ERWAT: Fourth Quarter Departmental Performance Reporting Template

2023/24 QUARTERLY REPORTING TEMPLATE AGAINST THE APPROVED BUSINESS PLANS

1. Executive Summary by the Department

ERWAT's key performance areas are aimed at ensuring sustainable delivery of sanitation services with current resources and seeking to address backlogs in the provision of sanitation to the wider City of Ekurhuleni (CoE) area. Aligned to the priorities of CoE, ERWAT must ensure that it has sufficient wastewater treatment capacity to meet current and future demands. The entity has dedicated its Capex programme for this year, to renew/replace infrastructure and ensuring continuity in wastewater treatment during loadshedding events, through the installation of generators where necessary. The departmental performance areas of ERWAT are focused on investment into the entity's infrastructure, which is central to CoEs and the country's development goals. The performance areas further focus on the protection of the environment through improved quality of effluent discharges and adherence to Green Drop requirements, clean public administration, sustainable financial management and improving external revenue streams towards becoming self-sustainable.

ERWATs performance in Quarter 4 of 2023/2024 was excellent and improved considerably compared to Quarter 2 and Quarter 3. The entity achieved nine (9) out of the ten (10) reportable indicators in the final quarter of the financial year, as shown in Table A, below. There is in total fourteen (14) performance indicators following the mid-year adjustment process, comprising of one (1) city wide indicator and thirteen (13) departmental indicators. Of the fourteen (14) performance indicators, the one (1) city-wide indicator and nine (9) departmental indicators are reportable in Quarter 4. ERWAT achieved the targets for the one city wide indicator and eight (8) of the nine (9) departmental indicators, which are reportable in Quarter 4.

Table A: Summary of Service Delivery Performance

Service Delivery Monitoring					
	Total number of targets	**Total number of targets set for the quarter**	**Achieved**	**Not achieved**	**Variance**
City Wide SDBIP	1	1	1	0	0
Department SDBIP	13	9	8	1	1

ERWAT has demonstrated its commitment to the strategic direction of CoE through the achievement of the city-wide target indicator for wastewater treatment capacity unused. The entity has ensured that it is fully aligned with the Circular 88 requirements for this indicator in terms of the period of review for the determination of performance. The entity has continued to ensure that through its operation the environment is not polluted, and public health is not affected, as per the entity's key mandate. Furthermore, ERWAT has ensured that there is an improvement in the procurement of goods and services, focusing on prioritising the SMMEs allocations and procurement in the municipal area. This was further reinforced by good margins for external revenue generation. The entity made considerable strides in closing the audit findings of the previous year, with only one finding remaining, which is deemed a manageable issue.

However, the variance in the performance is due to ERWAT not achieving one (1) of the ten (10) reportable indicators in Quarter 4. It entailed the departmental target for total operating expenditure as a percentage of the budget. ERWAT have made significant progress towards closing the gaps through the accelerating the recruitment of staff and the establishment of a dedicated joint task team to oversee and expedite project timelines and the maintenance of critical infrastructure. There will be continued effort and focus in these areas to achieve the specified target.

ERWAT with the support of City of Ekurhuleni is making good progress towards the feasibility assessment phases of the Mega Catalytic projects, which also forms part of the entity's 50-year master and regionalisation plan to accommodate new developments within the City of Ekurhuleni. Dependent on obtaining the necessary funding, the implementation phases are next to commence. The planned capacity upgrade needs of the Water Care Works are critical for the current backlog in capacity and to make provision for future housing and industrial developments. ERWAT worked hard to close some of the short-term gaps by ensuring the

capex budget was fully utilised by the end of the financial year. However, there remains a significant shortfall in the in the Capex funding requirements for ERWAT to implement the 5-year capex programme, to upgrade of the Water Care Works.

2. Service Delivery Monitoring

2.2 CITY-WIDE SDBIP

KPI 1 – City-Wide
Percentage of wastewater treatment capacity unused

Method of Measure
The percentage of wastewater treatment capacity unused. Sewer treatment capacity refers to the maximum amount of sewage that a facility is allowed to treat or to direct to a particular reuse or effluent disposal system. This refers to the collective available design capacity of all facilities servicing the municipal area. 'Available design capacity' refers to the overall design capacity that is available on a daily basis. If part of the treatment facility requires refurbishment or is not in operation this should be excluded from 'available design capacity'.

Evidence
Dated and signed report indicating actual flow received and treated per WCW and totalised for ERWAT system (19 WCW) drawn from LIMS (Laboratory Information Management System), in conjunction with the original or re-graded design hydraulic capacity (available capacity) per WCW for the ERWAT system (total of 19 WCW).

Q4 Target
-50%

Q4 Actual
-40%

Comment
Annual target achieved due to the realistic target that was set, given the prevailing challenges.

Reasons for Variance
Water Care Works received lesser amounts of daily inflows. In addition, the period for measurement in Quarter 4 was corrected as communicated with City of Ekurhuleni, to ensure full alignment with the Circular 88 indicator description.

Remedial Actions
Even though the target was achieved, the intention is to eliminate the negative unused capacity and have at least 20% unused capacity. To this end more financial resources are required to eliminate the negative unused capacity and create some spare capacity.

KPI 2 – Departmental SDBIP
Total revenue generated from external business.

Method of Measure
Increased Commercial Business revenue generated from commercial sources (Absolute Rand Value per quarter). The indicator target is measured across the Quarters Revenue generated from: External Income (none NDA).

Evidence
Invoices - (The invoices to be coupled with sales report with a balance that agree to the amount reported for SDBIP purposes)

Q4 Target
R7 700 000

Q4 Actual
R9 608 532.84

Comment:
Quarterly target was achieved with a positive variance of R1 908 532.84

Reason for Variance
Target for Revenue generated was achieved due to:
1) Current projects that were maintained
2) CoE analyses billed for three consecutive months
3) New project with Dipaleseng Municipality

Remedial Action
Maintain current projects.

KPI 3 – Departmental SDBIP
Audit Opinion

Method of Measure
The Audit Opinion is defined by the Auditor General. It is given across a qualitative, ordinal scale including Unqualified with no findings; Unqualified with findings; Qualified with findings; Adverse with findings; and disclaimed with findings. For those who have not completed the process 'Outstanding audits' are recorded.

Evidence
Dated and signed Audit report from Auditor General South Africa (AGSA).

Q4 Target
N/A

Q4 Actual
N/A

Comment
N/A

Reason for Variance
N/A

Remedial Action
N/A

KPI 4 – Departmental SDBIP

Percentage compliance with wastewater treatment works license conditions and/or exemptions standards

Method of Measure

The indicator measures the compliance of wastewater works effluent to the requirements of biological and chemical indicators as per the water use license granted by the Regulator. It is calculated by dividing the number of determinants complying to the Water Use Authorization with the total number of determinants.

Evidence

Water quality analyses of each Wastewater Treatment Works (from the LIMS) is downloaded. Spreadsheet used to calculate average compliance of each of the 3 compliance categories and then the average of the 3 categories gives the overall compliance per WCW and then ERWAT system (19 WCW). Applicable Water use authorization limits of each Wastewater Treatment Works.

Q4 Target

75%

Q4 Actual

88%

Comment

Target achieved

Reason for Variance

The entity achieved the 75% quarterly target by a positive variance of 13%. This was due to the following reasons:

- No loadshedding experienced in Quarter 4.
- Marginal improvement in critical equipment availability.

Remedial Action

It is important to take note that although the target was achieved, serious ongoing challenges remain. These challenges are discussed below as well as under Section 3.3.3.

The following operational challenges are experienced on an ongoing basis at the WCW operated by ERWAT:

1. Industrial pollution

2. Critical equipment failures
3. Power outages
4. Chemical shortages

1. Industrial pollution incidents:

The WCWs (water care works) listed in the Table below received industrial pollution during Quarter 4. The pollution impacts negatively on the biochemical treatment processes, the operation of the Works and subsequently results in the ability of the Works to meet the final effluent compliance levels. The total number of industrial pollution incidents increased in Q4 (dry season) as compared to Q3, as detailed in the Table below.

(Refer Section 3.4 for further details of organic loading per WCW)

Hartebeestfontein, Olifantsfontein, Esther Park, Ancor, Dekema, Jan Smuts and Herbert Bickley WCW were impacted by industrial pollution. Even though ERWAT monitor, sample, analyse and report to CoE the industrial pollution received at the various WCW daily, it is often too late to track the source once the pollution enters the WCW, due to the vast sewer networks. It should also be noted that even though some of the WCW listed in the Table met the final effluent compliance target, they are still negatively impacted by industrial pollution on specific days.

WCW	Number Of Industrial Pollution Incidents during Q4	Number Of Industrial Pollution Incidents during Q3
Olifantsfontein	25	20
Hartebeestfontein	64	37
Benoni	5	2
Rynfield	0	1
Esther Park	19	15
Ancor	21	18
Daveyton	4	3
JP Marais	0	3
Jan Smuts	25	8
Welgedacht	0	0
Heidelberg	14	28
Carl Grundling	0	0
Tsakane	5	4

WCW	Number Of Industrial Pollution Incidents during Q4	Number Of Industrial Pollution Incidents during Q3
Herbert Bickley	27	6
Dekema	10	0
Rondebult	13	12
Vlakplaats	2	2
Total incidents	**234**	**159**

2. Critical equipment failures

The following WCWs experienced critical equipment failures impacting directly on the effluent compliance. The critical equipment failures are expressed as a % of the number of critical equipment failures over the reporting period divided by the total number of duty critical equipment that directly impacts final effluent water quality.

WCW	% of critical equipment not available Q4 2023/2024	% of critical equipment not available Q3 2023/2024
Ancor	14%	6%
Benoni	21%	26%
Carl Grundlingh	12%	12%
Daveyton	0%	7%
Dekema	15%	13%
Esther Park	17%	17%
Hartebeestfontein	18%	27%
Heidelberg	0%	3%
Herbert Bickley	14%	9%
Jan Smuts	0%	11%
JP Marais	0%	0%
Olifantsfontein	3%	1%
Ratanda	13%	11%
Rondebult	10%	7%
Rynfield	32%	46%

WCW	% of critical equipment not available Q4 2023/2024	% of critical equipment not available Q3 2023/2024
Tsakane	17%	18%
Vlakplaats	3%	5%
Waterval	0%	1%
Welgedacht	10%	10%
Average of 19 WCW	**10.47%**	**12.06%**
	6 improvements, 9 deteriorated and 4 remained the same.	

It should be noted that several critical equipment failures were not resolved in previous quarters and the impact on compliance are thereof carried over from quarter to quarter. The progress on restoration of critical equipment is directly proportional to the percentage maintenance expenditure for the quarter, and the progress made on addressing this aspect is fairly represented by the KPI on percentage maintenance expenditure. Although there are nine (9) WCWs with increased number of unavailable critical equipment, there is an overall improvement of 1.59% in critical equipment availability during Q4.

3. Power outages

The WCWs tabulated below experienced frequent power failures during Quarter 4 impacting the compliance of the WCWs directly. It can be noted that in total 580 hours of power failures were experienced on the WCW for Q4, compared to 3178 hours in Q3.

Some of the WCW do not have installed generators at all critical plant processes whilst others are not operational, awaiting repairs.

Plant	Quarter 4 2024					
		Scheduled Loadshedding	Total hours Loadshedding	Number of Power Outages	Total hours Power Outages	Total hours without power
Benoni	DD3	0	0	2	24.00	24.00
Esther Park	DD3	0	0	1	0.50	0.50
Hartebeestfontein	DD3	0	0	1	12.00	12.00
Olifantsfontein	DD3	0	0	0	0.00	0.00
Rynfield	DD3	0	0	1	7.50	7.50
Ancor	DD4	0	0	3	4.00	4.00
Daveyton	DD4	0	0	2	3.00	3.00
Jan Smuts	DD4	0	0	3	7.68	7.68
JP Marais	DD4	0	0	9	23.34	23.34
Welgedacht	DD4	0	0	35	47.00	47.00
Herbert Bickley	DD5	0	0	11	37.25	37.25
Heidelberg	DD5	0	0	7	37.00	37.00
Tsakane	DD5	0	0	4	29.00	29.00
Ratanda	DD5	0	0	9	26.00	26.00
Carl Grundlingh	DD5	0	0	6	123.00	123.00
Dekema	DD6	0	0	4	9.00	9.00
Rondebult	DD6	0	0	9	147.29	147.29
Vlakplaats	DD6	0	0	4	47.00	47.00
Waterval	DD6	0	0	0	0.00	0.00
		0	0	111	584.56	584.56
Total number of hours without electricity on all Water Care Works for Q4						**585**

Critical Chemical shortages

Ferric chloride is used in the treatment process to remove ortho-phosphate from the final effluent as well as improving the settleability of solids in the settling tanks. Due to the general challenges at the manufacturing plants of the sole producer of the product in Africa and with the suitably qualified transportation, shortages of ferric chloride are experienced from time to time despite placing orders with suppliers timely. These shortages impact directly on the

quality of the final effluent at the affected the WCW. The table below shows that in Q4 there were no challenges experienced.

With regards to chlorine gas there were several challenges experienced with the timely delivery of product, which could be mitigated through a back-up system.

WCW	Q4 Ferric chloride shortages due to manufacturer challenges (Number of days)	Q3 Ferric chloride shortages (Number of days)
Ancor	0	26 of 91
Dekema	0	29 of 91
Rondebult	0	7 of 91
Vlakplaats	0	0 of 91
Herbert Bickley	0	0 of 91
Hartebeestfontein	0	38 of 91
Rynfield	0	22 of 91
Jan Smuts	0	9 of 91
Avg. number of days without Ferric chloride	**0**	**21.8**

Action plans:

1. Industrial pollution incidents

ERWAT works closely with the CoE and report all incidents as soon as detected to assist in tracing the source of the pollution. However, the pollution source is not often identified as it is difficult to trace in the vast sewer networks. Illegal tanker discharges were however identified to be one of the primary sources of pollution. Subsequently, some of the authorised open manholes used by tanker services were closed by the COE to tighten supervision, but more interventions are required. Fingerprinting of the pollution by the ERWAT Laboratory is a valuable tool to assist CoE in identifying the industrial pollution sources and to apply the By-Laws. ERWAT has also introduced an organic tariff formula, included in the Service Delivery Agreement whereby the City will be invoiced for increased organic content (strength) beyond the capabilities of the relevant WCW

2. Critical equipment failures

Asset Care plans for critical equipment were developed but only partially implemented. Breakdowns still occur frequently, and the number of outstanding jobs for critical equipment is significant, impacting the final effluent quality directly. OPEX funds are urgently required to

implement the full asset care plans and reduce the failure rate and improve reliability. A joint task team (comprising of Operations, Maintenance, Finance, Strategy, Monitoring & Evaluation, Infrastructure Planning and Projects Departments and Office of the Managing Director) has been established (effective from Q2) to closely monitor progress implementation of outstanding critical maintenance work and improve the internal business processes. There is an overall improvement of 1.59% in critical equipment availability during Q4.

3. Power outages

Short to medium term: Standby diesel generators are available at some of the most critical process units of the various WCW. Twelve (12) additional new generators have been procured to cover all WCW critical process units. Installation was completed in Q4 of 23/24 as per approved Capex plan. Long term: ERWAT has applied for funding to DBSA to install renewable energy at some of the identified WCW. Awaiting outcome of the application in 2024/2025

KPI 5 – Departmental SDBIP

Total capital expenditure as a percentage of total capital budget

Method of Measure:

This indicator measures the extent to which budgeted capital expenditure has been spent during the financial year. Capital expenditure is all costs incurred by the municipality to acquire, upgrade, and renew physical assets such as property, plants, buildings, technology, or equipment.

Formula: 1) Actual Capital Expenditure /(2) Budgeted Capital Expenditure

Evidence

Dated and signed Finance year to date expenditure report

Q4 Target

95%

Q4 Actual

98.10%

Comment

Target achieved

Reasons for Variance

Achieved a positive variance of 3.10% due to the acceleration of project timelines that ensured the work was completed in Quarter 4, as planned.

Remedial Action

Not applicable, target was achieved.

KPI – 6 Department SDBIP
Percentage of procurement spend allocated to SMME's

Method of Measure
The indicator measures the percentage of procurement spend allocated to SMME's through ensuring appropriate application of the preferential procurement practices. This support will be calculated aa a percentage of the total value paid to Small, Medium and Micro Enterprises either directly or via the principal contractor in terms of a Preferential Procurement Regulation 4 or 9 contractual condition.

Indicator Formula: (1) rand value of procurement spend allocated to SMME's / (2) rand value of total procurement spend *100.

Evidence
Award and payment listing (Report) of SMME expenditure amount (including invoices).

Q4 Target
60%

Q4 Actual
95%

Comments
Target achieved.

Reason for Variance
Target exceeded by 35% for Quarter 4 and the variance is due to measures put in place at specification stage to prioritise SMME's.

Remedial Action
Not applicable, target was achieved.

KPI 7 – Departmental SDBIP
Number of Repeat Audit Findings

Method of Measure:
The indicator tracks the number of findings made on the same matter as of the last audit cycle. The “Repeat” findings refer to those findings that have persisted from one year of reporting to the next. These are identified as repeat findings by the Auditor-General on the following administrative areas including but not limited to: i) Annual financial statements and annual report.

The formula for the indicator is the (1) Simple count of the number of "repeat" findings itemized in the Auditor-General's report of each municipality.

Evidence
Dated and signed Audit report from Auditor General South Africa (AGSA).

Q4 Target
N/A

Q4 Actual
N/A

Comment:
N/A

Reason for Variance
N/A

Remedial Action
N/A

KPI 8 – Departmental SDBIP
Number of Green Drop (90%) wastewater treatment works (Bi-quarterly)

Method of Measure:
The indicator measures the number of wastewater treatment works that achieved the Green Drop standard bi quarterly. (90%) Internal assessment is conducted by ERWAT Compliance Office (internal assessment.)

A further determination will be made on the impact or deviation of the treatment capacity caused by loadshedding incidences in the following manner:

Calculate and totalise the energy consumption and impacted treatment capacity for the process units at each of the water care works under ERWAT. The deviation is determined by expressing the impacted treatment capacity as a percentage of the total capacity.

Extrapolate the deviation (i.e. impacted treatment capacity) to the standard Green Drop Score of 90% by multiplying the deviation with the 90% standard score requirement for Green Drop Status

Evidence
The Green Drop scorecard as released by the internal ERWAT Compliance office (in-house. Assessment

6(90%)

Q4 Actual
6(90%)

Comment
Target achieved

Reasons for Variance
Target was met with no variance.

Remedial Actions
Eventhough the targets were achieved, the ongoing focus areas to ensure continuous improvement includes the following:

- Prioritise the CAPEX budget to address the required WCW upgrades, replacement of aged equipment and refurbishments in line with the W_2RAP.

- Review, update and approve all the outdated documents namely, Process Audits for all WCWs and ERWAT W_2RAP.
- Establish a joint Task Team with the Water Services Authorities (CoE and LLM) to address Green Drop requirements.
- Improve participation of Green Drop Champions of user departments within ERWAT

KPI 9 – Departmental SDBIP

Percentage of total municipal operating expenditure spent on contracted services physically residing within the municipal area

Method of Measure:

This indicator measures the value of municipal operating expenditure that has been spent on payments to contracted organisations with a physical address within the municipal area as a percentage of the total operating expenditure on payments to all contracted organisations. Contracted services are inclusive of consultancy services and refer to services rendered by any entity outside of the municipality secured through a public procurement process.

Indicator Formula: (1) R-value of operating expenditure on contracted services within the municipal area / (2) Total municipal operating expenditure on contracted services. The indicator is reported quarterly.

Evidence

Signed Expenditure report on municipal operating expenditure spent on contracted services.

Q4 Target

8%

Q4 Actual

65%

Comment:

Target achieved.

Reason for Variance

Target exceeded by 61% for the 2023/2024 financial period. The variance is as a result of measures put in place at specification stage to prioritise local spending.

Remedial Action

Not applicable, target was achieved.

