



PERFOMANCE CONTRACT BETWEEN THE CITY OF HARARE TOWN CLERK AND DIRECTOR OF HEALTH SERVICES 2022



This Performance Contract is entered into between the Town Clerk on behalf of the City of Harare and the Director of Health Services bearing in mind that:

- The Director of Health Services is committed to ensuring that public offices are well
 managed and cost effective in delivering efficient and quality service to the public;
- This Contract represents a basis for continuous improvement as we reinvent Council to meet the needs and expectations of the residents of Harare and all other stakeholders;
- This Contract guides the programmes and management priorities of the Harare Health **Department** for the budget year, 2022

City of Harare, through the Office of the Town Clerk will provide oversight and support to ensure the achievement of the results specified in this contract.

PART I

1. Department/Unit/Section Budget

Approved Budget: ZWL\$ 4 468 802 985.00

- 2. Background Details
- A. CITY VISION: Harare to Achieve a World Class City Status by the Year 2025
- B. CITY MISSION: To Provide First Class Service Delivery and Promote Investment.
- C. DEPARTMENT OVERALL FUNCTIONS:
 - 1. To provide comprehensive and accessible primary health care services to residents and rate-payers at an affordable cost in a responsive, effective and efficient manner.
 - 2. To provide regulatory services for health compliance to business community.
- D. PROGRAMME(S) NAME AND CODE: SOCIAL SERVICES (03) WASH (02)
- E. SUB-PROGRAMME(S) NAME AND CODE (Where applicable):
 - 1) Health Services.

3. LINKAGES

i) COUNCIL KEY RESULT AREAS

С	Key Result Area	Weightag e (%)	Responsible Departments	Sector KRA Reference	SDG Reference	Ministry Reference
1.	Provision of Sound Local Governance and Administration and environmental management	20	TC (CS, HCD, DHCS, DOW, FD, CH, HW)	3	5, 8, 10, 12, 13,15, 16, 17	1
2.	Public Health Services delivery	15	TC, CH, FD, HW, CS	5	2, 3	2
3.	Provision of affordable and quality Education, settlements, social services and amenities	30	TC, DHCS, FD,DOW, HW	6	1, 2, 4, 6,	2
4.	Infrastructure Development, Maintenance and Utilities	20	TC (CS, HCD, DHCS, DOW, FD, CH, HW)	7	4, 6, 7, 9,	3
5.	City enforcement, public safety, Security Services and emergency services provision	15	CS, DOW, TC	3	5, 8, 10, 12, 13,15, 16, 17	1

ii) COUNCIL OUTCOMES

No	OUTCOME	Weightag e	Responsible Departments	Council KRA REF	Sector Outcome Ref	National Reference
1.	Improved Governance	10	TC, CS, HCD, DHCS, DOW, FD, CH, HW	01	3,4,5,24	3,4,10
2.	Improved Organisational Capacity	8	TC, CS, HCD, DHCS, DOW, FD, CH, HW	01	3,4,5,,24	3,4,10
3	Improved sanitation and Hygiene	12	HW, DOW, CH, HCS,FD	03	3,7,16,17,	1,3,5
4	Improved access to potable water	15	HW, DOW, CH, HCS, FD	03	3,7,16,17,	1,3,5
5	Well Planned City	7	DOW, HW, FD,HCS,	03	3,5,13,15	1, 3, 6, 7
6	Improved Access to social services and Social Amenities	8	DHCS, CH, DOW HW,	03	3,5,9,10,11,12, 13,8,14,15,19,	3,5,6,7,8,
7	Improved Access to Health Service	10	TC, CH, FD, HW, CS, DOW,HCD	02	3,5	2, 3
8	Improved Road and Road Infrastructure	15	DOW, FD, HW, CS	04	3,16,17,18,19,	3,7
9	Improved Citizen Safety	10	CS, DOW,HCD	05	3,5	3,5
10	Sustainable use of Natural Resources	5	TC, CS, DOW, DHCS, CH, HW,HCD	01	3,5,9,10,11,12, 13,8,14,15,20,	3,5,6,7,8,

iii) DEPARTMENT KEY RESULT AREAS

KRA NO	Council KRA Ref	KRA Weightage	Department KRA Description
1	4	70	Health Service Delivery.
3	1	30	Health Laws and Regulations.

