budge implem Workp	Percentage budget spent on implementation of Workplace Skills Plan	98,2%	75%	95%	10%	30%	70%	95%	Director: HR
Prog. 1.3.a Skills Serv oppor linvestment (excent		Nur extern and oppo (exc	Number of external trainees and bursary opportunities (excluding apprentices)	148	148	106	44	89	93	106	Director: HR
Prog. 1.3.a Skills Serv app		Nunel	Number of unemployed apprentices	N/A	A/N	N/A	N/A	N/A	N/A	N/A	Director: HR
Frog. 3.1.a Excellence L Corp adher in Service $\omega$ Serv citywid		Perce adher citywid req	Percentage adherence to citywide service requests	95,25%	%06	%06	%06	%06	%06	%06	Head at IS&T: Nomvuyo Mnyaka

		RESPONSIBLE PERSON	Director: Organisational Effectiveness and Innovation	Director: Organisational Effectiveness and Innovation	Director: Organisational Effectiveness and Innovation	Director: Organisational Effectiveness and Innovation	Director: HR	Director: HR	Director: HR
	ETS	30 JUN 21	%06	2%	74%	39,71%	≥ 5%	100%	< 7% plus % turnover
		31 MAR 21	%06	2%	74%	39,71%	≥ 5%	100%	< 7% plus % turnover
ARD	TARGETS	31 DEC 20	%06	2%	74%	39,71%	≥ 5%	100%	< 7% plus % turnover
ORATE SCORECA		30 SEP 20	%06	5%	74%	39,71%	≥ 5%	100%	< 7% plus % turnover
HEALTH DIRECTO	ANNUAL TARGET 30 JUNE 2021		%06	7%	74%	39,71%	s 5%	100%	< 7% plus % turnover
ICES AND	ANNUAL TARGET 30 JUNE 2020		%06	2%	74%	(45.3) 39,52%	≥ 5%	100%	< 7% plus % turnover
JNITY SERV	BASELINE 2018/19		New Indicator	3,32%	New Indicator	New Indicator	3,55%	91,30%	6,10%
2020/21 COMMUNITY SERVICES AND HEALTH DIRECTORATE SCORECARD	INDICATOR		Percentage adherence to the EE target of overall representation by employees from the designated groups	Percentage adherence to equal or more than 2% of complement for persons with disabilities (PWD)	Percentage of employees from the EE target (designated) groups employed in the three highest levels of management (NKPI)	Percentage of women employed across all occupational levels in line with the annual EE plan targets	Percentage of absenteeism	Percentage OHS investigations completed	Percentage vacancy rate
		LEAD DIR.	Corp	Corp Serv	Corp	Corp	Corp Serv	Corp Serv	Corp
		CSC IND.	-	-	d.p	-	-	-	-
	IDP	LINK TO PROGRAMME	Prog. 4.3.b Citizen Value	Prog. 4.3.b Citizen Value	Prog. 4.3.b Citizen Value	Prog. 4.3.b Citizen Value	Prog. 5.1.b Value Awareness	Prog. 5.1.b Value Awareness	Prog. 5.1.b Value Awareness
	ALIGNMENT TO IDP	OBJECTIVE	4.3 Building Integrated Communities	4.3 Building Integrated Communities	4.3 Building Integrated Communities	4.3 Building Integrated Communities	5.1 Operational sustainability	5.1 Operational sustainability	5.1 Operational sustainability
		STRATEGIC FOCUS AREA	SFA 4: Inclusive city	SFA 4: Inclusive city	SFA 4: Inclusive city	SFA 4: Inclusive city	SFA 5: Well-run city	SFA 5: Well-run city	SFA 5: Well-run city

SERVICES AND HEALTH DIRECTORATE SCORECARD	ANNUAL ANNUAL TARGETS	TARGET 30 JUNE 2020	ANNUAL ANNUAL TARGETS		100% 100% 25% 50% 75% 100% Manager: Ethics	90,0% 90,0% 15,2% 29,4% 48,9% 90,0% Finance	95,0% 95,0% 22,1% 47,4% 71,0% 95,0% Manager:	New 80% 20% 50% 70% 80% and Disposal Management	New 100% 100% 100% 100% 100%
2020/21 COMMUNITY 5		INDICATOR 2018/19		Percentage of 93,05% assets verified	Percentage of Declarations of Interest completed	Percentage spend 93,70% of capital budget	Percentage of operating budget 96,9% spend	Percentage Completion rate of tenders processed as per the demand plan	Percentage of external audit
		C DIR.		짇	Corp	Z	Z Z	- <del>0 ‡</del>	C C
	DP	LINKTO CSC PROGRAMME IND.	DP	Prog. 5.1.a Efficient, Responsible and Sustainable City Services	Prog. 5.1.b Value Awareness	Prog. 5.1.a Efficient, Responsible Quand and Sustainable City Services	Prog. 5.1.a Efficient, Responsible and Sustainable City Services	Prog. 5.1.a Efficient, Responsible and Sustainable City Services	Prog. 5.1.a Efficient, Responsible
	ALIGNMENT TO IDP	OBJECTIVE	ALIGNMENT TO I	5.1 Operational Is sustainability	5.1 Operational sustainability	5.1 Operational Isustainability	5.1 Operational Is sustainability	5.1 Operational Isustainability	5.1 Operational
		STRATEGIC FOCUS AREA			SFA 5: 5 Well-run city	SFA 5: 5 Well-run city	SFA 5: 5 Well-run city	SFA 5: 5 Well-run city	SFA 5: 5