KPI 10 – Departmental SDBIP

Total Operating Expenditure as a percentage **of Total Operating Expenditure Budget**

Method of Measure:

The indicator measures the extent to which operating expenditure has been spent during the financial year. Operating Expenditure (non-capital spending) is costs which the municipality incurs through its
normal operations. Indicator Formula: (1) Actual Operating Expenditure / (2) Budgeted Operating Expenditure This indicator results will be reported quarterly.

Evidence

Signed Excel spreadsheet as extracted from Budget statements for the period.

Q4 Target

95%

Q4 Actual

82%

Comment

Target not achieved with a negative variance of 13%.

Reasons for Variance

Under expenditure is mainly on employee costs, bulk purchases and general expenditure.

Remedial Actions

Employee costs:

Ensure that all vacancies are filled within the year in which it is budgeted for going forward. In addition, the appointment of the Board of Directors by City of Ekurhuleni should be in line with the budget in future, which is informed by the governance requirements.

Bulk purchases:

Acceleration of the supply chain management processes to put relevant contracts in place for alternative chemicals (e.g. Aluminium Sulphate) to reduce delays in the procurement of essential chemicals.

General expenses:

Acceleration of the supply chain management processes to resolve delays experienced in the procurement process.

KPI 11 – Departmental SDBIP

Irregular, Fruitless and Wasteful, Unauthorised **Expenditure as a percentage of Total Operating Expenditure**

Method of Measure:

The indicator measures the extent to which the municipality has incurred irregular, fruitless and wasteful and unauthorised expenditure. Fruitless and wasteful expenditure is expenditure that was made in vain and would have been avoided had reasonable care been exercised. Irregular expenditure is incurred by the municipality in contravention of a requirement of the law. Unauthorized expenditure includes overspending of the total amount appropriated in the approved budget.

Indicator Formula: ((1) Irregular + (2) Fruitless and Wasteful + (3) Unauthorised Expenditure) / (4) Total Operating Expenditure.

The Audited Annual Financial Statements for the previous financial year are finalised in January of the following financial period for the previous financial period, therefore this indicator will be reported annually in the Q3 of the following financial year for the previous financial year-end.

Evidence

The Audited Annual Financial Statements for the previous financial year as finalised in January of the following financial period for the previous financial period.

Q4 Target

N/A

Q4 Actual

N/A

Comment:

N/A

Reasons for Variance

N/A

Remedial Actions:

N/A

KPI 12 – Departmental SDBIP

Repairs and Maintenance as a percentage of property, plant, equipment and investment property

Method of Measure:

This indicator measures the extent at which the municipality spent on repairs and maintenance of infrastructure assets relative to its asset base. Repairs and maintenance are a group of accounts consisting of labour costs, material costs, secondary costs, etc.

Evidence

The Audited Annual Financial Statements for the previous financial year as finalised in January of the following financial period for the previous financial period

Q4 Target

4%

Q4 Actual

11,88%

Comment

Target achieved.

Reasons for Variance

The positive variance of 7,88% is due to the significant increase in repairs and maintenance costs in line with the approved mid-year adjustment budget.

Remedial Actions

None required.

KPI 13 – Departmental SDBIP
Percentage of tender cancellations

Method of Measure:
This indicator measures the percentage of tender cancellations in relation to the total number of tender business cases that was recorded, advertised and closed.

Indicator Formula: (1) Number of tenders cancelled / (2) Total number of tenders advertised and closed. The indicator is reported quarterly.

Evidence
Signed and dated SCM report containing tender cancellations in relation to the total number of tender business cases that was recorded, advertised and closed.

Q4 Target
10%

Q4 Actual
0%

Comment:
Target achieved.

Reasons for Variance
7 bids were recorded, advertised and closed during Quarter 4. No bids were cancelled during period under review.

Remedial Actions:
None.

KPI 14 – Departmental SDBIP
Net Surplus /Deficit Margin for Wastewater

Method of Measure:
Wastewater is measured separately to track the extent to which the municipality generates surplus or deficit. Total expenditure, in this context, refers to direct costs, overheard costs and capital financing costs incurred in providing wastewater and sanitation services. Direct costs include employee related costs, bulk purchases, repairs and maintenance, contracted services, debt impairment, depreciation and other costs not grouped under the above-mentioned categories. Overheard costs, also referred to as indirect costs, are costs that are not directly attributable to a service but are incurred in running a municipality, for example office space or computer software and all charges or recoveries. Capital financing costs are costs associated with financing infrastructure expansion or rehabilitation of existing assets, for example interest and redemption charges.

The Audited Annual Financial Statements for the previous financial year are finalised in January of the following financial period for the previous financial period, therefore this indicator will be reported annually in the Q3 of the following financial year for the previous financial year-end.

Evidence
The Audited Annual Financial Statements for the previous financial year as finalised in January of the following financial period for the previous financial period.

Q4 Target
N/A

Q4 Actual
N/A

Comment:
N/A

Reasons for Variance
N/A

Remedial Actions:
N/A

3.1 City-Wide/Institutional SDBIP 2023/24

Refer to the City-wide SDBIP 2023/24.

Table1: City-Wide Indicators

Entity	Outcome	Ref No.	Performance Indicator	Portfolio of Evidence	Baseline (2022/23)	Annual Target (2023/24)	Planned Target Quarter 4	Actual Output Quarter 4	Variation	Actual Output Rating	Progress on Targets	Reason(s) for Variation	Remedial Action	Planned Budget Quarter 4	Actual Expenditure Quarter 4
IDP Strategic Objective 1: To deliver reliable, affordable and sustainable services and ensure improved infrastructure maintenance															
Ekurhuleni Water Care Company (ERWAT)	Improved quality of water (incl. wastewater)	WS4.31	Percentage of wastewater treatment capacity unused	Dated and signed report indicating actual flow received and treated per WCW and totalised for ERWAT system(19 WCW) drawn from LIMS (Laboratory Information Management System), in conjunction with the original or re-graded design hydraulic capacity (available capacity) per WCW for the ERWAT system (total of 19 WCW) .	-42%	-50%	-50%	-40%	-10%	-40%	Target was achieved	Water Care Works received lesser than amounts of daily inflows	Even though the target was achieved the intention is to eliminate completely the negative unused capacity and have at least 20% unused capacity. To this end more financial resources are required to eliminate any negative unused capacity and create some spare capacity	CAPEX	CAPEX

3.2 Entity's SDBIP Score card with Key Performance Areas and Indicators 2023/24

Table 2: Departmental Entity's SDBIP

Entity	Outcome	Ref No.	Performance Indicator	Portfolio of Evidence	Baseline (2022/23)	Annual Target (2023/24)	Planned Target Quarter 4	Actual Output Quarter 4	Variation	Actual Output Rating	Progress on Targets	Reason(s) for Variation	Remedial Action	Planned Budget Quarter 4	Actual Expenditure Quarter 4
IDP Strategic Objective 2: To build a clean, capable and modernized local statet															
Ekurhuleni Water Care Company (ERWAT)	Improved Quality of Water including Wastewater	ERW 1.1	Total revenue generated from external business	invoices coupled with general ledger with a balance that agree to the amount reported	R 39 837 478,83	R 31 200 000,00	R7 700 000	R9 608 532.84	R1 908 532.84	Target was exceeded	Target achieved	Target for Revenue generated was achieved due to existing projects that were maintained , CoE analyses invoiced for three consecutive months and revenue generated from new project from Dipaleseng Municipality.	Maintain existing projects and prevent attrition.	OPEX	OPEX
	To build a clean, Capable and Modernised Local State	ERW 1.2	Audit Opinion	Dated and signed Audit report from AGSA	Unqualified	Unqualified Audit Opinion	N/A	N/A	N/A	N/A	Not reportable in Q4	N/A	N/A	N/A	N/A
	Improved Quality of water (including wastewater)	ERW 1.3	Percentage compliance with wastewater treatment works license conditions and/or exemptions standards	Water quality analyses results of each Wastewater Treatment Works (from the LIMS) is downloaded. Spreadsheet is used. to calculate average	81%	75%	75%	88%	13%	88%	Target achieved	1. No loadshedding experienced in Q4. 2. 1.59% marginal improvement in critical equipment availability.		R180 077 720	R186 592 882

Entity	Outcome	Ref No.	Performance Indicator	Portfolio of Evidence	Baseline (2022/23)	Annual Target (2023/24)	Planned Target Quarter 4	Actual Output Quarter 4	Variation	Actual Output Rating	Progress on Targets	Reason(s) for Variation	Remedial Action	Planned Budget Quarter 4	Actual Expenditure Quarter 4
				compliance of each of the 3 compliance categories and then the average of the 3 categories gives the over all compliance per WCW and then per ERWAT system(19 WCW). Applicable Water use authorization limits of each Waste Water Treatment works											
	Improved quality of water including wastewater	1.M	Total Capital expenditure as a percentage of total capital budget	Dated and signed Finance year to date expenditure report	99,56% (2021/2022)	95%	95%	98.10%	3.10%	98.10%	Target achieved	Acceleration of project timelines to ensure work was completed in Q4, as planned.	None	R128 679 394,30	R133 066 28 8,29
	Improved Quality of Water including Wastewater	3.M	percentage of procurement spend allocated to SMME's	Dated and signed Letter of appointment or subcontract with support (contract) amount Award AND	91,4%	60%	60%	95%	35%	95%	Target achieved	Variance is as a result of measures put in place at specification stage to prioritise SMME's	None	Opex and Capex	R230 010 78 2

Entity	Outcome	Ref No.	Performance Indicator	Portfolio of Evidence	Baseline (2022/23)	Annual Target (2023/24)	Planned Target Quarter 4	Actual Output Quarter 4	Variation	Actual Output Rating	Progress on Targets	Reason(s) for Variation	Remedial Action	Planned Budget Quarter 4	Actual Expenditure Quarter 4
				Listing (Register) of SMME supported with support amount											
	Improved Quality of Water including Wastewater	4.M	Number of Repeat Audit Findings	AGSA signed management letter	8 repeat audit findings noted in the AGSA signed management letter for the 2021/2022 regularity audit	0 repeat audit findings noted in the AGSA signed management letter for the 2022/2023 regularity audit	N/A	N/A	N/A	N/A	Not reportable in Q4	N/A	N/A	N/A	N/A
	Improved quality of water including wastewater	6.M	Number of Green Drop (90%) wastewater treatment works (Bi-quarterly)	The Green Drop scorecard as released by the internal ERWAT Compliance office (in-house. assessment	New KPI	6 (90%)	6 (90%)	6 (90%)	0	6 (90%)	Target achieved	Target met with no variance	The following are focus areas for continuous improvement for Green Drop Status: * Prioritise the CAPEX budget to address the required	R 180 077 719 (Departmental)	R 186 592 882 (Departmental)

Entity	Outcome	Ref No.	Performance Indicator	Portfolio of Evidence	Baseline (2022/23)	Annual Target (2023/24)	Planned Target Quarter 4	Actual Output Quarter 4	Variation	Actual Output Rating	Progress on Targets	Reason(s) for Variation	Remedial Action	Planned Budget Quarter 4	Actual Expenditure Quarter 4
													WCW upgrades, replacement of aged equipment and refurbishments in line with the W_2RAP. * Review, update and approve all the outdated documents namely, Process Audits for all WCWs and ERWAT W_2RAP. * Establish a joint Task		

Entity	Outcome	Ref No.	Performance Indicator	Portfolio of Evidence	Baseline (2022/23)	Annual Target (2023/24)	Planned Target Quarter 4	Actual Output Quarter 4	Variation	Actual Output Rating	Progress on Targets	Reason(s) for Variation	Remedial Action	Planned Budget Quarter 4	Actual Expenditure Quarter 4
													Team with the Water Services Authorities (CoE and LLM) to address Green Drop requirements. * Green Drop Champions, together with Plant Management to source all the required PoEs from the internal support Departments as per Green		

Entity	Outcome	Ref No.	Performance Indicator	Portfolio of Evidence	Baseline (2022/23)	Annual Target (2023/24)	Planned Target Quarter 4	Actual Output Quarter 4	Variation	Actual Output Rating	Progress on Targets	Reason(s) for Variation	Remedial Action	Planned Budget Quarter 4	Actual Expenditure Quarter 4
													Drop requirements.		
	Financial Management	LED 1.11	Percentage of total municipal operating expenditure spent on contracted services physically residing within the municipal aera	Signed Expenditure report on municipal operating expenditure spent on contracted services	New KPI	8%	8%	65%	57%	65%	Target achieved	Measures put in place at specification stage to prioritise local spending.	N/A	OPEX	N/A
	Financial Management	FM 1.12	Total Operating Expenditure as a percentage of Total Operating Expenditure Budget	Signed Excel spreadsheet as extracted from Budget statements for the period	New KPI	95%	95%	82%	-13%	82%	Target not achieved	Under expenditure on employee costs, bulk purchases and general expenditure	Employee costs: Ensure that all vacancies are filled within the year in which it is budgeted for going forward. Budget for Directors be aligned to the number of incumbents which are included in planned appointments in future.	R1 475 366 759	R1 206 541 703

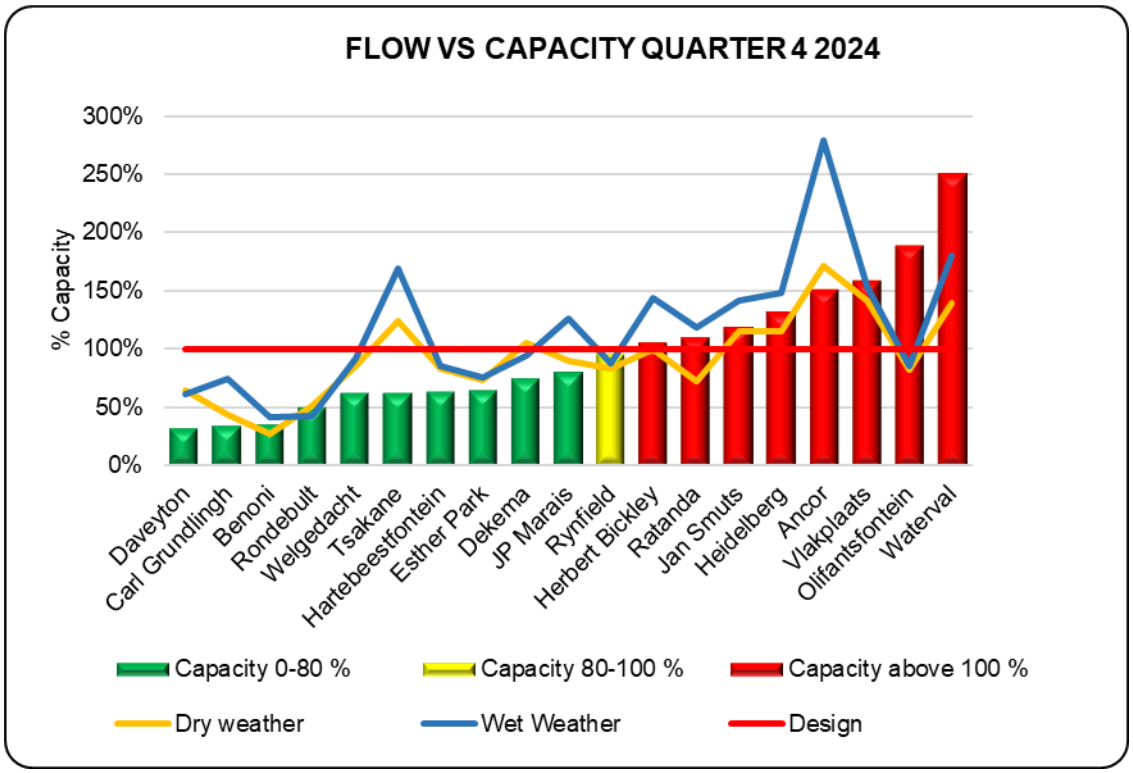
Entity	Outcome	Ref No.	Performance Indicator	Portfolio of Evidence	Baseline (2022/23)	Annual Target (2023/24)	Planned Target Quarter 4	Actual Output Quarter 4	Variation	Actual Output Rating	Progress on Targets	Reason(s) for Variation	Remedial Action	Planned Budget Quarter 4	Actual Expenditure Quarter 4
													Bulk purchases: Acceleration of the supply chain management processes to put relevant contracts in place for alternative chemicals (e.g. Aluminium Suplhate) to reduce delays in the procurement of essential chemicals. General expenses: Acceleration of the supply chain management processes to resolve delays experienced in the procurement process.		

Entity	Outcome	Ref No.	Performance Indicator	Portfolio of Evidence	Baseline (2022/23)	Annual Target (2023/24)	Planned Target Quarter 4	Actual Output Quarter 4	Variation	Actual Output Rating	Progress on Targets	Reason(s) for Variation	Remedial Action	Planned Budget Quarter 4	Actual Expenditure Quarter 4
	Financial Management	FM 4.11	Irregular, Fruitless and Wasteful, Unauthorised Expenditure as a percentage of Total Operating Expenditure	The Audited Annual Financial Statements for the previous financial year as finalised in January of the following financial period for the previous financial period,	New KPI	0%	N/A	N/A	N/A	N/A	Not reportable in Q4	N/A	N/A	N/A	N/A
	Financial Management	FM 5.31	Repairs and Maintenance as a percentage of property, plant, equipment and investment property	The Audited Annual Financial Statements for the previous financial year as finalised in January of the following financial period for the previous financial period,	New KPI	4%	4%	11,88%	7,88%	11.88%	Target achieved.	The positive variance of 7,88% is due to the significant increase in repairs and maintenance costs in line with the approved mid-year adjustment budget.	Not required.	OPEX	R 252 459 915
	Financial Management	FM 6.13	percentage of tender cancellations	Signed and dated SCM report containing tender cancellations in relation to the total number of tender business cases that was recorded, advertised and closed.	New KPI	10%	10%	0%	-10%	0%	Target met	No tenders were cancelled during Q4	None	N/A	N/A

Entity	Outcome	Ref No.	Performance Indicator	Portfolio of Evidence	Baseline (2022/23)	Annual Target (2023/24)	Planned Target Quarter 4	Actual Output Quarter 4	Variation	Actual Output Rating	Progress on Targets	Reason(s) for Variation	Remedial Action	Planned Budget Quarter 4	Actual Expenditure Quarter 4
	improved revenue and debtors management	FM 7.33	Net Surplus /Deficit Margin for Wastewater	The Audited Annual Financial Statements for the previous financial year as finalised in January of the following financial period for the previous financial period,	New KPI	5%	N/A	N/A	N/A	N/A	Not reportable in Q4	N/A	N/A	N/A	N/A

3.3. Reflection on operations/ day-to-day activities (Analytical Narrative Account)

Flows



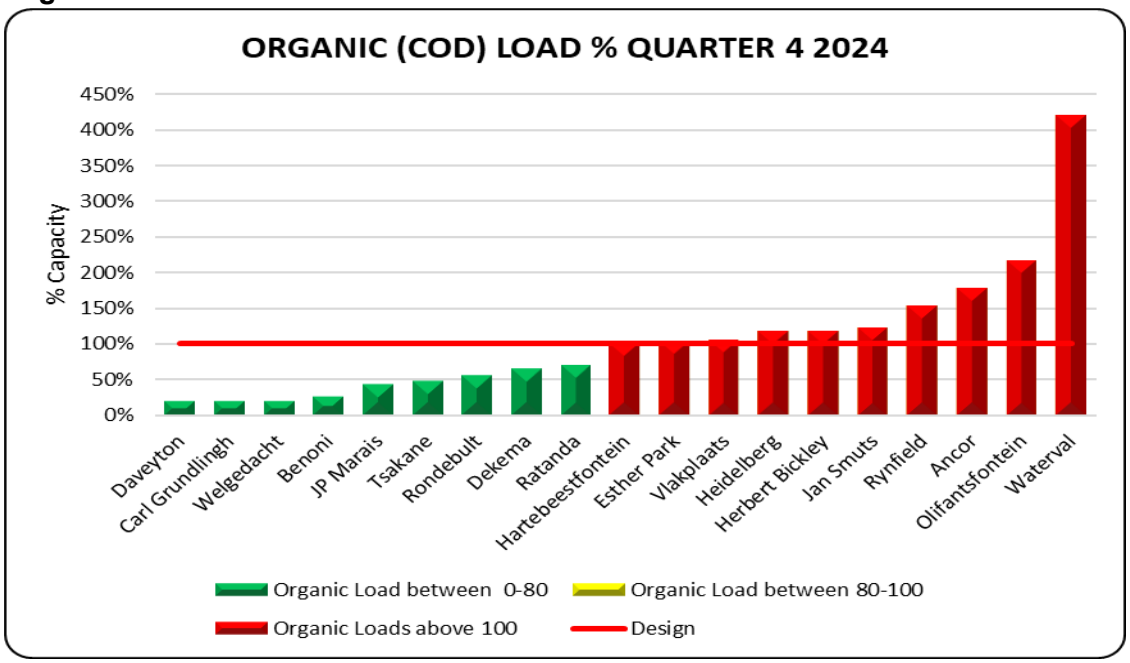
Flow and Rainfall

	Design Hydraulic Capacity (Ml/d)	Average Actual Flow Q4 Ml/d)	Rainfall Q4(mm)
Ancor	15.00	21.92	149.00
Benoni	7.50	3.64	34.00
Carl Grundlingh	5.20	2.52	221.00
Daveyton	19.00	7.59	115.00
Dekema	31.00	17.67	91.00
Esther Park	1.40	0.91	129.00
Hartebeestfontein	63.00	36.84	157.00
Heidelberg	5.40	6.66	57.00
Herbert Bickley	15.10	16.06	86.00
Jan Smuts	6.00	6.56	114.00
JP Marais	15.00	11.16	142.00
Olifantsfontein	65.00	117.68	138.00
Ratanda	4.70	6.16	96.00
Rondebult	20.00	8.29	67.00
Rynfield	9.80	9.20	95.50

	Design Hydraulic Capacity (Ml/d)	Average Actual Flow Q4 Ml/d)	Rainfall Q4(mm)
Tsakane	20.00	11.35	206.00
Vlakplaats	55.00	89.54	124.00
Waterval	170.00	455.84	56.00
Welgedacht	95.00	62.82	113.50
Total	623.10	892.41	2191.00

A total of 78986.15 Ml was treated in Quarter 4, at an average of 867.98 Ml/day, utilising 139.41% of the available capacity, as compared with Q3 where 80962.40 Ml was treated in Quarter 3, at an average of 889.70. Ml/day, utilising 142.75.% of the available capacity.
As can be noted in the above graph, during Q4 eight (8) out of nineteen (19) WCW were operating above their hydraulic design capacity, one (1) operating between 80% and 100% and ten (10) below their hydraulic design capacity.
In Q4 Waterval operating at 250%, Olifantsfontein operated at 188%, Vlakplaats operated at 158%, Ancor operated at 151%, Heidelberg operated at 132%, Jan Smuts operated at 119% and Ratanda operated at 110%, of their design capacity.
Until the overloaded WCW are upgraded/extended, serious challenges remain to support the CoE in meeting the Growth Development Strategy (GDS2055) and the development of the Aerotropolis.