iv) DEPARTMENT OUTCOMES

No	Council Outcome Ref	Weightage	OUTCOME	Sector Ref	National Ref
1	7	70	Improved Primary Health Care provision.		
2	1	30	Compliance to Health regulations.		

v) OUTPUT TO BE ACHIEVED

Early case detection of malnutrition
37 1 0 11 1 1 1 1 A DET
Number of clients initiated on ART
TB cases Notified
Number of NCDs detected (Hypertension)
Covid-19 vaccination coverage
Institutional deliveries conducted
Weekly disease surveillance reports produced
Research papers presented
Health services fund established (HSF).
Results based financing system rolled out.
New Clinic commissioned.
business License issued
Water samples analysed
Food samples analysed
Number of children vaccinated (Penta 3)
Essential medicines procured

PART II

OBLIGATIONS AND COMMITMENTS OF THE DIRECTOR

I undertake to do the following:

- 1. Ensure the Department Strategic Plan is linked to Corporate Plan,
- 2. Develop comprehensive performance targets,
- 3. Assign weights to performance indicators,
- 4. Ensure appropriate work plans and M&E plans for the Department/Unit/Section are developed and implemented on the basis of the approved IRBM compliant Strategic Plan and Appropriated Programme Based Budget,
- 5. Wholly implement the mandated Programme/Sub-programme Strategic Performance Plan: and
- 6. Ensure achievement of the agreed performance targets.

I commit to the achievement of **outputs** and **outcomes** contained in the **Performance Matrix** below. I also commit to Service Delivery Standards, Management of Resources and Organizational Development and dealing with cross-cutting Council Priorities also contained in the Performance Matrix and explained in detail in the addendum attached.

I shall submit quarterly and annual performance reports as well as demand reports to the Town Clerk in the prescribed format as per the provisions of this Performance Matrix.

This Performance Contract will run from 1st January 2022 to 31st December 2022

	PERFORMANCE AREA/CATEGORY	Measurement Unit	Weightage	Performance Previous Year	Performance Target For Budget Year	Allowable	Actual Performance	Raw	Weighted score
A	DELIVERY OF MANDATES/OPERATIONS CONTAINED IN THE PROGRAMME/SUB-PROGRAMME STRATEGIC	TES/OPERAT B-PROGRAMI	IONS CONT	AINED IN GIC					
	PERFORMANCE PLAN (PSPP/SPSPP)	(PSPP/SPSPP)							
	OUTCOMES –All outcomes and	nes and							
	outcome indicators contained in the PSPP/SPSPP	led in the							
	Outcome 1: Improved								
	Primary Health Care								
	Outcome Indicator:	Number	3	382 242	390 000	+/-39 000			
	Clinic attendances								
	Outcome Indicator:	%	3	92	77	1-/+			
	Availability of essential								
	medicines increased.								
	Outcome Indicator:	hours	4	24	48	0			
	Response to								
	communicable								
	Disease outbreaks								
	(within 48 hours).								
	Outcome Indicator:	Number	3	101 000	117 100	+/-11710			
	Anti-Retro Viral Therapy								
	Outcome Indicator:	Number	2	0	1	0			
	Number of new clinics.								
	Outcome Indicator:	%	1	82%	%06				
	Pentavalent 3					%6-/+			
	vaccination coverage								