2020/21 COMMU	NITY SERVICES AND HEALTH DIRECTORATE SCORECARD DEFINITIONS
INDICATOR	INDICATOR DEFINITION/COMMENTS
Number of clients screened at the Substance Abuse Treatment Centres	This indicator measures the number of clients seeking help for substance abuse, being screened in a first interview at the Alcohol and Drug Treatment site.
% of clean drug tests of clients within the programme	This indicator measures the percentage of drug tests that were negative for clients' drug of choice that were conducted with clients on the programme.
Number of Live well challenge initiatives implemented	A live well challenge initiative consists of an eight-week programme that provides the community with health education and exercise sessions conducted within a specific area as a collaborative effort of the departments of the Community Services and Health Directorate.
Number of Assessments conducted at Matrix® Sites	This indicator measures the number of clients seeking help for substance abuse at the City's Matrix Alcohol and Drug Treatment sites, attending a second session determining their needed treatment programme.
Number of Health and Hygiene Interventions related to informal settlements completed	Health and Hygiene interventions are projects run by environmental health within communities which educate the communities on various topics. These aim to improve the knowledge of the community on health and hygiene issues which affect their lives. Interventions may be pre-planned or in response to a specific incident, e.g. outbreak. H&H Interventions related to informal settlements include rodent control, waste management, hand washing, diarrhoeal disease prevention and awareness, proper use of sanitation, clean-up campaigns, food hygiene for informal food traders, community health risk awareness, pollution control awareness, door-to-door awareness, etc.
Number of monitoring visits to informal settlements to identify potential Health Hazards (c54)	Monitoring visits include non-compliance with service standards in terms of the provision of refuse, toilets and potable water. The frequency of these visits is outlined in internal Environmental Health Policy, where the target is set at the number of informal settlements within the city, visited once per week (i.e. number of informal settlements $\times$ 52 weeks).
Average number of library visits per library	City Support Programme Indicator: Utilisation rate is indicative of the supply and demand for community facilities such as libraries. It can be used to inform planning and performance of facilities. The number of visits is a direct measure of utilisation, whether to access books or to use the space for one of its other community functions.
Number of Active Communities Recreation Programmes implemented as per area targets	Target per area, based on the programme. One of the programmes selected from the targeted categories, e.g Youth, Seniors, etc. Interventions related to area programmes to be recorded at area level. Each Area to have a plan and Programme and Events unit to provide a Framework to Areas.  Milestones to be identified in terms of area plans.
Public Open Space Mowing-Season Readiness and Management Plan implemented according to established milestones	This indicator is to measure implementation of special focus initiatives to drive the public open space mowing programme during the grass growing season: August to December. A key measurement is frequency of planned mowing vs actual mowing, but the plan to include additional milestones of tracking performance, communication and media initiatives, reactions and remedial plans for high profile or emergency situations, mitigating reputational and operational risks, etc.
Percentage utilisation rate of available Community Halls	A community hall is defined as a community facility available for use by various stakeholders such as the community, staff and councillors.
Tidiis	Number of hours booked: The total number of hours public community halls are reserved for use is 16 hours from 08:00 until 12:00.