Organic Load



As can be noted, 10 (ten) WCW operated above 100% organic load, and 9 (nine) below their design capacity during Q4(dry season), as compared to 5 (five) WCW operated above 100% organic load, 4 (four) WCWs operated between 80-100% of the organic design capacity and 10 (ten) below their design capacity during Q3.

3.4. Service Delivery Highlights and Challenges

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stock piling	Ground water pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
Benoni	Benoni complied with overall WUL effluent standards with compliance of Physical = 99%	Plant operated at 35 % of re-graded hydraulic capacity in Q4	Plant operated at 26% of re-graded organic capacity in Q4.	There were abnormal flow fluctuations in Q4 due to broken rising main at Apex pumpstation and cable theft at McKenzie	There was 4 high strengths of COD from industrial pollution and 1 coloured influent in Q4	3 Level 3 Equipment failures occurred in Q4	There were 2 unplanned power outage in Q4, and duration was 24 hours.	Open digesters walls are cracking,	None	None	Dried sludge is stock piled at the plant.	Unlined sludge paddies and maturation ponds could cause possible ground water pollution in Q4	None	None	Sludge classification B2b. Sludge Samples were taken to the Laboratory on 18/02/2024 for analysis of the new sludge classification. According to	Road is accessible	Portable water is available

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	Chemical = 96% Micro = 98% The target of 90% was achieved with the overall compliance of 98%			pumpstation											the Laboratory report, the samples were not analysed due to filter papers shortages. Screenings and grits that are generated at the plant, are		

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
															collected by CoE.		
Esther Park	Esther Park complied with overall WUL effluent standards with compliance of Physical = 93%	Plant operated at 64% of hydraulic capacity.in Q4	Plant operated at 106 % of organic capacity in Q4	The plant experienced no abnormal fluctuations inflows in April-June 2024 (Q4) with an average inflow of 0.89	Plant received industrial high strength effluent 19 times out of 91 days during April-June 2024 (Q4).	One Alert Level 3 Equipment failures occurred in Q4 (RAS pump no1).	There were 1 power outages in April-June 2024 (Q4) for duration of 0.5 hours (Power dip CoE).	Reactor walls are leaking.	Not applicable.	None	Not applicable.	Not applicable	Not applicable	Not applicable	Screenings and grits collected by MCC Security and Projects / CoE.	Access road repaired. Road inside plant must be compacted.	Drop in water pressure occasionally that affects chlorine dosing.

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	Chemical = 94% Micro = 90% The target of 84% was achieved with the overall compliance of 92%			Ml/d (64%).													

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
Hartebeestfontein	Hartebeestfontein complied with overall WUL effluent standards with compliance of Physical = 80% Chemical = 41%	Plant operated at 63% of hydraulic capacity in Q4	Plant operated at 101 % of organic capacity in Q4	The plant experienced fluctuations inflows in April-June 2024 (Q4) due to breakdown of Pomona Pump station with an average flow of	Plant received industrial high strength effluent 64 times out of 91 days during October-December 2023 (Q2).	6 Alert Level 3 Equipment failures occurred in Q4.	There were 1 power outages in April-June 2024 (Q4) for duration of 12 hours.	Aging infrastructure: Ferric plant, chlorine, thickeners, clarifier 1-4 bridge and siphons.	Digester 1, 4,6 and 9 sludge recirculation nozzles blocked. Digester 1-9 feeding lined was blocked. Constant blockage of digeste	There were 1 veld fires experienced in April-June 2024 (Q4)	684 000 kg of dry sludge was irrigated to the 200 hectares farm.	Borehole two has high concentration of Nitrates.	Sinkhole next to the fence towards FST 5 & 6 and around the Farm.	License amendment with relaxation on Electrical conductivity, Ammonia, E.coli and COD.	Sludge classification is B2c, not suitable for the intended purpose; this requires further engagement with the farmer.	The grading was done around the fence in May 2024.	Drop in water pressure occasionally that affects chlorine dosing. There was 1 portable water leak from Ekurhuleni main feed

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	Micro = 85% The target of 50% was achieved with the overall compliance of 69%			39.26 Ml/d.					r feed lines (1-9)								
Olifantsfontein	Olifantsfontein compl	Plant operated at a	Plant operated at	There were abnormal	Plant received indust	43 Level 3 Equipment	There were 0 power	Module 3 Anaerobic	1 of 6 digesters is blocke	There were no	Total sludge of 394	Unlined emergency dams	2x Sinkholes behin	Olifantsfontein WUL is stringen	Sludge is classified into	Road to upstream samplin	YES, there is a water leak

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	ied with overall WUL effluent standards with compliance of Physical = 94% Chemical = 62% Micro = 86%	hydraulic capacity of 188% in Q4 23-24	218 % of organic capacity for Q4 2023 / 2024.	fluctuations of inflows in Q4 23-24 With ranges of 102.86 -158.6 Ml/d in Apr 2024, 109.07 – 132.66 Ml/d in May 2024, and 113.12 - 128.87	rial pollution high strength for 25 out of 91 days (COD 9 of 91 days, Fat of 6 of 91 day, Coloured influent 2 of 91	failures occurred in Q4.	outages in Q4	digesters.	d due to sand accumulation.	veld fires in Q4	203kg of sludge was produced in Q4.	contaminating borehole no.2&3. Borehole 1 runs dry during dry seasons	d and in front of the old laboratory which occurred in Dec 2019 and 1x behind return pump station which occurred in	t on Ammonia of < 2mg/l, SS of 15 mg/l and EC of < 80 mS/m.	three streams : (1). Dewatering unit(B3a), the sludge not suitable for cultivating crops such as fruits trees (2). Drying beds (A3a), No restricti	g point need to be graded and there is high erosion on the banks. To be reported to the CoE..	that is reoccurring and resulting in water loss

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	The target of 60% was achieved with the overall compliance of 81%			Ml/d in June 2024.	days and foam 8 of 91 days) In Q4.								March 2024. All sinkholes still not rehabilitated		ons and requirements apply 3) Grit and screenings is waste that should be dumped at specialised land fill under strict conditions to ensure ENV		

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
															compliance, waste management by the city has been affected by lack of collection from site, leading to stockpiling and odour complaints.		
Rynfield	Rynfie			There were													

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	ld complied with overall WUL effluent standards with compliance of Physical = 99% Chemical = 91% Micro = 99%	Plant operated at 96% of re-graded hydraulic capacity in Q4, which was below the design capacity.	Plant operated at 154 % of re-graded organic capacity for Q4	high flows received during the Q4 from 3 April 2024 to 9 April 2024 due to high rainfall experienced.	None	0 Level 3 Equipment failures occurred in Q3.	There was 1 power outages in Q4 with a duration of 7.5 hrs.	Pavement, Digesters, Reactor tank and Bio-feeder structures are cracked	3 of 4 digesters are blocked due to defective desludging valves	There was 1 veld fire incident on 25th of June 2024 in the plant. The fire was extinguished and no	Dried sludge is stock piled at the plant	Unlined sludge paddies, contact tank and maturation ponds could cause possible ground water pollution	None	None	CoE collects screenings and grits from the inlet works. Dried sludge is stockpiled at the plant	None	None

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	The target of 65% was achieved with the overall compliance of 97%									damage to property.							
Ancor	Ancor complied with overall WUL	Plant operated at 151% of its hydra	Plant operated at 179 % of	Ancor did not receive storm water ingress	Plant had 21 industrial polluti	2 alert level 3 Critical equipment failures	There was no load-shedding incident	Bio filter flow division boxes partially collaps	1 digester blocked with sand	No Veld fires occurred durin	Stock pile area not lined. Stock	Unlined sludge paddies pollute undergr	Area around humus tanks	N/A	CoE/MCC removes solid waste (screeni	Access road to the plant is in bad conditio	Potable water main line leaking in

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	effluent standards with compliance of Physical = 79% Chemical = 61% Micro = 92% The average compliance	ulic capacity in Q4	organic capacity in Q4.	during week 24.	on incidents		during Q4. And 3 power outages of 4 hrs	ed, humus tanks/ PST's- and digesters structures are crumbling /cracked. Ancor also do not have a chlorine contact tank for disinfection	and 2 are partially in operation. This cause the plant to run out of sludge handling capacity, which prevent proper desludging	g the week at sludge lands	piles on plant is a risk due to veld fires and environmental pollution	ound water	and final effluent channel are dolomitic according to Geotech study performed.		ngs and grit).	n with lots of potholes.	Cassel dale pump station area.

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stock piling	Ground water pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	target of 50% was Achieved a with the overall compliance of 78%								and resulting in non-compliances.								
Daveyton	Daveyton complied with overall WUL efflue	Plant operated at 32 % of its hydraulic capac	Sufficient capacity. Plant operated at 19	Numerous sewer blockages in the CoE networ	4 incidents	1 Level 3 Equipment failures occurred in Q4 which	2 power failures totalling 3 hours in Q4.	CCT sometimes leaking. Do not have direct impact	N/A	No veld fires in Q4	Sludge lagoons are unlined Space for	Unlined sludge lagoons pollute the ground water.	N/A	N/A	Screenings are collected by COE for proper disposal.	N/A	N/A

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stock piling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	nt standards with compliance of Physical = 99% Chemical = 96% Micro = 98% The average compliance target	ity in Q4.	% of its organic capacity in Q4.	k, Collapsed sewer pipeline down stream of pump stations, pump failures at Etwatwa ext.18 pumpstation and potable water supply		was the WAS pump.		on the operation of the plant at the moment			solar drying is in-sufficient						

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	of 90% was Achieved a with the overall compliance of 98%			interruption to Etwatwa lead to inconsistent and irregular flow to the plant.													
JP Marais	JP Marais complied with overall WUL efflue	Sufficient capacity. Plant operated at 79% of	Sufficient capacity. Plant operated at 43%	Blockage of Benoni outfall sewer line in May, leading to	No incident in Q4.	14 Alert Level 3 Equipment failures occurred in Q4,	9 power failure incidents occurred (23 hours) in Q4, with no	None	N/A	No veld fire incident experienced in Q4.	Sludge pumped to Welgedacht, where it is	Some boreholes polluted. Ongoing monitoring of boreholes.	No dolomitic soil	N/A	CoE removes solid waste (screenings and grit) except for PST	N/A	N/A

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	nt standards with compliance of Physical = 100% Chemical = 96% Micro = 96% The average compliance target	hydraulic capacity	of organic capacity.	decreased flows received at the plant.		namely: WAS pumps x4, PST pumps 1 x4, Chlorine heater breaker x1, Screenings compactorx1, WAS pipelinex1, WAS pump level transmi	loadshedding				treated.				screenings, due to no screen compactor.		

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	of 90% was Achieved a with the overall compliance of 97%					tter cablex 1, WAS pump level transmitterx1, BNR MCC panel PLC circuit breaker x1.											
Welgedacht	Welgedacht complied with overall WUL efflue	Plant operated lower than its design	Sufficient capacity Plant operated at	Blocked Old McComb leading to decline incomi	None	4 critical equipment failures occurred in Q4 2024,	4 power outages which lasted for 47 hours due to	Module 1 electrical panel for aerators and digester	N/A	No veld fires occurred.	None	Unlined Dichlorination channels and Emergency dam	N/A	None	Screenings are removed by an approved contractor to an	Gravel access road in very bad conditions and very	No potable water supply to the plant. Borehole water

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	nt standards with compliance of Physical = 99% Chemical = 91% Micro = 96% The average compliance target	capacity (operated at 62% capacity)	19% organic capacity. Under Achievement.	ng flows during Q4, conditions were further aggravated by blockage of Benoni outfall sewer line in May, leading to decreased flows receive		Aerator no 3,7 and Aerator no.11 and ABS Blower no.2.	Generator installation and maintenance at ESKOM Substation.	s at module 2							approved landfill site. This practice does comply with WUL conditions.	slippery when wet.	used for hygiene. Drinking water is being transported in from other plants.

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	of 81% was Achieved a with the overall compliance of 95%			d at the plant.													
Jan Smuts	Jan Smuts complied with overall WUL efflue	Plant operated at 119% of its hydraulic	Plant operated at 123 % of its orga	76 days of High incoming flows in Q4	Plant had 25 industrial pollution	Q4, alert level 3 critical equipment failures.	3 Power outages (9 hours total) due faulty	Humus Tanks scum boards, digester number 2's wall, drying	None	2 fires occurred at Jan Smuts, on	Dried sludge is stockpiled on site.	Unlined sludge stockpile area can cause groundwater	No	No	Screenings are removed by an approved contractor to an	Fair	Rand Water

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	nt standards with compliance of Physical = 93% Chemical = 69% Micro = 83% The average compliance target	capacity	nic capacity.		incidents		cables at Van Eck sub station, Generator backup was operational	beds' walls and the bio-filters' feed flow division box/tower.		17 June 2024 - started outside Jan Smuts, and blew onto the plant. And on 29 June 2024 a fire occurred		pollution.			approved landfill site. This practice does comply with WUL conditions.		

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	of 70% was Achieved a with the overall compliance of 82%									from Municpality Parks Works and move to Jan Smuts side of the fence							
Heidelberg	Heidelberg complied with overall WUL	Plant operated at 132% of its hydraulic	Plant operated at 118 % of orga	High incoming flows above the design	The plant received 10 high COD s and	None	Heidelberg had 7 unplanned power outages	The joint sealants of Carousel reactor	None	None	Sludge at the plant stock piled after	Unlined sludge paddies/ lack of groundwater monitori	None	None	Contractor removes solid waste (screenings and	The access road to Heidelberg works requires	Leakage on the pipeline to the inlet works

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	effluent standards with compliance of Physical = 100% Chemical = 87% Micro = 99% The average compliance	capacity	nic capacity	of the 5.4 Ml/d	4 high NH3s levels that are above the design in the current quarter.		with a duration of 37 hours. Diesel used was 3430 L	concrete wall are damaged			dewatering, and is also applied/irrigated to the lands and could potentially contaminate groundwater resources	ng in the sludge paddies			grit).and dispose at licensed solid waste site.	a new-tarred road is required urgently	due to a rusted pipeline.

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	target of 80% was Achieved a with the overall compliance of 95%																
Herbert Bickley	Herbert Bickley complied with	105%	Plant operated at 119 % of organic	The Plant is receiving low inflow than normal since	27 industrial pollution incidents exper	12 Alert level 3 incidents reported in Q4	11 Incidents of power failure reported in Q4 lasting	Anaerobic Digester 1,2,3&4	No digester blocked however the underfl	0 VELD FIRES IN Q4	Bickley WCW Sludge used for irrigati	All nine boreholes results fluctuate showing signs of pollution	None observed	No. Bickley compliant with all paramet	MCC Projects provided the service at the start of year	Access road is Damaged	No Issues

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stock piling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	overall WUL effluent standards with compliance of Physical = 99% Chemical = 98% Micro = 97% The average		capacity	the Jameson Park and Masetjaba pump stations are not working	ienced in Q4	1. Surface aerators 3, 4 & 6 Sludge to land pump 1 & 2 motors flooded. RAS pump 3 fault. Booster pumps fault	37.25 hours		ow pipeline for Digester 5,6,7& 4 is blocked		on of Kikuya instant grass			ers for the year	however currently CoE collects the Bins		

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stock piling	Ground water pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	compliance target of 80% was Achieved a with the overall compliance of 98%																
Tsakane	Tsakane complied with	Sufficient capacity. Plant	Sufficient capacity. Plant	Minimal incoming flow was	Plant received industrial	2 Level 3 Equipment failures	Tsakane had 0 load shedding	Digesters and channel for raw sewage	N/A	No veldfires occurred	Sludge pumped to unline	Unlined sludge lagoons and paddies/	None (There's a dolomitic	None	Screenings and grit collected by	None	Potable water leaks next to Tsakan

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	overall WUL effluent standards with compliance of Physical = 98% Chemical = 90% Micro = 95% The average	operated at 62% of hydraulic capacity.	operated at 47% of organic capacity.	experienced at the plant due to equipment breakdowns and spillages at Reticulation pump stations (Rockville, Extension 11 and 22)	high strength effluent on 5 of 91 days	occurred in Q4.namely, Transformer feeding the power tripped, Chlorine system.	events. Power outages 4 incidents lasting 29 hours.	feeding HYBACS concrete structures cracked and leaking		during Q1	d lagoons/paddies for solar drying. Drying beds have been decommissioned	lack of groundwater monitoring at the sludge lagoons and paddies. Unfenced drying paddies	report that shows none at Tsakane)		MCC Security to a dedicated landfill site		e hostel. It also creates a wetland next to the fence.

