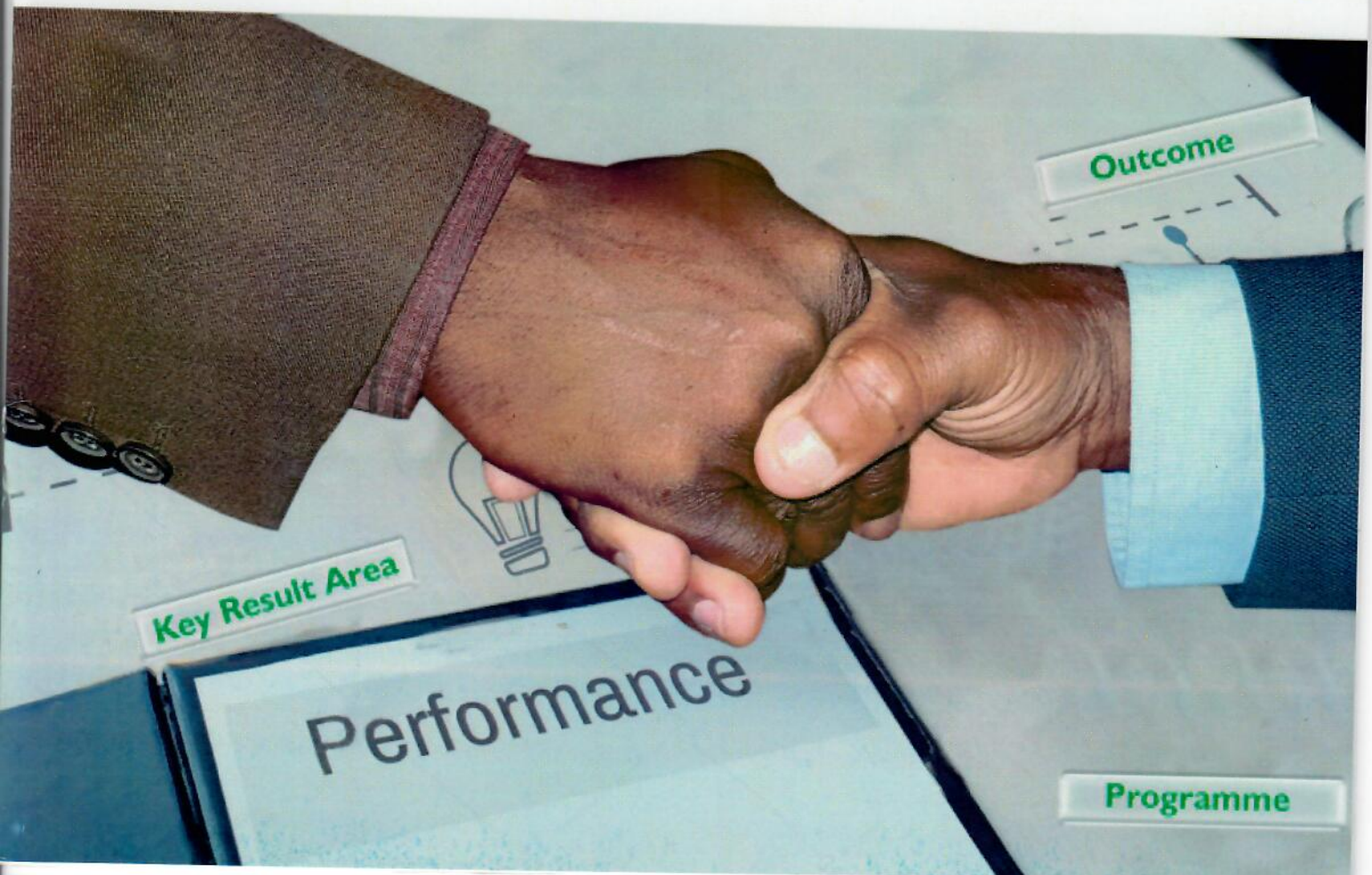




ZIMBABWE



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





### 3. LINKAGES

#### i) COUNCIL KEY RESULT AREAS

c	Key Result Area	Weightage (%)	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, 11	2
4.	Infrastructure Development, Maintenance and Utilities	20	TC (CS, HCD, DHCS, DOW, FD, CH, HW)	7	4, 6, 7, 9, 11	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	Weightage	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, CS	03	3,5,13,15	1, 3, 6, 7
6	Improved Access to social services and Social Amenities	8	DHCS, CH, DOW HW, FD	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**