	Note: It is proposed that this data element would be collected from an integrated municipal record system which is SAP Real Estate. The bookings to include all internal and across the department bookings.
	However, it is likely that these vary significantly across the metros. Whatever booking information is available should be included.
	Number of available hours: Sum of the total number of possible booking hours for all community halls/centres that is in good condition and available for use.
	Note: This is a calculated figure based on the hours that each facility is able to be booked. The available hours for all community halls should then be summed.
	Indicator Formula/Calculations: (1) Sum of hours booked across all community halls in the period of assessment/(2) Sum of available hours for all community halls in the period of assessment.
	NB: 2020/21 will have 365 days.

City of Cape Town 2020/21 DIRECTORATE EXECUTIVE SUMMARIES AND SCORECARDS

2020/21 COMMU	NITY SERVICES AND HEALTH DIRECTORATE SCORECARD DEFINITIONS
INDICATOR	INDICATOR DEFINITION/COMMENTS
Number of facility (community centres, halls) audits conducted	Audits to be both general facility audits or audits of specific matters as identified by the Dept Mancom.  Audits to be conducted by Director selected team. This indicator covers the following facilities: Swimming Pools; Beaches - nodal points; Resorts; Indoor Centres - inclusive of indoor sport centres, halls, civic centres, community centres, etc.; Sportsfields; Bath Houses; Crematoria.  Sites to be audited to be randomly selected via an electronic randomisation process.  Audit to review maintenance standards application, management and governance systems and processes in addition to overall look and feel of the facility via visual assessment.  Cummulative - Quarterly reporting - randomised facilities to be audited quarterly to maintenance plans.
Number of open space facilities audits conducted	Audits to be conducted by Director selected team. The indicator covers the following facilities: Community Parks; District Parks; Cemeteries.  Audit review team to be made up of management team members selected line officials - peer and management review.  Audit to review maintenance standards application, management and governance systems and processes, including visual assessment of overall look, feel and condition of the facilities.  Cumulative - Quarterly reporting - randomised facilities to be audited quarterly to maintenance plans.
Number of identified areas where trained EPWP Facility Protection Officers have been deployed	The number of areas is subject to agreement between Law Enforcement and the Recreation and Parks departments.  The deployment of the Facility Protection officers is also subject to Safety and Security making the staff available.
Number of Strengthening Families initiatives implemented	Corporate Scorecard: The Strengthening Families programme (SFP) is a structured, evidence-based life skills programme that improves family relationships and reduces vulnerability to substance abuse. The programme is presented in the form of facilitated sessions with parents, youth and, finally, the family as a unit.
Number of initiatives implemented to effect the AOD Strategy in Support of the National Drug Master plan	The number of Initiatives implemented transversally to effect the AOD Strategy in Support of the National Drug Master Plan.
Number of youth development initiatives implemented	This would include initiatives tailored to address specific needs of youth, but not limited to the following: Work readiness skills development, career expos, positive life choices, etc.
Number of youth participating in youth development interventions	Measures the number of youth participating in youth development interventions implemented by various departments specifically targeting youth.
Number of #YouthStartCT entrepreneurial challenges hosted	It is an annual competition targeting entrepreneurs aged 18-35 that have a business idea or existing start-up business. The business idea or start-up business should currently be creating employment opportunities of youth. Applicants must be from within the Metro.
Number of interventions in ECDs implemented based on assessments conducted in previous year	The aim of the visits to the ECDs is to complete assessment/recommendation forms and refer non-compliant ECDs to the relevant Departments for further engagement.
Number of initiatives implemented in support of the CCT Resilience Strategy	

2020/21 COMMU	NITY SERVICES AND HEALTH DIRECTORATE SCORECARD DEFINITIONS
INDICATOR	INDICATOR DEFINITION/COMMENTS
Number of mural art initiatives implemented	The Initiative aims to establish positive neighbourhood identities, promote a diverse and stimulating cultural environment for residents, visitors and tourists. Through its various forms it can beautify the immediate environment, transform public spaces, raise the quality of public facilities, and increase public awareness and understanding of works of art. The initiatives include the following interventions:  1. Mural intervention consisting of:  a) Four Mural images of varying nature in identified areas (Phase 2), which reflect the specific neighbourhood's identity and stories.  b) Two large-scale mural images created on suitable identified walls/surfaces.