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stock piling	Ground water pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	compliance target of 70% was Achieved a with the overall compliance of 94%																
Carl Grundlingh	Carl Grundlingh complied with	Plant operated at 34% of re-grade	Plant operated at 19% of re-	None	No Pollution	None	There was a total of 6 unplanned	None	N/A	There 1 veldfires repor	Land application of sludge is	Unlined sludge to land posing ground	None	None	Collected by a contractor to a dedicated	Access road to the plant is damaged and	There is a water leak that is next to

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stock piling	Ground water pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	overall WUL effluent standards with compliance of Physical = 100% Chemical = 97% Micro = 85% The average	d hydraulic capacity in Q4	graded organic capacity in Q4				power failures with a total duration of 123 hours of power outage due cable breakdown			ted in Q4	being used	water pollution			landfill site	requires an upgrade.	the transformer

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stock piling	Ground water pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	compliance target of 88% was Achieved a with the overall compliance of 94%																
Ratanda	Ratanda complied with	Plant operated at 110% of its	Plant operated at 70%	Reduced flow due to blocked	None	Generator, Aerator 2,Clarifier	WCW experienced 9 unplanned	Drying beds drainage system	N/A	No veld fires occurred	Dried sludge is stock piled	Unlined sludge ponds and leaking	None	None	Screenings and grit generated at	The access road to Ratanda Works	No link to the Municipal Potable

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	overall WUL effluent standards with compliance of Physical = 98% Chemical = 82% Micro = 93% The average	hydraulic capacity	of organic capacity,	manhole next to Heidelberg WCW and two manholes next to extension 2, Lesedi LM and DWS informed.		bridge, and a-recycle pump 3, all were repaired and installed by Manya Engineering on 06/06/2024, generator fixed by PMT on 08	power outages for the duration of 26 hours, no load shedding experienced.	and chlorine contact tanks are badly leaking structures		during Q4	on-site, potential groundwater pollution	drying beds, potential groundwater pollution			the plant are collected by MCC security and projects and disposed at licenced landfill site, sludge stockpile area is unlined, potential ground	is severely damaged and a new-tarred road is required urgently	Water Supply, water transported from Heidelberg Works and borehole water is used for other domestic purposes

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	compliance target of 85% was Achieved a with the overall compliance of 91%					June 2024									water pollution		
Dekema	Dekema complied with overal	Plant operated at 73% of hydra	Incoming organic concentra	Plant received high flows on 0 out of	Plant received inflow that contai	20 Level 3 Equipment failures occurred in	3 power outages occurred (5 hrs total)	Channels feeding sections partially	1 out of 12 Anaerobic digesters is	No veld fires occurred	Sludge pumped to unlined	Screenings and grit are disposed to suitable	None	N/A	Screenings and grit generated at the	The access road to Dekema WCW needs	N/A

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	l WUL effluent standards with compliance of Physical = 83% Chemical = 70% Micro = 88% The average compl	ulic capacity	tion was within design organic capacity. Plant operated at 64% organic capacity	91 days	ned industrial effluent with high COD 8 of 91 days and high NH_3 2 of 91 days.	Q4. Namely: 3x sludge pump , 3 x PST chain, 2 x Ferric chloride dosing pump, 2 x humus tank bridge, 3 x Fine screen, 2 x Electric panel, 1x drain pump,	Unplanned power outages.	collapsed. Biofilters and digesters wall are cracked.	blocked	during Q4	paddies for solar drying and dried sludge spread to land area to be ploughed into land	landfill that is lawful according to the NEMA.			plant are disposed to suitable landfill that is lawful according to the NEMA. A Service Provider screenings and grit transport to authorised landfill	to be tarred as it gets muddy and slippery during rainy season.	

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	iance target of 75% was Achieved a with the overall compliance of 80%					2x Biofilter pump, 1x Biofilter arm, 1x Biofilter valve									site courtesy of CoE		
Rondebult	Rondebult complied with overal	Plant operated at 49% of hydraulic	Plant operated at 55% organic	The plant received an average of 9.55	Plant received high COD industrial	5 Level 3 Equipment failures occurre	9 Outages with the total hours of 147.29	Channels feeding sections partially collaps	None	1 veld fires occurred during Q4	Sludge pumped to unlined paddi	Unlined sludge lagoons, Collection and transportation of	The entire area of the plant are	N/A	Collection and transportation of waste (screening and	The access road in and around the plant	Potable water pipeline rusted and needs to be

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	l WUL effluent standards with compliance of Physical = 88% Chemical = 77% Micro = 99% The average compl	capacity	capacity	ML/d for Q4 and highest flow recorded was 24.39 Ml/d. Total rainfall measured for the Q4 at the plant was 67 mm.	effluent on 12 of 91 days and NH3 on 0 of 91 days	d in Q4. 4 critical equipment reported during the month of April 2024. Namely; 2x Secondary biofilter feed pumps	occurred during Q4, Power outages were due to CoE power interruptions (cable theft, cable faults and electrical substation) with a total	ed. Biofilters and digesters wall are cracked. Biofilter walls cracked. Brick work of open channels are unstable, collapsing and cracked. The feed			es for solar drying and dried sludge spread to land area and ploughed into land. WUL noncompliant and an audit	screenings, grit disposed of at a registered hazardous waste landfill sites	dolomitic		grit) to a waste disposal site done by MCC security and Projects ERW202107/TNDR-003 .	are deteriorating and will need attention	replaced

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stock piling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	iance target of 90% was Not Achieved a with the overall compliance of 88%					1x Primary biofilter feed pump level sensor 1x Primary biofilter feed pump #5 1 critical equipment reporte	of 29 hours.	pipe from the primary biofilters to the secondary biofilters has collapsed. Anaerobic digester #4 and #5 walls have cracks. Digester #6 dome has			finding.						

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
						d during the month of May 2024. Namely; 1x Raw sludge pump #12		open/ visible cracks on the surface. Office building cracked and leaking.									
Vlakplaats	Vlakplaats complied with overall WUL efflue	Plant operated at 158% of hydraulic capac	Plant operated at 105 % of organic	The plant received an average of 89.29 ML/d	Plant received industrial high strength	17 Level 3 Equipment failures occurred in Q4. -	4 Outages occur (47 hours in total) due to Load	Office building have some cracks.	None	No veld fires occurred during Q4.	Dried sludge is stock piled on the drying beds.	Unlined Maturation pond.	Area around bio filters at Mod A are	N/A	Screenings and grit tender is awarded generat	Access road to DBF dosing station is slippery during	None

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	nt standards with compliance of Physical = 72% Chemical = 59% Micro = 46% The average compliance target	ity. Needs to be upgraded	capacity	for Q4 and highest flow recorded was 157 Ml/d .Rainfall measured at the plant was 124 mm. Fluctuation of inflow is due to inconsi	effluent on 2 of 90 days	Namely: 2 x damaged electrical cable at main supply 6 x failure of Module 1-4 Level 3 Equipment failures occurred in Q4. 7 x failure	reduction and damaged power supply cable.				Demand for instant lawn application is seasonal		dolomitic		ed solid waste at the plant is disposed to landfill site starting from the 1 Feb 2023	rainy season	

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stock piling	Ground water pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	of 47% was Achieved a with the overall compliance of 59%			stent Pump stations.		of raw sludge pumps 1x failure of ferric bulk transfer pumps. 1x failure of DBF dosing pump.											
Watervaal	Waterval complied with overall WUL	Plant operated above capacity (oper	Sufficient capacity Plant operated	Average flow of up to 418.22 Ml/day receive	Sufficient capacity Plant operated at	19 alert level 3 Critical equipment failures	0 Hours planned blower outage	None	None	0 veld fires at sludge land	Dried sludge is stock piled on the plant	Unlined Emergency dams and paddies.	None	N/A	Screenings and grit generated at the plant	N/A	

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stock piling	Ground water pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	effluent standards with compliance of Physical = 97% Chemical = 93% Micro = 87% The average compliance	ated at 250% capacity)	at 160 % organic capacity.	d due to developments and bypasses for upstream plants.	92% organic capacity.	occurred in Q4 2023/2024 Mainly from 3 x Chlorine system blocked 2 x DBF shortage due to contract elapsed				occurred during Q4	and paddies. Demand for agricultural application is seasonal.				are now disposed at landfill site, this to prevent underground seepage		

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stock piling	Ground water pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
	target of 80% was Achieved a with the overall compliance of 92%					5 x Module 4 aerators tripped 1 x Pond 9 substandard pump failure 1 x WAS pump failure 1 x Blower failure 4x Power dip cut											

Plant	Non-compliance of final effluent	Hydraulic Capacity	Organic Capacity	Abnormal fluctuations in inflow	Industrial effluent	Level 3 Equipment Failure	Power outages	Ageing infrastructure	Blocked digesters	Veld fires	Sludge stockpiling	Groundwater pollution	Dolomitic soil	Very Strict WUL standard	Solid Waste Management	Access Roads	Potable water
						2 x RAS pump											

3.5. Project/Infrastructure Report

This section includes all major projects that will contribute to the Mega Catalytic projects. ERWAT receives new township applications timeously from CoE and provide responses about the capacity availability at various Water Care Works as and when applications are received. This section focuses on feasibilities studies and major projects at ERWAT Water Care Works (WCW), for projects that contribute either directly or indirectly to the flagship projects. Below is the summary of these planned and running projects that have been identified to address planned Mega Catalytic Projects within City of Ekurhuleni (CoE).

3.5.1 Running Projects

3.5.2.1 The appointment of service provider/s for the supply, delivery and installation of Generators at ERWAT wastewater care works on 'as and when required' basis for a period of THIRTY-SIX (36 NO.) MONTHS

The project involves the procurement, supply, and delivery of diesel generators to meet the power requirements during load shedding at ERWAT Water Care Works. The purpose of the project is to ensure a reliable and uninterrupted power supply, particularly in areas where grid electricity is unreliable or unavailable. The diesel generators serve as backup power sources during power outages or as primary power supply in off-grid locations.

The project is on implementation phase.

3.5.2.2 The appointment of service provider/s for the supply, delivery and installation of Pumps at ERWAT wastewater care works on 'as and when required' basis for a period of THIRTY-SIX (36 NO.) MONTHS

The project involves the procurement, supply, and delivery of Pumps for the efficient and effective operation of ERWAT Water Care Works, maintaining flow rates, pressures and mixing for effective treatment and disposal of sludge.

The project is on implementation phase

3.5.2.3 Appointment of a service provider to supply, deliver and deploy a hyper converged infrastructure solution for ERWAT

ERWAT's current server infrastructure is beyond its End-Of-Life specifications. This has resulted in ERWAT having a high risk of hardware failure and no hardware vender support which may increase the risk of cyber related vulnerabilities.

The replacement of the hardware above will allow ERWAT to have vender hardware support, software support, and also to bring its OS (Operating Systems) platforms to a supported state. This will result in ERWAT receiving the latest patching from both software and hardware venders.

This upgrade will ultimately improve the entity's information systems reliability and improve its security posture.

The project is on implementation phase i.e. equipment has been delivered and the installation will be completed by the end of Q1 of 2024-2025.

3.5.2 Planned Projects

This section includes all major projects that will contribute to the Mega Catalytic projects such as the John Dube Development and Obed Mthombeni Nkosi. This section focuses on feasibilities studies and major projects at ERWAT Water Care Works (WCW), for projects that contribute either directly or indirectly to the flagship projects.

COE and ERWAT undertook a comprehensive “Wastewater Conveyance and Treatment Systems Regionalisation and 50-year Master Plan" that will give strategic direction for future wastewater system extensions/consolidation planning, investment and implementation for the next fifty (50) year planning horizon. The plan cover all the Water Care Works operated by ERWAT and conveyance systems within the CoE operational area with the intention to optimize existing WCW systems and wastewater conveyance systems.

The urgent required WCW capacity upgrades to accommodate the short to medium term capacity requirements in line with the Regionalization and 50-year Master Plan is summarized in table below. To alleviate the immediate pressures faced by the institution, the City of Ekurhuleni, through their Human settlement department and EPMO have made funding available to kick start the process of appointing Professional Service Providers to undertake the designs of the identified WCW.

The appointments follow the ECSA guidelines that are detailed below.

- STAGE 1 – Inception
- STAGE 2 – Concept & Viability (Preliminary Design)
- STAGE 3 – Design Development (Detail Design)
- STAGE 4 – Documentation & Procurement (Including Tender Doc)
- STAGE 5 – Contract Administration and Inspection
- STAGE 6 – Close Out

The following WCW were identified to be in urgent need for expansion, discussed in section below. Table below outlines the key milestones progress to date.

Table 3.5.2.1 Key Milestone Progress to Date

PROJECT NAME	PROJECT STAGES	IMPLEMENTATION STATUS
Waterval WCW Upgrade	Inception	Completed
	Preliminary Desing	Ongoing
Olifantsfontein WCW Upgrade	Inception	Completed
	Preliminary Desing	Ongoing
Ancor WCW Upgrade	Inception	Completed
	Preliminary Desing	Ongoing
Welgedacht WCW Upgrade	Inception	Completed
	Preliminary Desing	Completed
	Detail Design	Ongoing

PROJECT NAME	PROJECT STAGES	IMPLEMENTATION STATUS
Vlakplaats WCW Upgrade	Inception	Completed
Ratanda WCW Upgrade	Detail Design	Ongoing

3.5.2.1 Ancor Water Care Works

The Ancor WCW is situated in Springs and falls within the DD4 drainage district. Built in 1936 and upgraded on several occasions over a period of time, the works is designed to treat 15 megalitres of wastewater per day from the Springs and Kwa Thema areas. The plant is currently operating above its design capacity, which leads to poor quality of the final effluent. The new Daggafontein Megacity that is currently under construction will require a connection to the Ancor outfall.

The scope of work entails the additional 15ML/d treatment Module and restoration of the current regraded 15 ML/d back to 35ML/d design capacity

	PLANNED PROJECTS	STATUS /COMMENTS	COMMISSIONING DATE
1	Upgrade to 35 Mℓ/d. Additional 15 Mℓ/d.	The capacity treatment plant upgrade is planned in relation to the 50-year master plan.	The project is currently on Stage 2 (Preliminary Design)

3.5.2.2 Vlakplaats Water Care Works

Vlakplaats water care works is situated in Vosloorus and falls within the DD6 drainage district. The original design capacity of the plant was 83 Mℓ/d. The plant capacity has been downgraded to 55 Mℓ/d. The plant is currently operating above its design capacity, which leads to poor quality of the final effluent. Vlakplaats flow distribution project is currently under construction phase to augment and add a peak flow balancing capacity into the plant by converting the old existing ponds into a balancing tank.

Plans are currently underway to upgrade and restore its original capacity of 83 Mℓ/d in order to enhance the treatment capacity. These upgrades will ensure that the plant meet the required standards as stipulated by the department of water and sanitation (DWS).

PLANNED PROJECTS		STATUS /COMMENTS	COMMISSIONING DATE
1	Additional 28 Mℓ/d Plant Upgrade	The capacity treatment plant upgrade is planned in relation to the 50-year master plan.	Inception stage-Completed

3.5.2.3 Welgedacht WCW

The Welgedacht water care works is situated in Springs and falls within the DD5 drainage district. The original design capacity of the plant was 85 Mℓ/d. Module 2 have been commissioned and is currently undergoing defects liability period. The plant capacity has been upgraded to 95 Mℓ/d.

Plans are currently underway to upgrade the plant to 155 Mℓ/d in order to enhance the treatment capacity. These upgrades will ensure that future developments flows are

accommodated thereby meeting the required standards as stipulated by the department of water and sanitation (DWS).

	PLANNED PROJECTS	STATUS /COMMENTS	COMMISSIONING DATE
1	Additional 60 Mℓ/d Plant Upgrade	The capacity treatment plant upgrade is planned in relation to the 50-year master plan.	The project is currently on Stage 3 (Detail Design)

3.5.2.4 Ratanda Water Care Works

The Ratanda WCW is situated south-west of Ratanda town and falls within the DD5 district. Built in 1998, it is designed to treat 4.7 Mℓ/d of raw sewage from Ratanda. Conventional activated sludge is employed as the main treatment process.

The scope of work entails the refurbishment of the existing works and upgrade by extension of the works with an additional capacity of 5 ML/d, by provision of a new module.

	PLANNED PROJECTS	STATUS /COMMENTS	COMMISSIONING DATE
1	Additional 5 Mℓ/d Plant Upgrade	The capacity treatment plant upgrade is planned in relation to the 50-year master plan.	The designs are currently being developed to be finalised.

3.5.2.5 Waterval Water Care Works

The Waterval water care works is the largest works operated by ERWAT and is situated in the DD6 area at the Kliprivier. The original design capacity of the Waterval wastewater care works was155 Mℓ/d. The plant capacity has been upgraded to 170 Mℓ/d.
Plans are currently underway to upgrade the plant to 420 Mℓ/d in order to enhance the treatment capacity. These upgrades will ensure that future developments flows are accommodated thereby meeting the required standards as stipulated by the department of water and sanitation (DWS).

	PLANNED PROJECTS	STATUS /COMMENTS	COMMISSIONING DATE
1	Additional 250 Mℓ/d Plant Upgrade	The capacity treatment plant upgrade is planned in relation to the 50-year master plan	The project is currently on Stage 2 (Preliminary Design)

3.5.2.6 Olifantsfontein Water Care Works

The Olifantsfontein works, situated in the northern Drainage District (DD3), serves the majority of the communities and industries in Tembisa, Olifantsfontein and Ivory Park, as well as sections of Kempton Park and Midrand. The works is designed to treat 15 105 Mℓ/d.
Plans are currently underway to upgrade the plant with an additional 50 Mℓ/d in order to enhance the treatment capacity. These upgrades will ensure that future developments flows are accommodated thereby meeting the required standards as stipulated by the department of water and sanitation (DWS).

	PLANNED PROJECTS	STATUS /COMMENTS	COMMISSIONING DATE
1	Additional 50 Mℓ/d Plant Upgrade	The capacity treatment plant upgrade is planned in relation to the 50-year master plan	The project is currently on Stage 2 (Preliminary Design)

Conclusion

ERWAT is striving and working hard towards addressing all Mega Catalytic projects to accommodate all new developments within the City of Ekurhuleni. As discussed above, the mentioned Water Care Works need to be upgraded urgently to cater for the current backlog in capacity and to make provision for future housing and industrial developments.

3. Financial Report

The operational and capital expenditure are provided in Table 5 and 6, respectively.

Table 5: Operational expenditure

Line item	Total Original Budget	Total Revised Budget (Applicable only after Adjustment)	Budget for Quarter	Actual for Quarter	Variance	Actual for FY (Yr. to date)	Variance for year (Yr. to date)
Employee Related Costs - Salaries & Wages	R484 802 323	R488 279 673	R122 069 918	R102 976 979	(R19 092 940)	R428 463 871	(R59 815 802)
Remuneration of Directors	R3 991 959	R1 280 777	R320 194	R226 562	(R93 632)	R1 101 273	(R179 504)
Bad Debts (Provision for Bad Debts)	R1 856 135	R1 856 135	R464 034	R1 143 744	(R679 710)	R2 321 947	R465 812
Depreciation and amortization	R103 878 876	R129 018 367	R32 254 592	R29 237 618	(R3 016 974)	R116 036 306	(R12 982 061)
Impairment loss	R0	R11 928 908	R2 982 227	R0	(R2 982 227)	R0	(R11 928 908)
Repairs and Maintenance	R155 998 871	R174 903 541	R43 725 885	R72 109 864	R28 383 979	R169 176 364	(R5 727 177)
Interest Expense	R27 929 554	R36 530 626	R9 132 657	R6 921 253	(R2 211 404)	R30 311 702	(R6 218 924)
Bulk purchases	R400 223 852	R361 113 138	R90 278 285	R74 310 946	(R15 967 339)	R299 657 777	(R61 455 361)
General Expenses - Other	R222 948 154	R 270 455 594	R67 613 899	R71 221 820	R625 695	R159 472 463	(R122 912 039)
TOTAL OPERATING EXPENDITURE	**R1 401 629 724**	**R1 475 366 759**	**R368 841 690**	**R358 148 786**	**(R10 692 904)**	**R1 206 541 703**	**(R268 825 056)**

ERWAT has spent 82% (R1 206 541 703/R 1 475 366 759) of the total approved budget. The underspent of the 4th Quarter (1 April to 30 June 2024) of R 10 692 904 is a significant improvement quarter-on-quarter from the R 104 946 291 in Quarter 3 (1 January to 31 March 2024). In addition, there was also an improvement on the Year-to-date underspent from R281 460 619 (Q3) to R268 825 056 (Q4).