Version:01-2022

Compliance to Health regulations. Compliance to Health regulations. 66% Coverage coverage coverage coverage and interactor: % 2 66% Outcome Indicator: Number 1 530 Water quality monitoring Water quality monitoring Weight Sub Total Number 1 16298 No Evol quality monitoring Weight Sub Total Number 20 4 1 New Dental section fully PROGRAMME Number 2 4 1 New Dental section fully Reaved of Clients Number 2 4 1 New Dental section fully Reaved of Clients Number 2 4 1 Number of Clients Number 2 4 1 TB cases Notified Number 2 1639 2 Number of NCDs Number 2 804 1 Covid-19 vaccination % 2 35.2% 6 Coverage Institutional deliveries Number 2 16.298 1 Number of clients Number 2 35.2%		PERFORMANCE AREA/CATEGORY	Measurement Unit	Weightage	Performance Previous Year	Performance Target For Budget Year	Allowable	Actual Performance	Raw	Weighted score
Outcome Indicator: % 2 66% 75% business licensing coverage coverage 1 530 1924 Outcome Indicator: Number 1 16298 16500 Weight Sub Total Number 2 4 1 No Dutrome Indicator: Number 2 4 1 No Equipped OutPUTS Number 2 4 1 No Weight Sub Total Number 2 4 1 No PROGRAMME Number 2 1552 1700 Requipped. Number of clients Number 2 101 000 117 100 Institutional deliveries Number 2 35.2% 60% 60% Covid-19 vaccination Weekly disease Number 2 16 298 16 500		Outcome 2: Compliance to Health regulations.								
Outcome Indicator: Number 1 530 1924 Water quality monitoring Number 1 16298 16500 Neight Sub Total 20 20 16500 No PROGRAMME 20 4 1 New Dental section fully Number 2 4 1 Rady case detection of equipped. Number 2 1552 1700 Number of clients Number 2 1639 2000 Number of clients Number 2 1639 2000 Number of NCDs Number 2 35.2% 60% Covid-19 vaccination % 2 35.2% 60% Covid-19 vaccination % 2 35.2% 60% Institutional deliveries Number 2 35.2% 60% Nweekly disease Number 2 52 52 Number 4 52 52 6		Outcome Indicator: business licensing coverage	%	2	%99	75%	+/-3%			
Number of Early case detection of initiated on ART Number of Covid-19 vaccination Number of Covid-ced 16298 16500 Number of Conducted 1 16298 16500 Number of Clients 2 4 1 Number of Clients Number 2 1700 Number of Numb		Outcome Indicator: Water quality monitoring	Number	1	530	1924	+/-190			
No PROGRAMME 20 A OUTPUTS 2 4 1 Requipped. 2 4 1 Early case detection of malnutrition Number 2 1552 1700 Number of clients Number 2 101 000 117 100 Initiated on ART Number 2 1639 2000 Number of NCDs Number 2 804 1000 Covid-19 vaccination % 2 35.2% 60% Coverage Institutional deliveries Number 2 16 298 16 500 Weekly disease Number 4 52 52 6 produced Produced 4 52 52 6		Outcome Indicator: Food quality monitoring	Number	1	16298	16500	+/-1650			
Now Dental section fully equipped. Number 2 4 1 Early case detection of malnutrition Number 2 1552 1700 Mumber of clients initiated on ART Number 2 101 000 117 100 Mumber of NCDs initiated on ART Number 2 1639 2000 Number of NCDs detected (Hypertension) Number 2 35.2% 60% Covid-19 vaccination % 2 35.2% 60% Institutional deliveries conducted Number 2 16 298 16 500 Weekly disease Weekly disease Number 4 52 52 produced produced 4 52 52 6		Weight Sub Total		20						
How Dental section fully Number 2 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No									
Early case detection of malnutritionNumber215521700Number of clients initiated on ARTNumber2101 000117 100TB cases Notified Number of NCDsNumber216392000Number of NCDs detected (Hypertension)Number28041000Covid-19 vaccination coverage%235.2%60%Institutional deliveries conductedNumber216 500Weekly disease producedNumber45252	_	New Dental section fully equipped.		2	4	1	0			
Number of clients Number of clients Number 2 101 000 117 100 TB cases Notified Number 2 1639 2000 Number of NCDs Number 2 804 1000 Covid-19 vaccination % 2 35.2% 60% Coverage Institutional deliveries Number 2 16 500 Weekly disease Weekly disease Number 4 52 52 produced produced produced 4 52 6	7	Early case detection of malnutrition			1552		+/-170			
TB cases Notified Number of NCDs Acted (Hypertension) Covid-19 vaccination Institutional deliveries Surveillance reportsNumber Number2 2 35.2%1639 35.2%2000 60%Number conducted Weekly disease surveillance reportsNumber216 29816 500	3	Number of clients initiated on ART	Number	2			+/-11 000	-		
Number of NCDs detected (Hypertension) Covid-19 vaccination Coverage Institutional deliveries Conducted Weekly disease Surveillance reports Produced Number 2 35.2% 60% Number 2 16.298 16.500 Surveillance reports Produced	4	TB cases Notified	Number	2			000-/+			
Covid-19 vaccination%235.2%60%coverageInstitutional deliveriesNumber216.29816.500conductedWeekly diseaseNumber45252surveillance reportsproduced5252	S.	Number of NCDs detected (Hypertension)					+/-100			
Institutional deliveries Number 2 16 298 16 500 conducted Weekly disease Number 4 52 52 produced produced	9						%5			
Weekly disease Number 4 52 52 surveillance reports produced	7						+/-1 600			
	∞									