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

**iv) DEPARTMENT OUTCOMES**

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

**v) OUTPUT TO BE ACHIEVED**

New Dental section fully equipped.
Early case detection of malnutrition
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 MATRIX**

PERFORMANCE AREA/CATEGORY	Measurement Unit	Weightage	Performance Previous Year	Performance Target For Budget Year	Allowable variance	Actual Performance	Raw score	Weighted score
<b>A</b>	<b>DELIVERY OF MANDATES/OPERATIONS CONTAINED IN THE PROGRAMME/SUB-PROGRAMME STRATEGIC PERFORMANCE PLAN (PSPP/SPSPP)</b>							
<b>1</b>	<b>OUTCOMES –All outcomes and outcome indicators contained in the PSPP/SPSPP</b>							
<b>Outcome 1: Improved Primary Health Care provision.</b>								
<b>Outcome Indicator:</b> Clinic attendances	Number	3	382 242	390 000	+/-39 000			
<b>Outcome Indicator:</b> Availability of essential medicines increased.	%	3	76	77	+/-7			
<b>Outcome Indicator:</b> Response to communicable Disease outbreaks (within 48 hours).	hours	4	24	48	0			
<b>Outcome Indicator:</b> Anti-Retro Viral Therapy	Number	3	101 000	117 100	+/-11710			
<b>Outcome Indicator:</b> Number of new clinics.	Number	2	0	1	0			
<b>Outcome Indicator:</b> Pentavalent 3 vaccination coverage	%	1	82%	90%	+/-9%			

PERFORMANCE AREA/CATEGORY	Measurement Unit	Weightage	Performance Previous Year	Performance Target For Budget Year	Allowable variance	Actual Performance	Raw score	Weighted score
<b>Outcome 2: Compliance to Health regulations.</b>								
<b>Outcome Indicator: business licensing coverage</b>	%	2	66%	75%	+/-3%			
<b>Outcome Indicator: Water quality monitoring</b>	Number	1	530	1924	+/-190			
<b>Outcome Indicator: Food quality monitoring</b>	Number	1	16298	16500	+/-1650			
<b>Weight Sub Total</b>		<b>20</b>						
<b>PROGRAMME OUTPUTS</b>								
<b>1</b> New Dental section fully equipped.	Number	2	4	1	0			
<b>2</b> Early case detection of malnutrition	Number	2	1552	1700	+/-170			
<b>3</b> Number of clients initiated on ART	Number	2	101 000	117 100	+/-11 000			
<b>4</b> TB cases Notified	Number	2	1639	2000	+/-200			
<b>5</b> Number of NCDs detected (Hypertension)	Number	2	804	1000	+/-100			
<b>6</b> Covid-19 vaccination coverage	%	2	35.2%	60%	6%			
<b>7</b> Institutional deliveries conducted	Number	2	16 298	16 500	+/-1 600			
<b>8</b> Weekly disease surveillance reports produced	Number	4	52	52	0			

PERFORMANCE AREA/CATEGORY	Measurement Unit	Weightage	Performance Previous Year	Performance Target For Budget Year	Allowable variance	Actual Performance	Raw score	Weighted score
9	Research papers presented	2	1	2	1			
10	Health services fund established (HSF).	2	0	1	0			
11	Results based financing system rolled out.	4	13	21	0			
12	New Clinic commissioned.	2	0	1	0			
13	business License issued	2	11 662	12 377	+/-1200			
14	Water samples analysed	2	530	1 920	+/- 190			
15	Food samples analysed	2	160	700	+/-70			
16	Number of children vaccinated (Penta 3)	2	33 058	35 000	+/-3 500			
17	Essential medicines procured	4	76	77	+/-7			
	<b>Weight Sub Total</b>	<b>40</b>						
<b>B</b>	<b>SERVICE DELIVERY STANDARDS</b>							
	i) Compliance to Patients charter	2	37	50	+/-1			
	ii) Ease of doing business reforms	2	2	1	0			
	<b>Customer satisfaction Index: Fulfilling Service Delivery Standards as per Service Charter and measured through Customer Satisfaction Surveys</b>							
	• Speed of service	2	2	1:30	+/-9 min			
	• Quality of service	2	60	70	+/- 7			
	• Accessibility	1	10	7	+/-1			
	• Courtesy	2	-	50	+/-5			