The underspending of R 268 825 056 is due to the following reasons:

1. ***Employee costs*** under-expenditure due to vacant positions still in the process of being filled. Recruitment of those vacancies which were planned to occur up to this financial year end (30 June 2024) did not fully materialise.
2. There was an under expenditure on ***Director's remuneration*** as the budget provided for 8 Directors, however only 5 Directors were appointed during the year and by the end of the third quarter only 3 Directors remained due to resignations.
3. ***Depreciation*** under-expenditure as the depreciation figure for June 2024 is based on a provisional amount as the final depreciation run as per the asset register is not yet available.
4. ***Bulk purchases***, load shedding significantly impacted on the electricity charges, which are included in Bulk purchases. Fuel costs to power the generators has increased but not to the extent of the electricity cost budgeted for. Delays in the procurement of essential chemicals due to challenges faced by the manufacturer in the chemical manufacturing process. In addition, the June 2024 bulk costs are not yet available.g
5. ***General expenses***, under expenditure of the protective clothing budget due to challenges experienced with procuring on the awarded irregular expenditure contract. ERWAT received an increase in service charges from JHB Water which was not originally budgeted for and only adjusted for during the Adjustment Budget. As ERWAT maintain a balanced budget, the related expenditure budget of R34,7 Million was allocated to General Expenditure. This resulted in an underspent of 41% as appose to the 28%, had the adjustment not been made.

Table 6: Capital expenditure

Project Detail	Total Original Budget	Total Revised Budget (applicable only after Adjustment)	Budget for Quarter	Actual for Quarter	Variance	Total Budget for the year	Actual for FY (Yr. to date)	Variance for year (Yr. to date)	% Completion
CAPITAL PROJECTS	R127 646 091	R135 616 091	R12 000 000	R56 912 330	R44 912 330	R135 616 091	R133 044 002	(R2 572 089)	98,10%

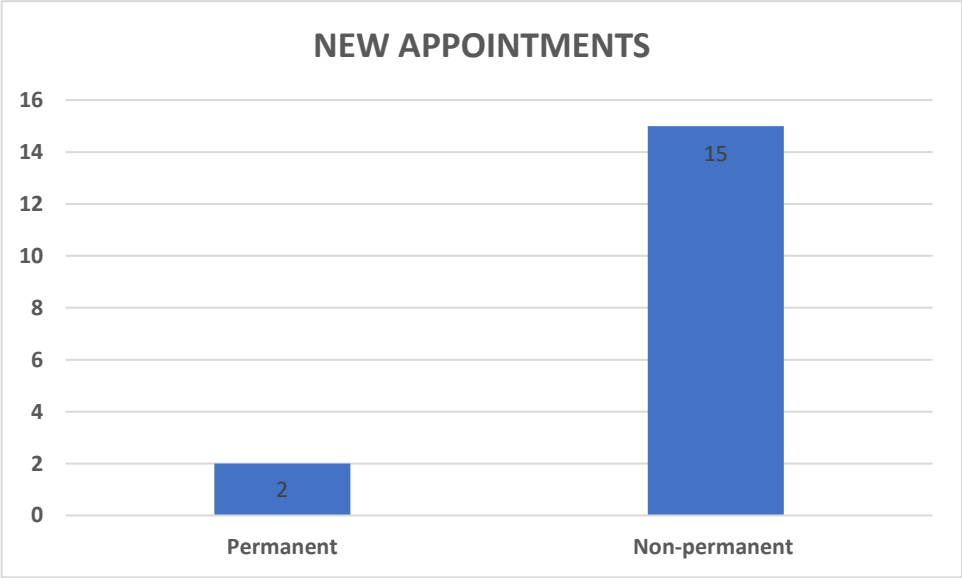
The Year-to-date target is R128,84 million, which is 95% of the total adjusted Capex budget. The actual capital expenditure year-to-date for 2023/24 FY is R 133 million, which represents a 103,22% of the target spend and a spending of 98,10% of the R135 million budget; thus, the target for the year is achieved with a 3,10% positive variance.

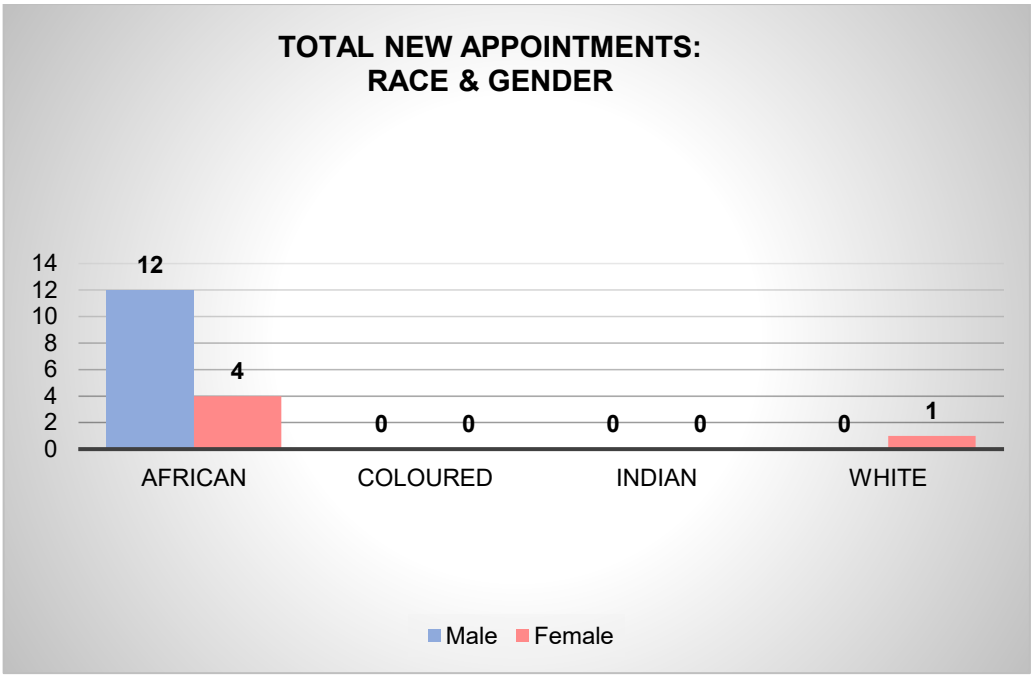
4. Human Resources

4.1 Staff Movements

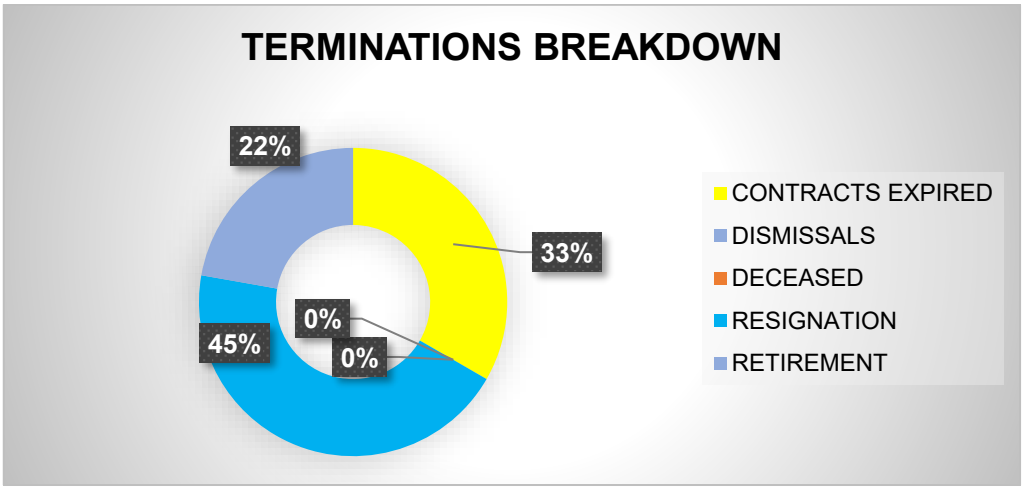
Staff Movements	African		Coloured		Indian		Whites		Total
	Male	Female	Male	Female	Male	Female	Male	Female	
Recruitments	12	4	0	0	0	0	0	1	17
Resignations	2	1	0	0	1	0	0	0	4
Retirements	1	1	0	0	0	0	0	0	2
Contract Expired	1	1	0	0	0	0	0	1	3
Dismissals	0	0	0	0	0	0	0	0	0
Deceased	0	0	0	0	0	0	0	0	0
Promotions	15	5	0	0	0	0	0	0	20

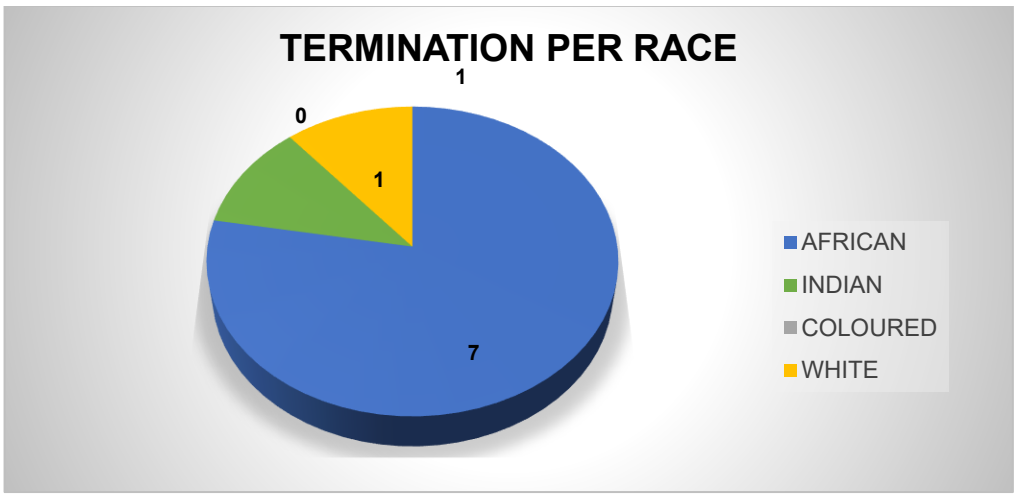
4.1.1 Appointments





4.1.2 Terminations

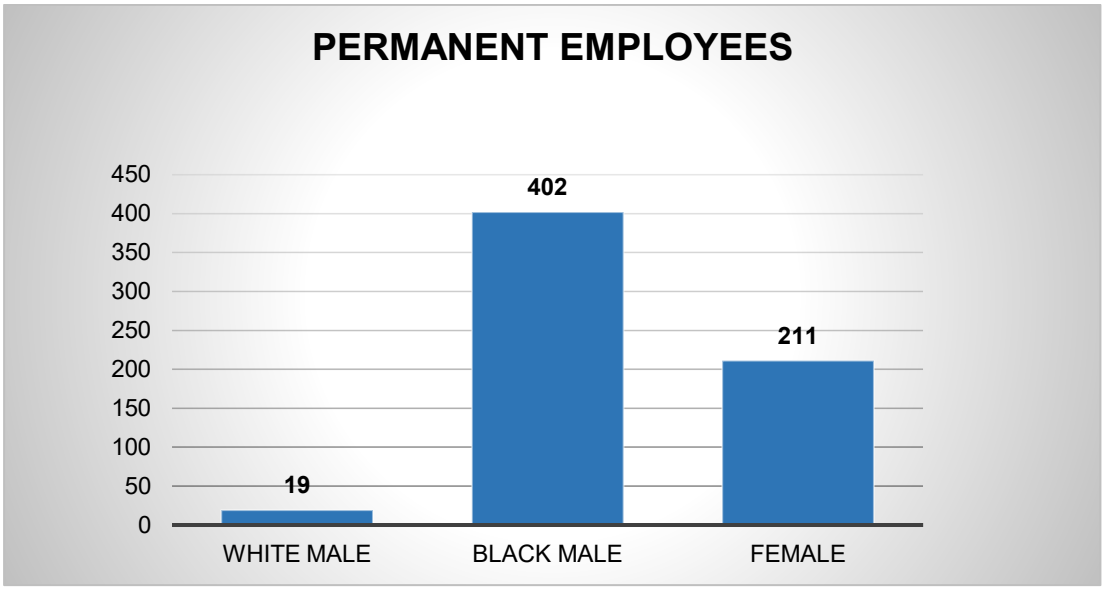




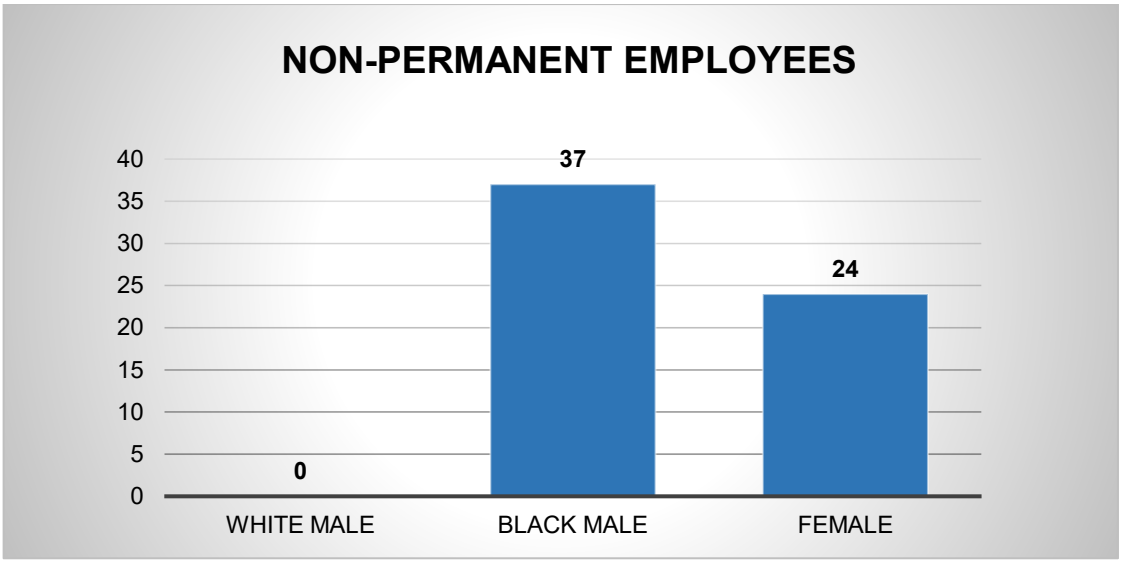
Status Analysis

- During the period under review, 17 employees were appointed.
- During the period under review, 9 employees exited the organisation for the following reasons;
    - 3 contracts expired;
    - 4 employees resigned; and
    - 2 employees went on retirement during the period under review

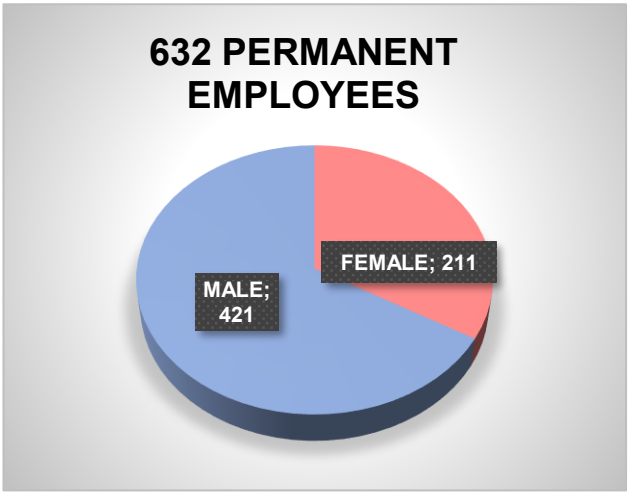
4.2 Employment Equity Demographics

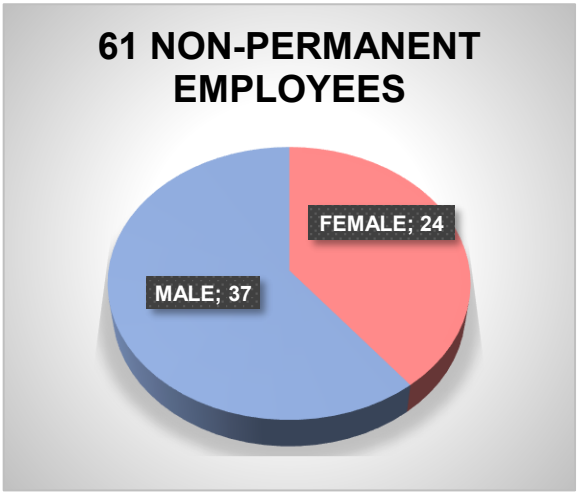


ERWAT has **632** permanent employees.



ERWAT has **61** non-permanent employees.

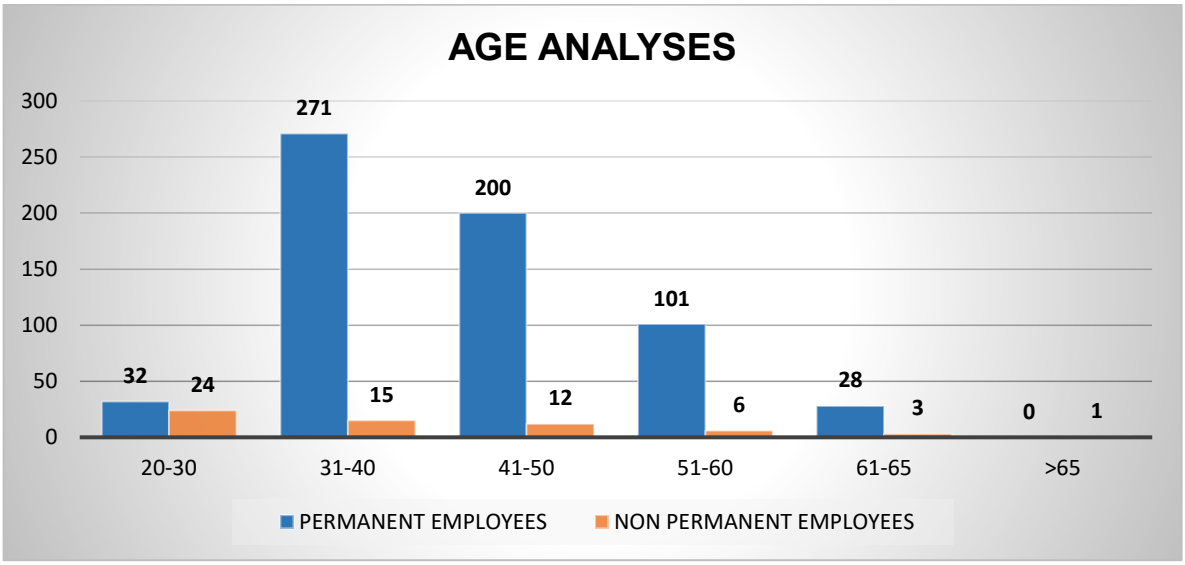




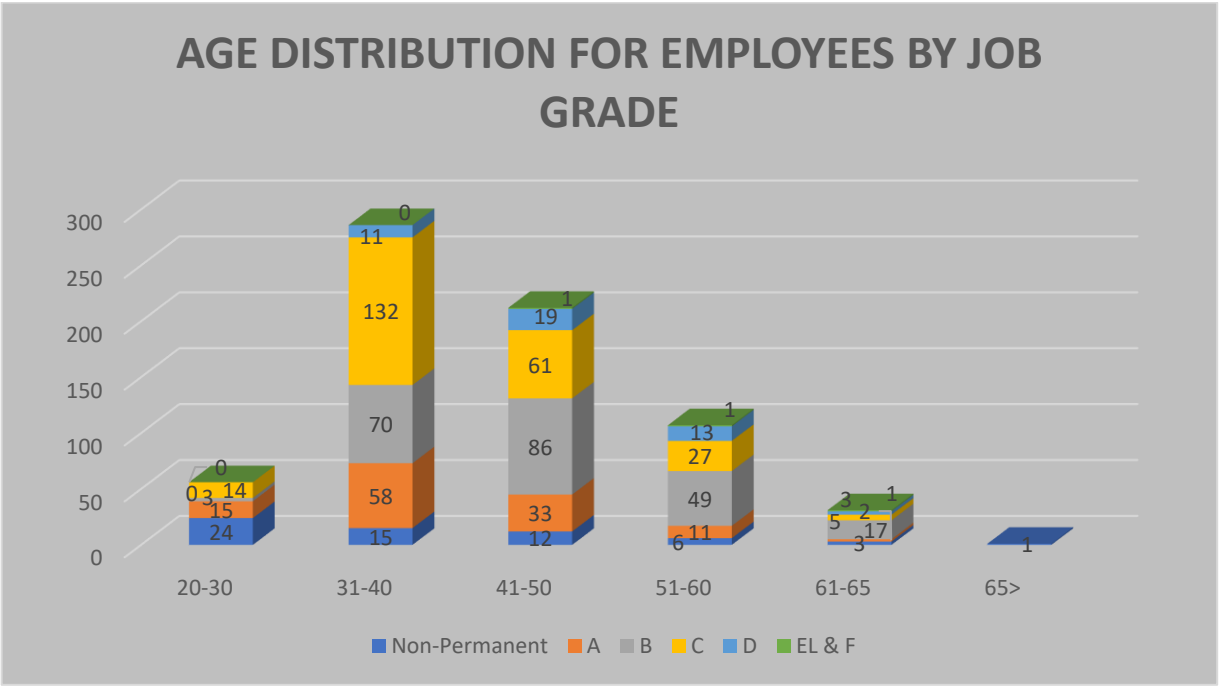
Status Analysis

- The employment demographics of ERWAT as at 30th June 2024 reflects:
    - Females in both permanent and non-permanent positions within ERWAT account for 235 or 34% of total positions filled.
    - Males in both permanent and non-permanent positions within ERWAT account for 458 or 66% of total positions filled.