		1		n C	Doufoumonoo	Allowahla	Actual	Raw	Weighted
	PERFORMANCE	Measurement	weigntage	rerior mance	T CHOLINAMON	Tomor Manage	Dorformance	crore	score
	AREA/CATEGORY	Unit		Previous Year	Target For Budget Year	variance	Гегіогшансе	score	acore
6	Research papers	Number	2	1	2	1			
10	Health services fund	Number	2	0	1	0			
=	Results based financing	Number of clinics	4	13	21	0			
12	New Clinic	Number of	2	0	-	0			
	commissioned.	new clinics		11 667	17377	+/-1200			
13	business License issued	Number	2	530	1 920	+/- 190			
1 4	Food samples analysed	Number	2	160	700	0/-/+			
16	Number of children	Number	2	33 058	35 000	+/-3 500			
	vaccinated (Penta 3)								
17	Essential medicines	%	4	76	77	/-/+			
	procured								
	Weight Sub Total		40						
B	SERVICE DELIVERY STANDARDS	STANDARDS			1				
	i) Compliance to	%	2	37	20	I-/+			
	Fatients charter	Manhon	•	2	-	0			
2507-	u) Ease of doing business reforms	INCHINGE	4	1	•				
	Customer satisfaction Index: Fulfilling Service	dex: Fulfilling S	ervice						
	Delivery Standards as per Service Charter and	Service Charter	and						
	measured through Customer Satisfaction Surveys	ner Satisfaction S	urveys						
	Sneed of service	Hours	2	2	1:30	+/-9 min			
	Ouality of service	%	2	09	70	1/-7			
	Accessibility	KM	1	10	7	+/-1			
	Courtesv	%	7	-	50	+/-5			
	Common								

E Measurement Weightage Performance Performance Allowable Actual Raw Weighted ORY Unit For Budget For Budget Year Year	% 1 75 70 +/-3	% +/-8 80 +/-8	ary % 1 10 30 +/-3	ublic % 1 35 45 +/-1	112	T OF RESOURCES	ATIONAL	10	10n of % 2 67 75 +/-5 vrity	y Compl 2 - 100 0	treams Number 2 0 2 1	ealth Number 2 1 1 0	a the % 2 100 100 0	10	ent Number of 6 - 7 +/1
PERFORMANCE M AREA/CATEGORY U	• Information on services	iii) Signage %	Delivery	olic	Weights Sub total	MANAGEMENT OF RESOURCES	AND ORGANIZATIONAL DEVELOPMENT	i) Financial Management	Strategic allocation of	Value for money Procurement Plan	• New Revenue Streams Nuestablished	Ring Fencing Health Nu- Account	Managing within the budget	ii) Organizational Capacity	Skills development Nu