PERFORMANCE AREA/CATEGORY	Measurement Unit	Weightage	Performance Previous Year	Performance Target For Budget Year	Allowable variance	Actual Performance	Raw score	Weighted score
• Information on services	%	1	75	70	+/-3			
iii) Signage	%	2	60	80	+/-8			
iv) Service Delivery Innovations	%	1	10	30	+/-3			
v) Resolution of Public Complaints	%	1	35	45	+/-1			
<b>Weights Sub total</b>		<b>12</b>						
<b>C</b>								
<b>MANAGEMENT OF RESOURCES AND ORGANIZATIONAL DEVELOPMENT</b>								
<b>i) Financial Management</b>		<b>10</b>						
• Strategic allocation of resources to priority issues	%	2	67	75	+/-5			
• Value for money Procurement Plan	Compl	2	-	100	0			
• New Revenue Streams established	Number	2	0	2	1			
• Ring Fencing Health Account	Number	2	1	1	0			
• Managing within the budget	%	2	100	100	0			
<b>ii) Organizational Capacity</b>		<b>10</b>						
• Skills development (Training and Capacity Building)	Number of trainings	6	-	7	+/-1			

PERFORMANCE AREA/CATEGORY	Measurement Unit	Weightage	Performance Previous Year	Performance Target For Budget Year	Allowable variance	Actual Performance	Raw score	Weighted score
• Internal Process Efficiency Measures e.g. ISO Certification of Lab	ISO rating	6	1	2	0			
• Staffing Levels (vacant ratio)	%	3	69	75	+/- 3			
• Risk Register implemented	number	5	0	1	0			
<b>Weights Sub total</b>		<b>20</b>						
<b>D CROSS -CUTTING GOVERNMENT PRIORITIES</b>								
i) Promoting Integrity/Corruption Eradication	Number of Policy	1	0	1	0			
ii) Climate Change adaptation measures implemented	Number	1	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			
<b>Weights Sub total</b>		<b>8</b>						

**PART III**

**Approval of the Contract**

I hereby undertake to achieve the results specified in this contract



.....  
**DR. P. CHONZI**  
**DIRECTOR HEALTH SERVICES**

24/03/2022  
.....  
Date

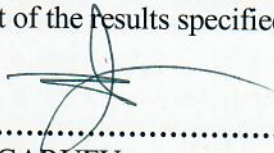
The Finance Director commits to provide critical financial and material resources to support the achievement of the results specified in this contract



.....  
**G KUSANGAYA**  
**FINANCE DIRECTOR**

24/03/2022  
.....  
Date

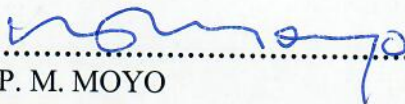
The Human Capital Director commits to provide the critical Human Capital to support the achievement of the results specified in this contract.



.....  
**B. MATENGARUFU**  
**HUMAN CAPITAL DIRECTOR**

24/03/22  
.....  
Date

For and on behalf of City of Harare



.....  
**ENG. P. M. MOYO**  
**TOWN CLERK**

24/03/2022  
.....  
Date

## PART IV

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	
B	Service Delivery Standards	
C	Management of Resources and Organizational Development	
D	Cross-cutting Government Priorities	
TOTAL		

Final Score

### Appraisal Certification

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DR. P. CHONZI  
**DIRECTOR OF CITY HEALTH**

Date

For and on behalf of City of Harare

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ENG P. M. MOYO  
**TOWN CLERK**

Date

## Part IV

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

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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 Procurement 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 endeavours 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 maintenance 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.