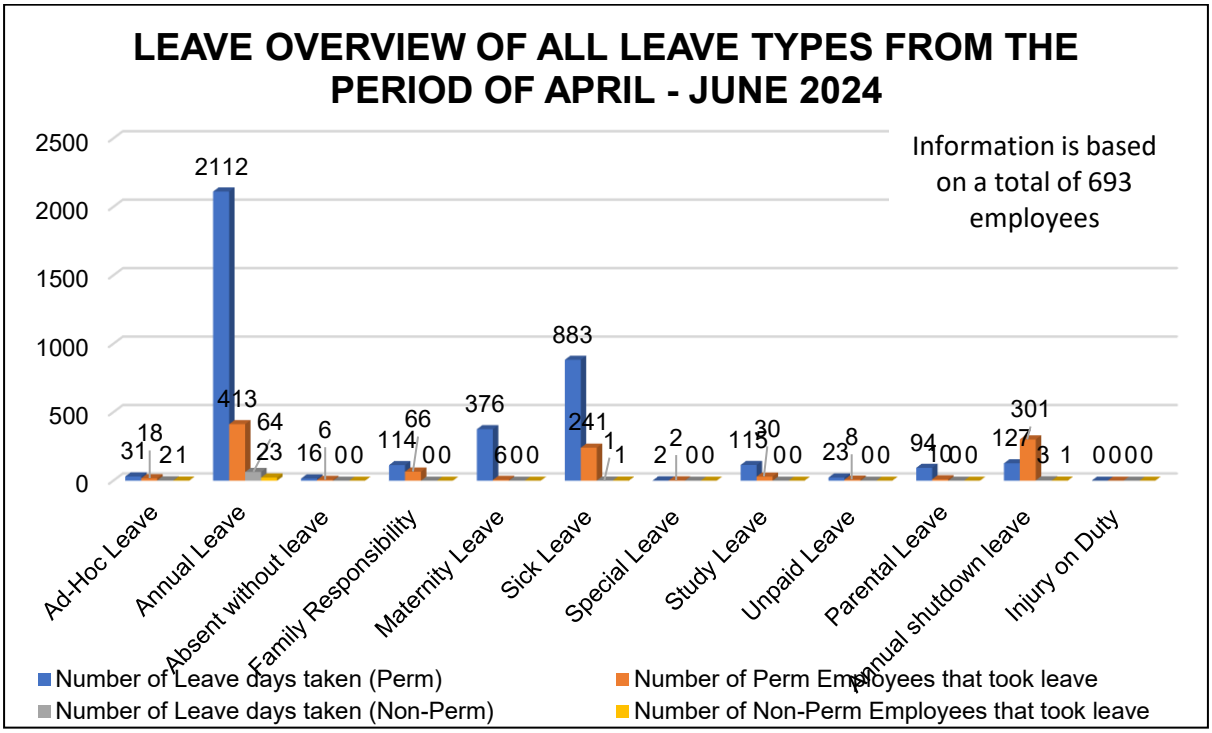
Age Analysis



- Average age as at 06/2024 = 36



4.3 Leave Management



Status Analysis

- Total number of employees who took sick leave during the period under review are 241. The total sick leave taken equates to an approximate minimum of 3.66 days per employees.

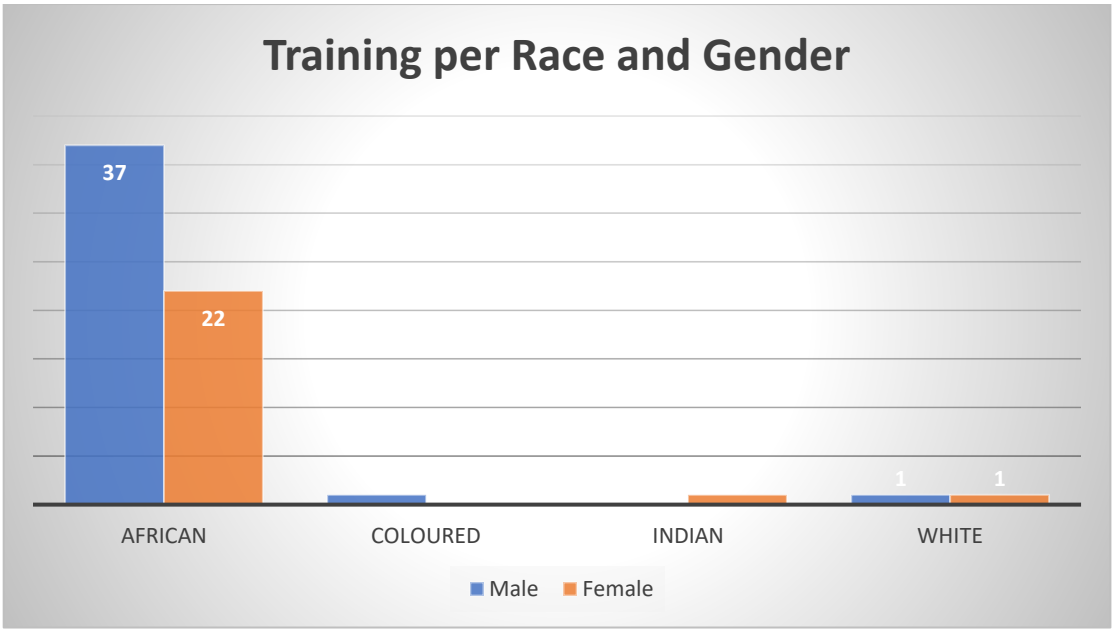
4.4 Overtime Trends

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	YTD
Total Hours	54 671.80	52 522.75	58 145.25	61 068	226 407.80
Total Cost	7 337 932.06	7 311 228.37	8 331 151.25	8 940 473.40	31 920 785.08
Budget	8 167 624.25	8 167 624.25	8 167 624.25	8 167 624.25	32 670 497.00

Overtime is monitored and approved by Management, as per the needs of the various business units.

4.5 Training and Development

The reporting period saw **63 employees** attending various training interventions.



Report on performance in respect of the Skills development plans (narrative).

- 12 Employees were trained on Confined Space Entry Training on the 28 June 2024
- 30 Employees were trained on HezChem Training on the 13-31 May 2024
- 16 Employees were trained on Training Committee Training on the 18-19 June 2024
- 5 Employees were trained on ODETDP Training from 06 May 2024 (on-going)

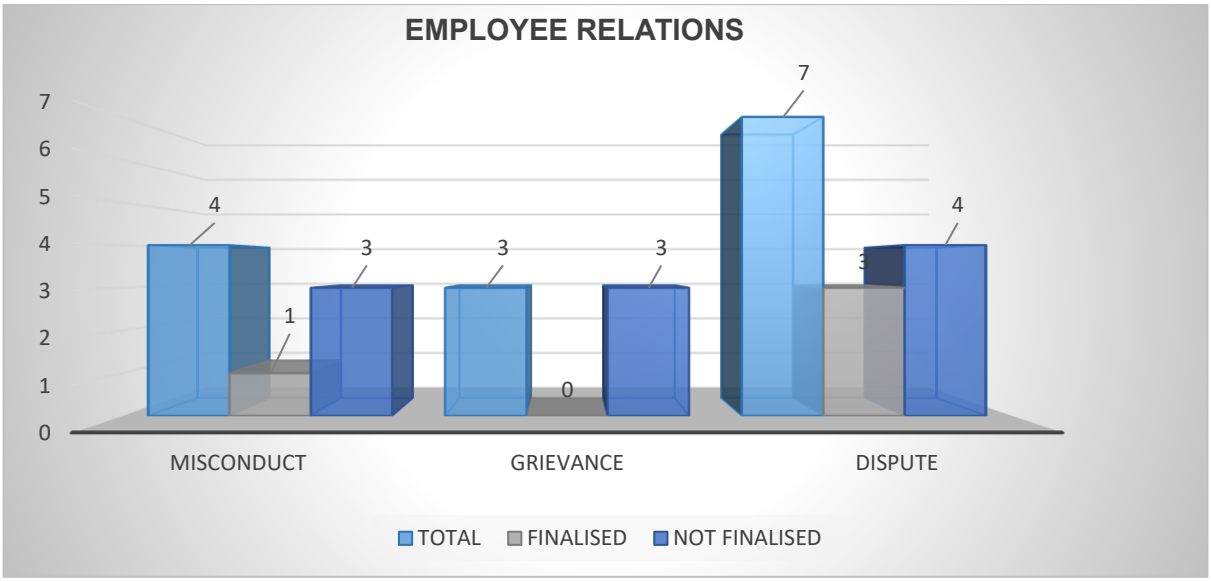
4.6 Performance Management

Status Analysis

Quarter 4 (2023/2024 year-end) evaluation will be completed in Quarter 3 of the 2024/2025 Financial Year.

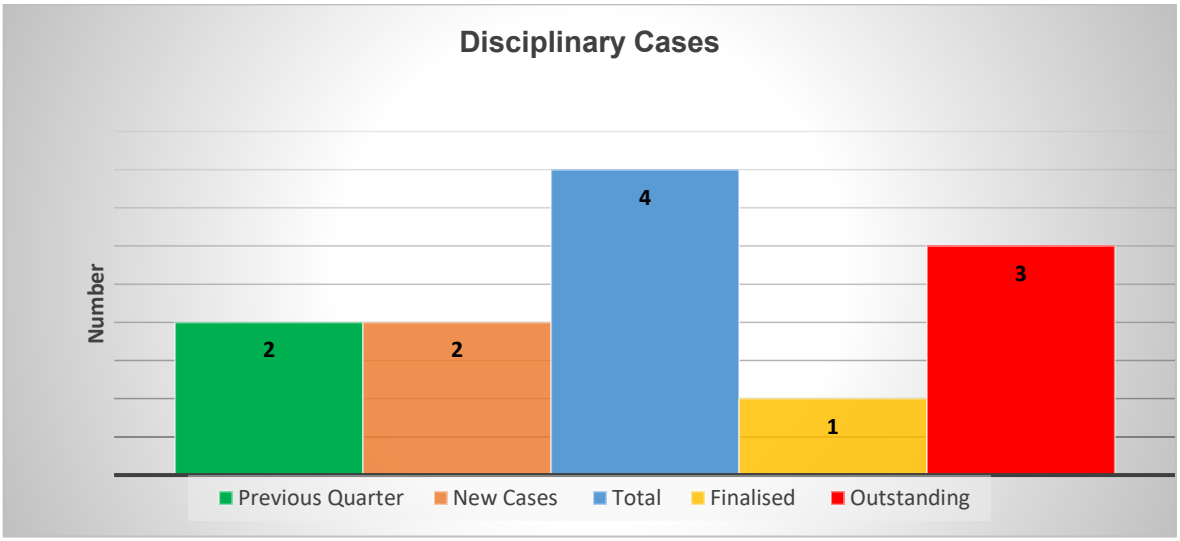
4.7 Employee Relations

The HR department, has received, recorded and administered the following processes for the reporting quarter, below is the statistical data of all cases and the analysis thereof.



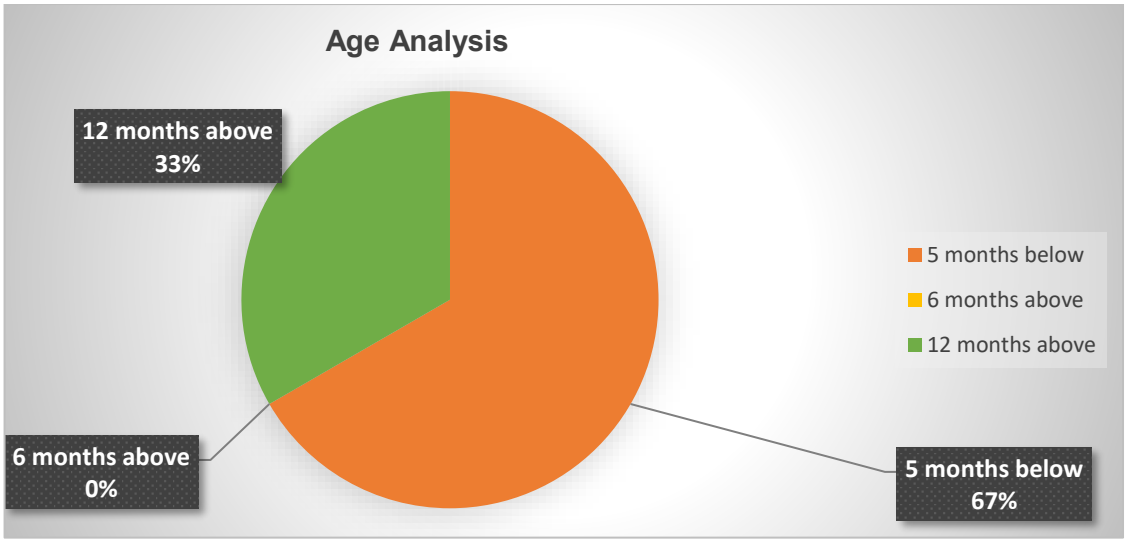
4.7.1. Disciplinary Cases

- Two (2) cases were not concluded in the previous quarter hence brought forward.
- Two (2) new cases were received; the total for all disciplinary cases is four (4).
- Total number of cases finalized is one (1) with a remaining balance of three (3) cases outstanding.



4.7.2. Age Analysis of Disciplinary cases

- The age analysis of the three (3) cases outstanding, 67% are below five (5) months, 0% above six (6) months and 33% are above twelve (12) months old.

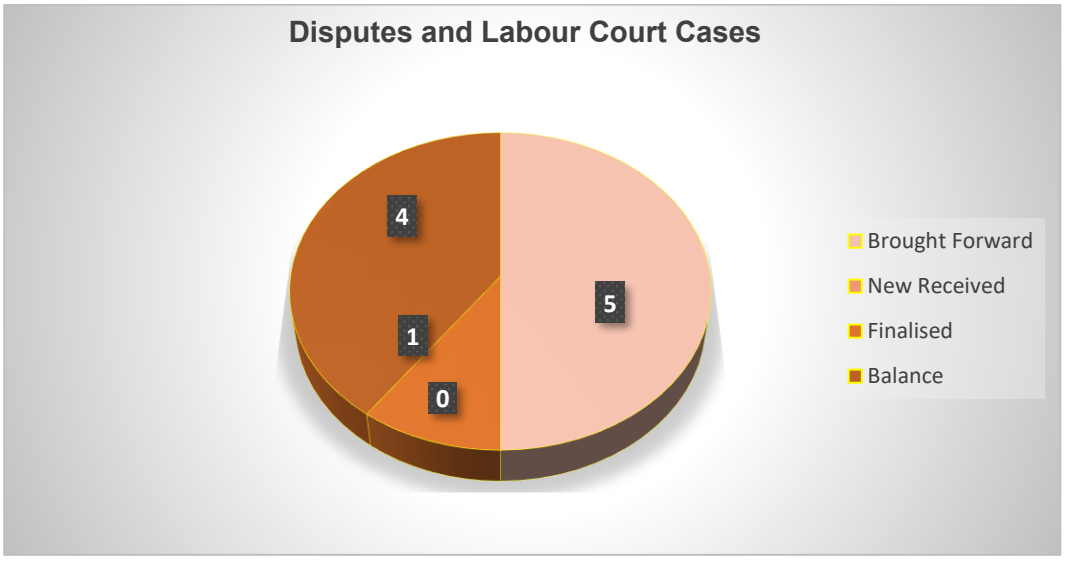


The age analysis of the three (3) outstanding cases is as follows:

- Cases that are less than one (1) month old =0
- Cases that are less than two (2) months old =1
- Cases that are less than three (3) months old =1
- Cases that are more than twelve (12) months old =1

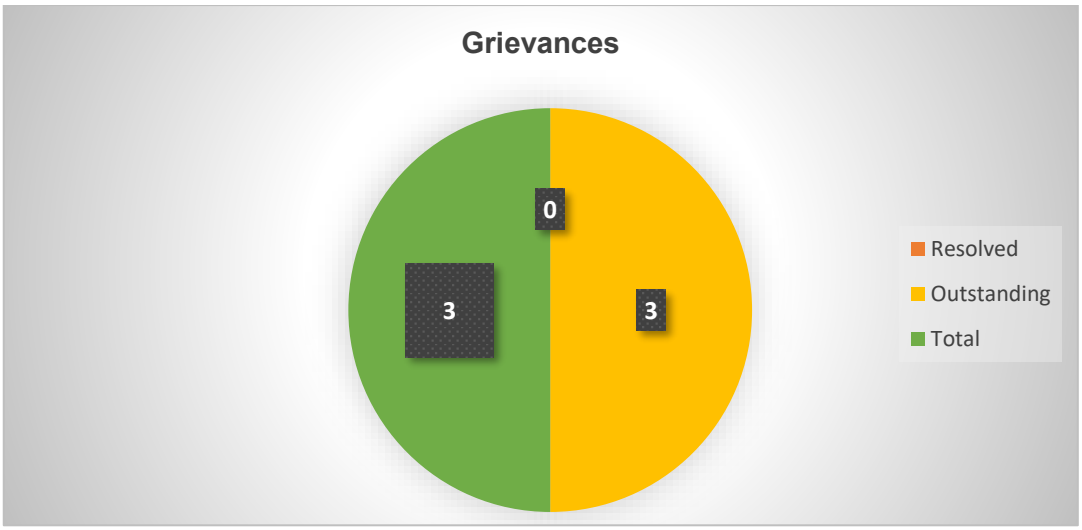
4.7.3. Disputes, Arbitrations & Labour Court Cases

- Total cases brought forward five (5) as at the end of the previous quarter.
- No new cases were received.
- One (1) case has been finalised.
- In respect of disputes at the bargaining Council and Labour Court cases, ERWAT is sitting at four (4) cases.
- The above case is pending adjudication at the appropriate forums.



The graph illustrates the statistical data of disputes at the Bargaining Council and Labour Court, as at the end of Q3, with four (4) cases still pending.

4.7.4. Grievances



Total grievances outstanding is zero (0).

4.7.5. Suspensions

There are no suspensions for the period under review.

4.8 Percentage of Salary to OPEX.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	YTD – Actual
Total Salary Cost	104 583 197.00	107 362 055.00	114 416 351.00	103 203 541.00	**429 565 144.00**
Total Opex	234 879 393.49	289 421 140.66	324 092 382.85	358 148 786.00	**1 206 541 703.00**
% of Salary to Opex	45%	37%	35%	29%	**36%**

4.9 Employee Occupational Health and Wellness

ERWAT Occupational Health Services offers Employee Wellness Programme as follows:

a) ERWAT has 46 Wellness Champions (WC) that are placed on all 19 Plants including the Laboratory and Head Office.

b) The core function of the WC is to assist the Occupational Health Nurse, in identifying any health and wellness concerns amongst employees, monitor absenteeism; they also provide health education in a form of frequently scheduled meetings with employees on site.

c) During the period under review:
- 10 routine medical examinations and 5 exit medical examinations (exiting due to 1 - retirement & 4 - resigned) were conducted for employees.