Establish an additional Safe Space	A Safe Space is a transitional measure to assist homeless persons living on the streets of Cape Town with pre-shelter opportunities, coupled with access to a secure space to sleep, access to social and health services and basic services such as ablutions, water and storage lockers. The intention being that instead of sleeping all over the city, allocated spaces are provided for sleeping during the night from 17:00 to 08:00.
Number of transversal informal settlement initiatives	
Number of Community Services Facilities in informal settlements	Corporate Scorecard (Community Services Facilities); Integrated Development Plan Community services facilities include "but are not limited to" sport, recreational, park, library, ECD and clinic facilities. The indicator reports on such facilities, of a permanent or temporary nature, that have been newly developed within informal settlements.
Number of IT initiatives that improve the ease of doing business	Community Services and Health IT Initiative project is a multi-year project in which the Corporate IT department plays a vital role.
Percentage of projects screened in SAP PPPM	Metrics extracted from SAP PPPM from budget submissions. Screening includes: Screening Questionnaire, Implementataion, Complexity Questionnaire, Strategic Themes Questionnaire, GIS Location Mapping.
Percentage of 2020/21 Project Managers comments completed in SAP PPPM	Aggregated quarterly. Quarterly values averaged for the yearly statistic.  Measurement: Metrics extracted from SAP PPPM on a monthly basis.
Number of Community Services facilities developed/upgraded with National Grant funding	Composite: National Treasury
% spend of National Grant funding	Composite of all USDG funded projects: National Treasury: The directorate aims to spend all its funding each year. Projects concluded close to the end of the year often have a retainer amount, and can also have a lag in invoices being GRN'd, hence the target of 90%.
Community Services and Health: Number of Expanded Public Works Programme (EPWP) work opportunities created	Key Operational Indicator: Refers to paid work created for an individual on an EPWP project for any period of time, within the employment conditions of the Code of Good Practice for the Expanded Public Works Programmes. Community Services and Health Directorate shifts the focus from "counting numbers" to rather focussing on creating more meaningful employment, which in many cases includes a skills development component.
Community Services and Health: Number of Full-Time Equivalent (FTE) work opportunities created	Key Operational Indicator: Refers to one person-year of employment. One person year is equivalent to 230 person days of work. The 230 days are effective days of work after subtracting provision for non-productive days in a year (e.g. leave, holidays, etc.).  1 FTE = person days divided by 230.

2020/21 COMMUNITY SERVICES AND HEALTH DIRECTORATE SCORECARD DEFINITIONS				
INDICATOR	INDICATOR DEFINITION/COMMENTS			
Percentage budget spent on implementation of Workplace Skills Plan	Key Operational Indicator: A WSP is a document that outlines the planned education, training and development interventions for the organisation. Its purpose is to formally plan and allocate budget for appropriate training interventions which will address the needs arising out of Local Government's Skills Sector Plan, the City's strategic requirements as contained in the IDP and the individual departmental staffing strategies and individual employees' PDPs. The WSP shall also take into account the Employment Equity Plan, ensuring incorporation of relevant developmental equity interventions into the plan. Formula: Measured against training budget.			
Number of external trainees and bursary opportunities (excluding apprentices)	Key Operational Indicator: This measures the number of learning opportunities created for the unemployed youth as a contribution to the job creation initiative and provision of real world of work exposure to trainees and graduates. This includes, external bursaries awarded, in-service student training opportunities, graduate internships and learnerships. This is an accumulative quarterly measure. The target refers to the fourth quarter final total.			
Number of unemployed apprentices	Key Operational Indicator: This measures the number of learning opportunities created for the unemployed youth as a contribution to the job creation initiative. This indicator is limited to apprenticeships. This is an accumulative quarterly measures. The target refers to the fourth quarter final total.			
Percentage adherence to citywide service requests	Key Operational Indicator: Measure the percentage adherence to Citywide service standards based on all external notifications.			
Percentage adherence to the EE target of overall representation by employees from the designated groups	This indicator measures the overall representation of designated groups across all occupational levels at City, directorate and departmental level as at the end of the preceding month.			
Percentage adherence to equal or more than 2% of complement for persons with disabilities (PWD)	This indicator measures the percentage of people with disabilities employed at the end of the preceding month against the target of 2%.			