	PERFORMANCE	Measurement	Weightage	Performance	Performance	Allowable	Actual	Raw	Weighted
	AREA/CATEGORY	Unit		Previous Year	Target For Budget Year	variance	Performance	score	score
	• Internal Process Efficiency Measures e.g. ISO Certification of Lab	ISO rating	9	1	2	0			
	• Staffing Levels (vacant ratio)	%	3	69	75	+/-3			
	Risk Register implemented	number	5	0	-	0			
	Weights Sub total		20						
Q	CROSS -CUTTING GOVERNMENT PRIORITIES								
	i) Promoting Integrity/Corruption Eradication	Number of Policy	1	0	1	0			
	ii) Climate Change adaption measures implemented	Number	1	-	1	0			
	ii) Prevention of HIV and Aids	Number of strategies	4	1	2	+/-1			
	iii)Gender mainstreaming (implementing policy)	%	1	0	1	0			
	iv) Promotion of a clean environment	number	1	12	12	0			
	Weights Sub total		8						

PART III

Approval of the Contract

I hereby undertake to achieve the results specified in this contract

E	En / Z		24/03/2022
DR. P. CHONZI DIRECTOR HEALTH SER	VICES		Date
The Finance Director commits achievement of the results spe	to provide critical cified in this contra	financial and material ract	resources to support the
85			24/03/20m.
G KUSANGAYA FINANCE DIRECTOR			Date
The Human Capital Director achievement of the results spec	commits to provi	de the critical Human	Capital to support the
			24/03/22
B. MATENGARÚFU HUMAN CAPITAL DIREC	TOR		Date
For and on behalf of City of H	arare		
ENG. P. M. MOYO TOWN CLERK	70		24/03/2022 Date

PART 1V

APPRAISAL (End of the year)

AGREED RATINGS (Please use the Rating scale for guidance in allocating raw scores)

SECTION	HEADING	RATING
A – 1	Outcomes	
A – 2	Outputs	
В	Service Delivery Standards	
C	Management of Resources and Organizational Development	
D	Cross-cutting Government Priorities	
TOTAL		

TOTAL	
Final Score	
Appraisal Certification	
DR. P. CHONZI DIRECTOR OF CITY HEALTH For and on behalf of City of Harare	Date
ENG P. M. MOYO TOWN CLERK	Date

Part IV

ADDENDUM TO PARTS B, C, D AND E OF THE RESULTS MATRIX

The following are the specific explanations for each target:

PART B SERVICE DELIVERY STANDARDS

The Department of Health Services will develop and implement a client service charter to run concurrently with Department Strategic Plan. The Charter will be displayed in Council Departments and City Website. On easy of doing business reforms, the Department will reduce turn around times in the following services: License application approval from one months to 3 days while renewal approval will be within 24hrs and patient waiting time from 2hrs to 1:30 hrs.

1. CUSTOMER SATISFACTION INDEX

i. Speed of Service:

This is the time taken to respond to our clients' needs, queries and personal attendances. The time lines are as spelt out in the Client's Service Charter. Some examples of the time lines are as follows:

- Patient throughput time at clinics and hospitals will be 1:30 hrs
- Business license approval within 24hrs
- Client/patient queries to be respented to within 10 minutes and Telephone calls answered within 3 rings

ii. Quality of Service:

This refers to the degree to which the services we offer meet/comply with the minimum set standards as outlined in the Client Service Charter and our standard operating procedures.

iii. Accessibility:

This refers to the ease with which our clients can approach, reach, enter, communicate with us or use our services. Open door policy for access to all offices and officials exists. Website and Facebook all for interactive communication with the City residents on matters of health services.

iv. Courtesy:

In terms of Council Service Charter all members of Staff are obliged to extend first greetings to our clients. Training for all frontline and staff that come into contact with clients includes subjects related to handling of clients on first contact. At least 75% of our clients should be satisfied with the service offered by our employees.

v. Information on Services:

Council publishes a News Letter "Sunshine News" on the basis that it distributes information to all residents. To establish centralised "Call Centre" to ensure total access by clients for reporting and resolutions of their problems and needs. At least 75% of our clients should be satisfied with the degree of information offered on Council Services.

2 SIGNAGE:

At least 75% of our Services areas should have proper signage (that is offices, direction arrows for places)

2 SERVICE DELIVERY INNOVATIONS:

a) At least 1 (EHR)innovation on health service delivery will be implemented in 2022 as a broad strategy to improve service delivery.

3 RESOLUTION OF PUBLIC COMPLAINTS:

All complaints to be resolved with a very reasonable period of time depending on the type of services and the Director remains accessible to address public complaints.

PART C: MANAGEMENT OF RESOURCES AND ORGANIZATIONAL DEVELOPMENT

i) FINANCIAL MANAGEMENT

i. Strategic Allocation of Resources in Line with Policy Priorities.

The Director will be measured by the degree to which allocation of resources will be in line with the Strategic Priorities of Council as per Department Strategic Plan.

ii.Value for Money (Effectiveness, Efficiency and Economy):

Department has endeavoured to efficiencies and economies of scale in its operations. The Director will be measured by implementing the following value for money strategies:

- > Production and implementation of Procurment Plan
- > Enforcement of costs cutting measures.

iii. Managing within the Budget and Budget Utilisation

The Director commits to manage finances with the budget. The Director will be measured by the level of adherence to the budget utilisation as per budget plan and city strategic plan.

iv. Mobilization of Alternative Resources (outside Council, e.g. PPPs):

The Director is committed to ensure sustained deliverance of quality service by seeking alternative resources of funding and funding from a number of financial institutions and development partners. The Director is committed to raise at least an equivalent of 0.05% of SOCIAL SERVICES funding beyond the Budget through various initiative.

ii) ORGANIZATIONAL CAPACITY

i. Skills Development (Training and Capacity Building):

At least 10% of employees in the supervisory levels will be capacitated in various skills to increase their competences. The target area is on culture change, frontline staff, management development.

ii. Internal Process Efficiency Measures

At least 70% of the SOPs and internal control systems will be put in place in all operating areas of Department of Health Services.

EMPLOYEE SATISFACTION INDEX

The Director Health Services endeveours to increase employee satisfaction and engagement from the current 32% to at least 50%. The following strategies amongst many others will be pursued:

i) Work Environment:

The Organisation seeks to initiate an Office and Work environment ergonomics study. Council also endeavours to create a conducive work environment by adhering to its values of Commitment, Integrity and Transparency.

ii) Safety Measures:

The full implementation of Health and Safety and Wellness Policy which is enforced at all Council workstations.

iii) Research and Development:

Researches on new diseases patterns and communicable diseases modelling. The Director will be measured against implementation of the research and development recommendations.

iv) Maintenance of Buildings:

Director will be measured by level of maintance of Health Services Buildings and Infrastructure

PART D: CROSS-CUTTING ISSUES

PROMOTION OF INTEGRITY/ CORRUPTION ERADICATION:

This refers to systems and processes aimed at curbing corruption and enhancing the integrity among Council staff.

1. Gender Mainstreaming:

Refers to a strategy by the department of health services to promote, facilitate and support the implementation of gender equality at the workplace and all other areas of operations. This includes gender-based budgeting and offering equal employment opportunities and promotion.

- a) A Gender desk for Health Services will be established.
- b) Gender Responsive Service delivery will be implemented.