- 11 health and safety meetings were attended
- 8 employees received Psychotherapy counselling sessions offered by ERWAT Occupational Health Services
- 2 wellness programmes were conducted

Issues related to the management of HIV/AIDS in the workplace

ERWAT Occupational Health Services in conjunction with Employee Wellness service providers, encourage employees to test for HIV/AIDS and TB, where appropriate according to the results, employees are managed further either by receiving the appropriate treatment and follow-ups are done.

5. Procurement Practices, Job Creation and Mainstreaming

1. BEE spend in respect of supplier and contractor (PDIs) – No new tenders/contracts were concluded during Quarter 4.

2. Job creation is encouraged by including a provision for locally situated bidders within the set criteria in the functionality section where it could be broken down further where bidders could be scored for indicating in the supporting documents and tables their intention to employ new staff from the areas, they will be operating from in the event that they are awarded a tender. This is however included on a case-by-case basis where it is practically implementable. No new tenders/contracts were concluded during Quarter 4.

3. ERWAT is not in a position to utilise the EPWP program due to being and Entity and cannot apply directly to National Treasury for this grant through the Division of Revenue Act. Going forward, ERWAT will during its budget cycle identify potential projects where the EPWP can be included and utilised. ERWAT will require access and training on the respective EPWP portal for registration of projects and reporting.

4. GEYODI: No new tenders/contracts were concluded during Quarter 4.

6. Risk Management

Risk assessment provides an assessment of the relevant and critical risks through a classification and rating system, and mitigating actions and KPIs and targets that can be incorporated in the Balanced Scorecard. The reporting on the risk management into the quarterly reporting process is to ensure that the key risks that may prevent the achievement of the department's strategy are systematically identified and mitigating strategies and actions developed.

The identified risks are provided below.

Risk Assessment

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
ERW1	Inadequate Infrastructure to treat wastewater	CF1.1	Inadequate integrated planning between CoE and ERWAT	CF1.1	Service Delivery Agreement between the CoE and ERWAT	High	RAP 1.1	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
		CF1.2	Lack of participation in key decision-making forums established by the City such as Capital Investment Forum	CF1.2	City Committees (MMC Senior Management meetings, Technical Cluster)		RAP1.2	Request the H.O.D of the City Planning to invite ERWAT to the Capital Investment Forum meeting	Action plan completed.	Action plan completed.
		CF1.3	'a) Outdated, aging and inadequate infrastructure to treat high strength industrial effluent due to lack of budget to implement capacity related projects. Current Capacity (14 WCWs operating above 100% capacity, 3WCWs operating at 80+ to 100% and only 2 WCWs operating below 80%)	CC1.3.1	Grant Funding (Urban settlement development grant)		RAP1.3.1	Investigate other potential sources of funding for the upgrading of infrastructure to increase capacity- Go out into the market to source/borrow additional funding for expansion	In progress - Both DFIs have expressed interest in supporting ERWAT's sustainable initiatives projects and acknowledged the alignment of ERWAT's initiative with their funding priorities. The requested amount is R750 million, which will be utilized for the implementation of Solar Panels and Capacity expansion project. The requested funds will be allocated as follows: • R350 Million for the Solar Panel project • R400 Million for the Capacity upgrade project. "	Action plan completed. The response from DFI has since been received and both yielded negative response. ERWAT to research and initiate new processes in the first quarter of 2024/2025
				CC1.3.2	'MTERF Capex Budget Allocation 2023/2024		RAP1.3.2.1	Implementation the 2023/2024 Capex plan	2023/2024FY Approved Budget is R127,6 million Quarter 2 Spending 40,08% = (R51.15 million) Q2 target 60%= R 76,5 million Q2 Variance of -19.92% (Negative Variance) 2023/2024FY Adjusted Budget	Action plan completed Target achieved -/+ 98,10% (R128 679,30) of R133 066 288,29 budget

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
									is R135,6 million Spending to date: R66 172 009.16 (48.8%) of R135,6 million (22 Mar 2024)	
							RAP1. 3.2.2	Plant Optimisation Modelling	In Progress - The Facility Development Plans for Olifantsfontein WCW, Hartebeestfontein WCW and Waterval WCW was presented to the Executive Committee meeting of the 12/03/2024. The Olifantsfontein WCW report was presented and the other two were deferred to a later date to be confirmed by the Office of the Managing Director.	In Progress - The Facility Development Plans for Olifantsfontein WCW, Hartebeestfontein WCW and Waterval WCW was presented to the Executive Committee meeting of the 12/03/2024. The Olifantsfontein WCW report was presented and the other two were deferred to a later date to be confirmed by the Office of the Managing Director.-there was no movement in quarter 4.
				CC1. 3.3	Development & Engineering Contribution Policy		RAP1. 3.3	Review the Development & Engineering Contribution Policy to include a clause on upfront payment	In progress - CoE Development Contribution Policy was approved in March 2023. ERWAT is in process to align the ERWAT DC policy with COE. For Financial Year 2023-2024 the ERWAT DC engineering rate charge has increased to R18 009.20 (R/Kl/day) from R13 526.76 (R/Kl/day) due to the assessment & valuation conducted by COE. The amended Policy will be tabled to the board before the end of the current financial year.	Action plan completed. The updated Development Contribution Policy was tabled and approved at the board meeting of 7 June 2024.
				CC1. 3.4	Wastewater conveyance and treatment systems		RAP1. 3.4	Five (5) Turnkey Capital Project – 50 Year Master	1. Waterval - Refurbishment and Expansion for an additional 250 MLD: Stage 1 Completed &	In progress – 1. Waterval - Refurbishment and Expansion for an additional 250

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
					regionalisation and 50-year master plan			Plan through the City (progress report) 1. Watervaal 2. Olifantsfontein 3. Vlaakplaats 4. Anchor 5. Welgedacht	Stage 2 in progress. 2. Olifantsfontein - Refurbish and upgrade from the current regraded capacity of 65 MLD to 105 MLD and expansion for and additional 50 MLD: Stage 1 Completed & Stage 2 in progress. 3. Vlakplaats - Refurbish and upgrade from the current regraded capacity of 55 MLD to 183 MLD: Stage 1 Completed, awaiting approval to proceed to Stage 2. 4. Ancor - Refurbish and upgrade from the current regraded capacity of 15 MLD to 35 MLD and expansion for and additional 15 MLD: Stage 1 Completed & Stage 2 in progress. 5. Welgedacht - Refurbishment and Expansion for an additional 60 MLD: Stage 1 Completed & Stage 2 Completed, Stage 3 in progress.2. Olifantsfontein - Refurbish and upgrade from the current regraded capacity of 65 MLD to 105 MLD and expansion for and additional 50 MLD: Stage 1 Completed & Stage 2 in progress.	MLD: Stage 1 Completed & Stage 2 in progress. 2. Olifantsfontein - Refurbish and upgrade from the current regraded capacity of 65 MLD to 105 MLD and expansion for an additional 50 MLD: Stage 1 Completed & Stage 2 in progress. 3. Vlakplaats - Refurbish and upgrade from the current regraded capacity of 55 MLD to 183 MLD: Stage 1 Completed, awaiting approval to proceed to Stage 2. 4. Ancor - Refurbish and upgrade from the current regraded capacity of 15 MLD to 35 MLD and expansion for an additional 15 MLD: Stage 1 Completed & Stage 2 in progress. 5. Welgedacht - Refurbishment and Expansion for an additional 60 MLD: Stage 1 Completed & Stage 2 Completed, Stage 3 in progress.
			'b) Outdated, aging and inadequate technology to treat high strength industrial effluent due	CC1. 3.5	Wastewater Risk Abatement Plans		RAP1. 3.5	Review the Wastewater Risk Abatement Plans every 2nd year (2023)	Risk assessments have been completed for all WCW. The draft site-specific Wastewater Risk Abatement Plans for each WCW are are being finalised.	In progress- the WRAPS still to be signed off .

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
			to lack of budget to implement newer technologies (OPS).						Drfat WWRAP to be circulated for comment by end April 2024.	
				CC1.3.6	Wastewater Research and Development Program		RAP1.3.6	Organic testing of industrial effluent	In progress - Organic profiling has been completed on 614 industrial source scans (341 for North East Region and 273 for South West Region). Industries exceeding by laws limits are being screened monthly.	Action plan completed Organic profiling has been completed on 645 industrial source scans (357 for North East Region and 288 for South West Region). Industries exceeding by laws limits are being screened monthly.
				CC1.3.7	CoE Schedule A Bylaws Analysis of samples by ERWAT		RAP1.3.7	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
				CC1.3.8	Incident management protocol (IMP).		RAP1.3.8	Tracking of incidents and on a quarterly to assist in planning to build operational resilience and improving compliance	Q3 - 1220 Job Cards were loaded on the CMMS and a Total of 695 were Closed. Translated to 57%	In progress-1715 Job Cards were loaded on the CMMS and a Total of 1032 were Closed. Translated to 60%
		CF1.4	'Asset Care Plans inadequately resourced to fully implementation maintenance plans leading to unavailability of equipment	CC1.4.1	Asset Management Policy & Asset Management Strategy		RAP1.4.1	Review the Asset Management Policy and Strategy	Action plan completed	Action plan completed
				CC1.4.2	Asset Care Plans, limited available budget		RAP1.4.2	Implementation of the Maintenance Plan for 2023/2024	The expenditure target is as follows for maintenance Q3 Target – 75% The expenditure year to date is R 97 066 499,71 in Quarter 3 against the total approved budget of R 157 079 013,00.	Action plan completed-The expenditure target is as follows for maintenance Q4 Target – 95% The expenditure year to date is R 169 176 363,98 in Quarter 4 against the total approved budget of R 174 903 541,00, resulting in 97% of budget spent.
				CC1.4.3	Implementation of the 2022/2023 Maintenance Plan					

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
		CF1.5	Delays in bringing back equipment to services due to long lead time of spares of spares sourced overseas and inadequate service master contracts	CC1. 5.1	ERWAT Operational Procurement Plan		RAP1. 5.1	Create a Centralised Spares Store to reduce down-time and increase efficiency	The Maintenance Department is in weekly discussions with Finance, Scientific Services and Operations to establish 6 satellite stores to service all four regions.	1.The inadequacy in relation to service master contracts is addressed by adding addition contracts based on requirements on continuous bases. 2.The Creation of a centralises store to reduce downtime and increase efficiencies will implementation in phases listed below spread over three financial periods FY 2024/25 – 2026/27. I. Phase 1 This phase will comprise of accessing the requirement and resources needed and which stake holders needs to be involved. ii. Phase 2 This phase will comprise of developing a conceptual management process that includes the following: All the required human, software, and other requirement to comply to legislative, financial and maintenance requirements. iii. Phase 3 This phase will comprise of finalizing the management process. The final management process with be the bases of developing physical requirement that includes buildings and other resources. iv. Phase 4

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
										This phase all the elements will be combined into project scope that can be costed. The costed project scope will be used to develop a tender document that can be taken to market. v. Phase 5 This final phase will be the implantation of the project.
				CC1.5.2	'Equipment Operating Manuals		RAP1.5.2	Develop/Review the Maintenance & Operations Standard Operating Procedures	The following Standard Operating Procedures were drafted and still to be signed off 1. Draft MS-SOP-SA-003 Incident Management Procedure (002) 2. Draft MS-SOP-SA-003.1 Incident CLASSIFICATION GUIDELINE 3. Incident Notification and Reporting Forms. 4. Process Flow Incident Reporting	Action plan completed Procedures were finalised and signed off. 1. MS-SOP-SA-003 Incident Management Procedure (002) 2. Draft MS-SOP-SA-003.1 Incident CLASSIFICATION GUIDELINE 3. Incident Notification and Reporting Forms. 4. Process Flow Incident Reporting
		CF1.6	Storm water ingress contributing to the water levels in the plant	CC1.6	No current control - Storm water is managed at City level		RAP1.6	The entity has no control over storm water ingress it is within the boundary of the City	There will be no reporting for the period under review.	There will be no reporting for the period under review.
		CF1.7	Rapid population and industrial growth within CoE	CC1.7	Wastewater conveyance and treatment systems regionalisation and 50-year master plan		RAP1.7	Request additional Capex funding to implement capacity related project	In progress - Both DFIs have expressed interest in supporting ERWAT's sustainable initiatives projects and acknowledged the alignment of ERWAT's initiative with their funding priorities. The requested amount is R750 million, which will be utilized for the implementation of Solar Panels and Capacity expansion project. The requested funds will	Action plan completed. The updated Development Contribution Policy was tabled and approved at the board meeting of 7 June 2024.

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
									be allocated as follows: • R350 Million for the Solar Panel project • R400 Million for the Capacity upgrade project. "	
ERW2	Inadequate preparedness in the event of an emergency/natural disaster.	CF2.1	Some plants of the 19 Wastewater Care Works do not have wastewater bypassing systems and emergency dams	CC2.1	Water Bypass System for some Wastewater Care Works and emergency dams	High	RAP2.1	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
		CF2.2	Some of the Infrastructure built on dolomitic areas	CC2.2	Geo tech studies conducted(annually upon availability of funds)		RAP2.2	Conduct Geotechnical studies	Action plan completed.	Action plan completed.
		CF2.3	Inadequate Business Continuity Management Program	CC2.3.1	Business Continuity Management Policy		RAP2.3.1	Develop an ERWAT Disaster Management Framework	In progress - ERWAT Disaster Management Framework is still under development.	In progress – ERWAT Disaster Management Framework is still under development. The BCM Policy reviewed to guide the Framework
				CC2.3.2(a)	Business Continuity Management Risk Assessments for Water Care Works and Support Services		RAP2.3.2	Review of Business Recovery Plans for the Core Business	Action plan completed	Action plan completed.
				CC2.3.2(b)	BCM Business Impact Analysis					
				CC2.3.2(c)	Business Recovery Plans					
				CC2.3.3	BCM Steering Committee		RAP2.3.3(a)	Raise awareness on Business Continuity Management through quarterly news flash	The next Flash will be out in April	Action plan completed. The BCM Flash issued in June.

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
							RAP2. 3.3(b)	Training of BCM Co-ordinators	The List of Co-ordinators being updated.	In progress- Training to commence in the 2024/2025 Financial Year
				CC2. 3.4	BCM Infrastructure Condition Assessments		RAP2. 3.4	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
				CC2. 3.5	ICT Disaster Recovery Plan		RAP2. 3.5	Move ERWAT Disaster Recovery Site to a location far from Head Office in line with best practice	The Tender for Disaster Recovery site relocation was advertised on the 25th January 2024.	In progress- CoE has indicated that ERWAT postpone the datacentre hosting as the municipality is assessing whether they are able to provide the same service to ERWAT.
ERW3	Potential loss of the ISO 17025 accreditation	CF3.1	Aging instrumentation, scarcity of spares and discontinuation of instruments could result in loss of the approved testing methods impacting on service delivery both internally and externally	CC3. 1 (a)	Scheduled maintenance in accordance with ERWAT's Instrumentation maintenance Plan	High	RAP3. 1(a)	Scheduled Instrumentation Maintenance Plan	Action plan completed. Instrumentation serviced /calibrated as per schedule	Action plan completed.
				CC3. 1 (b)	Use of obsolete scrapped equipment spares		RAP3. 1(b)	Capex 2 items: 2 x Flow injection analysers GC-MS equipment	Nutrient analysers specifications were delayed. Tender will go to BSC in March 24. GC-MS Purge and Trap instrument tender closed 1 March 2024. At BEC for evaluation.	In progress-The Nutrient Analysers will be purchased in the new financial year as they are imported items and take 3-4 months for delivery. GC-MS Purge and Trap instrument at BAC for recommendation.
		CF3.2	Lack of budget for planned maintenance of the laboratory building	CC3. 2	Ad-hoc minor maintenance by the Maintenance Department on a daily, weekly and monthly basis.		RAP3. 2	Implementation of building maintenance plans including power supply loads, building/ roof leaks, etc.	Bid document submitted for consideration by the BSC in late March 2024. Bid advertisement envisaged in April 2024	In progress-Bid served at BSC in the week of 24 June and referred back with minor comments. Bid advertisement envisaged in July 2024
		CF3.3	Lack of control of the laboratory internal environmental	CC3. 3 (a)	UPS at the Laboratory on certain instruments		RAP3. 3	Develop Head Office Maintenance Plan (replacement of UPS	Action plan completed	Action plan completed

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
			temperature resulting in		and central generator at Head office			batteries and scheduled maintenance on the batteries)	The UPS batteries were replaced in the month of February.	The UPS batteries were replaced in the month of February.
		CF3.4	Power and water supply disruption due to load shedding and unstable water supply	CF3.4	Storage tanks for de-ionised water.		RAP3.4	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
ERW4	Inadequate preparedness in the event of total grid collapse resulting in extended blackouts	CF4.1	Load shedding challenges facing the South African government	CC4.1	No current control	High	RAP4.1	No further action plan due to the network configuration	There will be no reporting for the period under review.	There will be no reporting for the period under review.
		CF4.2	Thirty-Six (36) Gensets to power critical processes and UPS for the Laboratory	CC4.2	Gensets and UPS for a few		RAP4.2	Do a feasibility study on alternative energy such as Hydropower, Solar etc	In progress - Solar Polar has been identified as the alternative energy for ERWAT. An application for funding has been made and • R350 Million will be allocated for the Solar Panel project	Action plan completed- The response from DFI has since been received and both yielded negative response. ERWAT will initiate new processes in the first quarter of 2024/2025
		CF4.3	Gen-sets do not generate enough to power to operate the entire wastewater care works by its design				RAP4.3(a)	Repair all non-operational Gensets	The tender to repair all non-operational generators Generator tender contract at Bid Adjudication Committee stage	**In progress-** The Tender for the Repair of Gensets awarded.
							RAP4.3(b)	Procurement and installation of additional Gensets to increase the fleet	Out of 9 Generators *7 - were installed, commitioned and handed over *2 - FAT done and they are ready for installation. *All concrete foundation slaps have been completed *All cables has been procured and to be delivered to Site upon installation to avoid theft	**Action plan completed** 12 of 12 Planned generators were installed and commissioned as per 2023/2024 plan.