Percentage of employees from the EE target (designated) groups employed in the three highest levels of management (NKPI)	The indicator measures the percentage of employees from the designated groups employed in the three highest levels of management, in compliance with the City's approved EE plan.  Management Level 1 - City Manager and Executive directors  Management Level 2 - Portfolio managers and directors  Management Level 3 - Managers			
Percentage of women employed across all occupational levels in line with the annual EE plan targets	This indicator measures the achievement of representation of women in the City of Cape Town across all occupational levels in compliance with the City's approved EE plan for the duration of this plan (2018-2023).  The City is committed to achieve a target of 40,20% for the duration of the plan.			
Percentage of absenteeism	The indicator measures the actual number of days absent due to sick, unpaid/unauthorised leave in the department or directorate expressed as a percentage over the number of working days in relation to the number of staff employed. Sick, unpaid/unauthorised leave will include four categories, namely normal sick leave, unpaid unauthorised leave, leave in lieu of sick leave and unpaid in lieu of sick leave.			
Percentage OHS investigations completed	Key Operational Indicator: Investigations measure the completed number of incidents investigated within a 30-day period, expressed as a percentage. "Completed" will be measured as incident data captured and uploaded on SAP. There will be a one-month lag for both the numerator and denominator for reporting purposes.			

2020/21 COMMUNITY SERVICES AND HEALTH DIRECTORATE SCORECARD DEFINITIONS				
INDICATOR	INDICATOR DEFINITION/COMMENTS			
Percentage vacancy rate	This is measured as a percentage of vacant positions approved for filling against the total approved positions on structure (vacant positions not available for filling are excluded from the total number of positions, e.g. no funding). To provide a realistic and measurable vacancy rate, the percentage turnover within the Department and Directorate needs to be factored in. Vacancy excludes positions where a contract was issued and the appointment accepted.  This indicator will be measured as a target vacancy rate of 7% (or less), plus turnover (Turnover: number of terminations over a rolling 12-month period divided by the average number of staff over the same period).  The indicator will further be measured at a specific point in time.			
Percentage of assets verified	This indicator measures the percentage of assets verified annually for audit assurance. The asset register is an internal data source, being the Quix system, scanning all assets and uploading them against the SAP data files. Data is downloaded at specific times and is the basis for the assessment of progress.  Quarter one - The review of the Asset Policy and Quarter two - The timetable in terms			
	of commencing and finishing times for the process is to be communicated, and will be completed.			
	Both Quarters will only be performed by Corporate Finance.			
Percentage of Declarations of Interest completed	This indicator measures "The total number of completed declarations of interest as a % of the total number of staff. The target is cumulative over the year. Each employee needs to complete the declaration of interest as prescribed by City policies/City Executive decisions/applicable legislation".  * T14 and above - to declare annually and be 100% complete, as well as key business processes/departments regardless of T-level, i.e. Finance directorate, Probity, Human Resources, Planning and Building Development.  * T13 and below - to declare once every three years and when their personal			
	circumstances change (including when new/renewed private work applications are processed. The measuring of the T13 and below will be reported through the EMT process and the City Manager dashboard, and not included in 2019/20, 2020/21 SDBIP reporting.			
Percentage spend of capital budget	Key Operational Indicator: Percentage reflecting year to date spend/Total budget less any contingent liabilities relating to the capital budget. The total budget is the council-approved adjusted budget at the time of the measurement. Contingent liabilities are only identified at the year end.			
Percentage of operating budget spend	Key Operational Indicator: Formula: Total actual to date as a percentage of the total budget, including secondary expenditure. (This includes Repairs and Maintenance).			
Percentage Completion rate of tenders processed as per the demand plan	This indicator measures how many tenders were processed and completed (i.e. the number of tenders completed in the financial cycle) as per the demand plan. The Demand Plan represents the total number of tenders needed for a year. Completion will include all cancelled and successfully awarded bids by the BAC (Bid Adjudication Committee).			
Percentage of external audit actions completed as per audit action plan	This indicator measures how many actions were completed in the financial cycle within the unique deadline set, as per the audit action plan. The Audit Action Plan sets out the total number audit actions required to address the internal control deficiencies as identified by the Auditor-General in their management report.			
	Completed would mean that the actions, as stipulated in the audit action plan, have been executed by the relevant ED and/or Director.			
	Should there be no actions required for an Executive Director and/or Director, the indicator will not be applicable.			