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
									*1 - the control panel is being manufactured await FAT date	
ERW5	Inability to spend in accordance with the allocated budget	CF5.1	High vacancy rate due to the backlog caused by the previous monotorium	CC5.1	ERWAT 2023/24 Recruitment Plan	Med	RAP5.1	Implementation of the 2023/24 recruitment plan	126 ERWAT Employees have been trained on Chlorine Handling Training 5 Have been Trained on Emotional Intelligence 48 Employees have been enrolled for NQF Level 3 in Water and Wastewater Treatment Process Operation 24 Employees have been enrolled for NQF Level 4 in Water and Wastewater Treatment Process Supervision Operation	Positions filled in Q4: 20 Process Controller Manager: SCM Junior Accountant District Manager DD4 Specialist: Communications Positions at offer stage: Lab Scientist Grade 1 & Grade 2 2 Plant Managers Specialist: Training & Development Positions in progress: 2 Instrumentation Mechanicians 5 Electricians 8 Fitters
		CF5.2	Decline in bulk purchases; Electricity costs due to load shedding	CC5.2	ERWAT Procurement Plan		RAP5.2	Enhance the process by having additional chemical suppliers (Ops)	In progress- Tender was a non-award, will review the tender specifications and submit to BSC in Jan. 2024. Tender under advertivesement due in April 2024	In progress- Tender was a non-award, will review the tender specifications and submit to BSC in Jan. 2024. New tender for supply, delivery, and offloading of wastewater treatment chemicals is on advert stage, closing on the 28th June 2024
		CF5.3	Unavailability of chemicals in the market (Unavailability of fuel)	CC5.3	Variance report (budget vs actual spent)		RAP5.3	Enhance the budget variance process by sending variance reports to user departments	Budget variance reports are sent to user departments monthly	Action plan completed. Budget variance reports are sent to user departments monthly.
		CF5.4	Non award of tenders	CC5.4	Bid Specification Committee in place		RAP5.4	User department to ensure that they conduct a proper market research analysis and provide proof thereof	Action plan completed	Action plan completed

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
		CF5.5	Poor Contracts Management	CC5. 5.1	Contracts Management Policy		RAP5. 5.1	Implementation of the Contracts Management policy (reporting and reviewing of the contract register)	Action plan completed.	Action plan completed.
				CC5. 5.2	Contractor performance assessments		RAP5. 5.2	Report(monthly) on monitoring of contractor performance	Reporting on monitoring of contracts performance takes place during the Executive Committee meetings. The last report was tabled on 13 March 2024.	Action plan completed There has been a great improvement in the submission of Performance evaluations. The process to be improved in the new financial year and improve on compliance. Contracts Register is up to date. The actual performance report will be incorporated in the 2025 FY.
				CC5. 5.3	Contracts register					
		CF5.6	Delays in the processing of purchase orders	CC5. 6.1	Adherence to SOP14 Turnaround time and control administrative measures		RAP5. 6	SCM workshop on procurement of products and services(quarterly)	In progress - No workshop was conducted during the Quarter 3 period due to legislation being promulgated and internal processes are currently being reviewed to address such. Workshops to be conducted during the Quarter 4 period.	Action plan completed A workshop on revised thresholds was presented to the business. As this was the new way of doing business, we had to check against splitting, and duplication of similar works. This led to some delays, and we are now sorted. Budget confirmation is conducted prior to issuing POs The checklist for contract related POs is in place.
				CC5. 6.2	Confirmation of budget prior to processing of purchase orders					
				CC5. 6.3	SCM checklist for approval/contracts purchase orders in place					
ERW6	Inadequate revenue generation to supplement the approved budget	CF6.1	Inability to secure new business due to overhead costs that are higher than that of competitors. (Such as Manpower, laboratory, etc.)	CC6. 1.1	Pricing Model. (Scientific Services Price Schedule)	Med	RAP6. 1.1	Review of the Pricing Model.	The review of the Pricing Model is depended on the finalisation of the Financial Model by Finance.	The review of the Pricing Model is depended on the finalisation of the Financial Model by Finance.
				CC6. 1.2	Manually Costing Per Project.		RAP6. 1.2	The current mitigation controls are deemed to be adequate. Therefore, no	There will be no reporting for the period under review.	There will be no reporting for the period under review.

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
								further risk action plan to be implemented.		
				CC6. 1.3	Quarterly Business reviews		RAP6. 1.3	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
				CC6. 1.4	Sourcing clients from the networks that ERCOM has built over the years		RAP6. 1.4	Development of sales strategy and market penetration plan	The Re-advertised is at BEC stage	Action plan completed
		CF6.2	Loss of existing business through insourcing and companies closing down or reducing costs	CC6. 2	Customer Satisfaction Survey		RAP6. 2	Appointment of an independent service provider to conduct annual customer survey	The project is still at BSC stage	In progress - Tender at BEC stage
		CF6.3	Inability to retain clients because there is no flexibility in price increment	CC6. 3	Revised Commercial Business Policy		RAP6. 3	Review of the Commercial Business Policy to include continuous improvement of policy conditions	Action plan completed	Action plan completed
		CF6.4	Business requirements limiting of entry to new market (Level of BBB-EE Compliance)	CC6. 4	BBB-EE Task team in place		RAP6. 4	Planning of all activities related to the requirements of the BBB-EE score card Annual review of BBB EE Compliance.	Service Provider has been appointed and issued with a Purchase Order .Kick-off meeting with service provider is scheduled for the week of 08 April'24.	In progress - Verification is in progress. The verification specialist will be at Erwat offices on 04 July 2024 to conduct a sampling analysis and will then interview selected ERWAT staff.
		CF6.5	Expiry of existing customer contracts/non-renewal of expired contracts	CC6. 5	Negotiations are scheduled prior to expiry date		RAP6. 5	Develop a tracking sheet for early negotiation of contracts	Action plan completed.	Action plan completed
		CF6.6	Long lead times from the city to initiate and implement PPP projects	CC6. 6	No current control		RAP6. 6	Tracking of the progress of the projects approvals	A tracking sheet with the expiration dates of each active contract was created showing progress on re-negotiations.	Action Plan Completed

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
ERW7	Failure to meet capital expenditure set target	CF7.1	Delays in Supply Chain processes. (Including the effect of the Pandemic)- IPAP	CC7. 1.1	Annual CAPEX Plan with projected cash flows for each project	Med	RAP7. 1.1	Implementation of the 2023-2024 CAPEX Plan	2023/2024FY Approved Budget is R127,6 million Quarter 2 Spending 40,08% = (R51.15 million) Q2 target 60%= R 76,5 million Q2 Variance of -19.92% (Negative Variance) 2023/2024FY Adjusted Budget is R135,6 million Spending to date: R66 172 009.16 (48.8%) of R135,6 million (22 Mar 2024)	Action plan completed Target achieved -/+ 98,10% (R128 679,30) of R133 066 288,29 budget
				CC7. 1.2	Standard Operating Procedure 14 Turn Around Time		RAP7. 1.2	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
		CF7.2	Late payment of contractors due to USDG Invoices being paid late	CC7. 2.1	Usage of ERWAT funds to pay contractors		RAP7. 2.1	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
				CC7. 2.2	Constant communication with CoE		RAP7. 2.2	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
		CF7.3	Members of the community and the local business forums demanding to be sub-contracted in the project.	CC7. 3	Supply Chain Management Policy (Sub-contracting)		RAP7. 3	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
		CF7.4	Potential disruptions such as Contractor employees going on strike and/or any other disruption caused by contractor	CC7.4	Service Level Agreement		RAP7.4	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
		CF7.5	Denial of contractor's access to ERWAT sites due to labour unrest	CC7.5	Disciplinary Procedure		RAP7.5	Disciplinary processes to be taken for illegal strikes as and when they arise	There was no illegal strikes in quarter 3 and therefor there was no disciplinary process that took place relating to strikes.	Action Plan Completed There were no illegal strikes in quarter 4 and therefore there was no disciplinary process that took place relating to strikes.
		CF7.6	Denial of contractor's access to ERWAT sites due to community unrest	CC7.6.1	Community Liaison Officer Appointed through ward councillors to assist with community engagement.		RAP7.6.1	Engage CSR office prior to commencement of construction project. (CSR plan to include Projects)	There were no new projects for the period under review	Action plan completed. There were no new projects for the period under review. Monitoring done throughout the year
				CC7.6.2	Sub-contracting to local business on projects that requires less technical skills.		RAP7.6.2	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There were no new projects for the period under review	There will be no reporting for the period under review.
		CF7.7	Tender offer declined by the winning bidder	CC7.7	Supply Chain Management Policy		RAP7.7	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There were no new projects for the period under review	There will be no reporting for the period under review.
		CF7.8	Termination of contract due to poor performance of the contractor and unexpected withdrawal from projects by the contractor	CC7.8	Invoke penalties for poor performance in line with the Supply Chain Management Policy and related Service Level Agreements		RAP7.8	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There were no new projects for the period under review	There will be no reporting for the period under review.
ERW8	Potential loss of key skills	CF8.1	Unexpected loss of key employees due	CC8.1.1	Recruitment Policy	Med	RAP8.1.1	Review the recruitment policy to include a section	In progress - All HR Policies including the Employee Benefit	

REF	Risk Title	Contributing Factors	Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
		to the resignation, retirement, death etc.					on the recruitment of foreign nationals and compulsory entry and exit medicals	Policy are under review and will be submitted to Board for approval.	In progress - All HR Policies including the Employee Benefit Policy has been reviewed and approved by the Board.
			CC8. 1.2	ERWAT Recruitment Plan		RAP8. 1.2	Implementation of the 2023/24 Recruitment Plan	Progress has been made with the filling of vacancies, the following appointments have taken place during the Quater under review. Technician Process (02 January 2024), Tea Lady (02 January), District Manager (DD6) (01 February 2024), General Worker -HR (02 January 2024), Driver (01 December 2024, General Worker- Lab (01 December 2024). The following positions are at offer stage, x20 Process Controllers.	Positions filled in Q4: 20 Process Controllers Manager: SCM Junior Accountant District Manager DD4 Specialist: Communications Positions at offer stage: Lab Scientist Grade 1 & Grade 2 2 Plant Managers Specialist: Training & Development Positions in progress: 2 Instrumentation Mechanicians 5 Electricians 8 Fitters
			CC8. 1.3	ERWAT Progression Framework		RAP8. 1.3	Review of existing Progression Framework to include other departments	Scientific Services framework finalised. Operations framework to be reviewed in Q4, due to changes in green drop regulations. Awaiting approval of Maintenance Structure.	Operations framework reviewed and submitted to Executive Manager: Operations for approval.
			CC8. 1.4	Skills Audit		RAP8. 1.4	Implementation of the skills Audit a plan for the gaps identified in the skills audit	In progress - Tender is still at Tender Evaluation Stage.	Action plan completed

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
				CC8. 1.5	Covid 19 Standard operating procedure		RAP8. 1.5	Develop an ERWAT Epidemic/Pandemic policy	Action plan completed	Action plan completed
				CC8. 1.6	Covid 19 Risk Assessment		RAP8. 1.6	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
				CC8. 1.7	6-year Training and Development Plan		RAP8. 1.7	Implementation of 2023/24 Annual Training Plan	126 Erwat Employees have been trained on Chlorine Handling Training 5 Have been Trained on Emotional Intelligence 48 Employees have been enrolled for NQF Level 3 in Water and Wastewater Treatment Process Operation 24 Employees have been enrolled for NQF Level 4 in Water and Wastewater Treatment Process Supervision Operation	15 Employees attended the Training Committee Training 30 Employees attended the Hazardous Chemical Training 48 Employees enrolled for NQF Level 3 in Water and Wastewater Treatment Process Operation 24 Employees have been enrolled for NQF Level 4 in Water and Wastewater Treatment Process Supervision Operation
		CF8.2	Dissatisfaction in the Working Environment (e.g. not fitting in with the organisation's culture and inadequate working resources)	CC8. 2.1	Medical Aid Policy		RAP8. 2.1	Review the Medical Aid policy to include pension	In progress - All HR Policies including the Employee Benefit Policy are under review and will be submitted to Board for approval.	Action plan completed-In progress - All HR Policies including the Employee Benefit Policy has been reviewed and approved by the Board on the 7th of June 2024.
				CC8. 2.2	Employee climate survey		RAP8. 2.2	Conduct an Employee Climate Survey	In progress - Organisational Development Services Tender has been advertised and will close 20 March 2024.	In progress- Employee Climate Survey are scheduled for Q4, provided a successful service provider has been appointed.
				CC8. 2.3	Psychosocial support		RAP8. 2.3	Implementation of the 2023/24 Employee	Tender is presently sitting with BEC. .	

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
								Wellness Support Programmes	Will report feedback in Q3. Presently counselling done in-house by the Occupational Health Nurse Practitioner (OHNP)	Tender is presently sitting with BAC. . Will report feedback in Q1. Presently counselling done in-house by the Occupational Health Nurse Practitioner (OHNP)
				CC8. 2.4	Wellness workplace programmes		RAP8. 2.4	Implementation of the 2023/24 Wellness Program	Tender is presently sitting with BEC. . Will report feedback in Q3. Presently counselling done in-house by the Occupational Health Nurse Practitioner (OHNP)	Tender is presently sitting with BAC. . Will report feedback in Q1. Presently counselling done in-house by the Occupational Health Nurse Practitioner (OHNP)
				CC8. 2.5	Human Resource Management Roadshows		RAP8. 2.5	Go on a Human Resources Road Show to raise awareness on Human Resource activities	In progress - 11 Wastewater Care Works have been visited to date.	In progress - 12 Wastewater Care Works have been visited to date, the rest of the Plants will be covered in Q4 and Q1of the 2024/2025 FY
		CF8.3	Individuals not coping with the work challenges, expectations on individuals not met and career advancement	CC8. 3.1	Personal Development Plans		RAP8. 3.1	Review of Personal Development Plans for the 2023/24 Financial Year	Action plan completed.	Action plan completed.
				CC8. 3.2	Exit Interview as and when a need arise		RAP8. 3.2	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
ERW9	Potential delays in the supply and delivery of critical goods and services as	CF9.1	Late commencement of bid processes by user department and discrepancies around specifications	CC9. 1.1	Supply Chain Management Policy	High	RAP9. 1.1	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
	a result of procurement challenges			CC9. 1.2	SOP14 Turn Around Time		RAP9. 1.2	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
				CC9. 1.3	ERWAT Procurement Plan		RAP9. 1.3	Review the 2022/23 Procurement Plan for the 2023/2024 Financial Year	Action plan completed	Action plan completed.
				CC9. 1.4	BID Committees		RAP9. 1.4	Appointment of Probity Committee to assist the Accounting Officer with compliance.	Action plan completed	Action plan completed.
				CC9. 1.5	BID Committee Charters		RAP9. 1.5	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
				CC9. 1.6	SCM Document Movement Control Tracking Register implemented		RAP9. 1.6	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
		CF9.2	Inadequate monitoring of contract term by the user department	CC9. 2 (a)	Contract Management Policy		RAP9. 2	Implementation of the Contracts Management Policy (reporting and reviewing of the contract register)	Action Plan Completed	Action Plan Completed
				CC9. 2 (b)	Contracts Management Register					
		CF9.3	Long lead time to deliver goods/ services due to external factors such as Pandemics, Rise in Logistics Cyber Attacks, Shortage of	CC9. 3	Service Master Contracts for Maintenance		RAP9. 3	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
			supplies & Consumables etc.							
ERW10	Potential Loss of, and Unauthorised Access Critical Information	CF10.1	Aging ICT infrastructure leading to higher hardware failure (80%-85%) of the Server Hardware has reached end of life support, leading to difficulties in procuring replacement spare, warranties, etc)	CC10.1	Asset Management Policy, Strategy and Disaster Recovery Plan (Cloud back-up)	High	RAP10.1(a)	Replacement of server infrastructure	In Progress - The bid was awarded on the 31st January 2024	Server infrastructure was delivered on the 3rd June. Data centre readiness planning is underway.
							RAP10.1(b)	Upgrade unsupported operating systems	Action plan not yet started the upgrading of the operating system is dependent on the server infrastructure replacement with is currently at the Bid Evaluation Stage"	Action plan not yet started the upgrading of the operating system is dependent on the server infrastructure replacement
		CF10.2	Inadequate cyber security awareness and behaviour	CC10.2	ICT security awareness programs: (News Flash, Induction, Cyber security surveys, Mimecast)		RAP10.2	Raise awareness Cyber-Security through quarterly news flash	In progress Quarter 3 Flash on Cyber Security was issued on the 25 March 2024	Action Plan Completed. Cyber Flash sent out 1 July 2024
		CF10.3	Inadequate Information Security Controls	CC10.3.1	ICT Security Policy and Procedures		RAP10.3.1	Develop a User Access Review Standard Operating Procedure	Action plan completed. User Access Review Standard Operating Procedure approved in March 2024	Action Plan Completed
				CC10.3.2	Access control policy		RAP10.3.2	Develop a back-up and restoration Standard Operating Procedure	Action plan completed - Back-up and Restoration Standard Operating Procedure approved in March 2024	Action Plan Completed
				CC10.3.3	Logical access policy		RAP10.3.3	Develop a Cyber-Security policy	Action plan not yet started	In Progress- Draft Policy Completed

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
	Potential injuries to people (personnel, visitors and contractors) and damage to property	CF10.4	Non- adherence to ICT Policies and Procedure	CC10.4(a)	Disciplinary Procedure		RAP10.4	Raise awareness on ICT Policies through quarterly news flash	In progress - Quarter 3 Flash on Cyber Security was issued on the 25 March 2024	Action Plan Completed Flash sent out 28 June 2024
				CC10.4(b)	Induction Program				There was no induction of new employees in the period under review.	Action Plan Completed- There was no induction of new employees in the period under review.
		CF10.5	Inadequate maintenance of Assets that are critical to ICT Environment (e.g. fire equipment in the server room, air conditioning system, UPS, Power Generators, location of server room, etc.)	CC10.5	CC10.5 Maintenance of ICT critical equipment TBC (Who is responsible for executing the maintenance function e.g. servicing of fire equipment, ups, generators)		RAP10.5	Annual Servicing of the Fire Fighting Equipment (Fire Extinguishers & Fire Hydrants)	Action Plan Completed	Action Plan Completed
		CF10.6	Inadequate monitoring of ICT server environment	CC10.6(a)	Manually Monitoring of the Environmental Conditions		RAP10.6	Implementation of an Environmental Monitoring System in the server room to control temperature, humility and power	Action Plan Completed	Action Plan Completed
				CC10.6(b)	Temperature Data Logger					
		CF11.1	Non- Compliance/ disregarding (Knowingly or unknowingly) Occupational Health & Safety policies and Standard operating procedures. (e.g. Inappropriate use of PPE;)	CC11.1.1	Occupational Health & Safety Policy		RAP11.1.1	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review	There will be no reporting for the period under review
				CC11.1.2	Occupational Health & Safety Procedures (SOPs) -MS- SOP-SA002 Health and Safety		RAP11.1.2(a)	Development of Occupational Health Standard Operating Procedures: Employee Assistance Programme	Draft document is being finalised and will circulated by the 30 March 2024	First draft was circulated for comments on 13/05/2024 and second draft on the 17/06/2024

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
					Representative Procedure -MS- SOP-SA003 Accident Reporting and Investigation Procedure -MS- SOP-SA004 Permit to Work Procedures -MS- SOP-SA005 Confined Space Procedure -MS- SOP-SA006 Excavation Procedure -MS- SOP-SA007 Wearing of Safety Harness -MS- SOP-SA008 Fall Protection Plan -MS- SOP-SA009 Control of contractors working at ERWAT -MS- SOP-SA0010 HSE Plan		RAP1 1.1.2(b)	Review of Safety Standard Operating Procedures 1. Occupational Health & Safety Procedures (SOPs) 2. MS- SOP-SA002 Health and Safety Representative Procedure 3. MS- SOP-SA003 Accident Reporting and Investigation Procedure 4. MS- SOP-SA004 Permit to Work Procedures 5. MS- SOP-SA005 Confined Space Procedure 6. MS- SOP-SA006 Excavation Procedure 7. MS- SOP-SA007 Wearing of Safety Harness 8. MS- SOP-SA008 Fall Protection Plan 9. MS- SOP-SA009 Control of contractors working at ERWAT 10. MS- SOP-SA0010 HSE Plan	The following Standard Operating Procedures were drafted and still to be signed off 1. Draft MS-SOP-SA-003 Incident Management Procedure (002) 2. Draft MS-SOP-SA-003.1 Incident CLASSIFICATION GUIDELINE 3. Incident Notification and Reporting Forms. 4. Process Flow Incident Reporting	The following procedures reviews were finalised in Q4 and will be presented at the next Central Safety Committee meeting for adoption and approval: 1. MS-SOP-SA-005 Confined Space 2. MS-SOP-SA-009 Control of contractors working at ERWAT 3. MS-SOP-SA-007 Safety Harness 4. MS-SOP-SA-010 OHSE Plan 5. PPE procedure (New procedure) 6. H&S Risk Assessment procedure (New procedure) 7. Emergency Procedure 8. Auding and inspection procedure (New procedure) 9. Hazardous Substances procedure (New procedure)
				CC1 1.1.3	Occupational Health & Safety Committees (Monthly District Safety Committee, Quarterly Central Safety Committee)		RAP1 1.1.3	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
				CC1 1.1.4	Safety Awareness Program (Toolbox talks)		RAP1 1.1.4(a)	Raise Safety Awareness through quarterly newsflash	In progress - Raise Safety Awareness through Weekly Flash and a Safety share at all meetings	Action plan completed- Raise Safety Awareness through Weekly Communication flash and a Safety share at all meetings
							RAP1 1.1.4(b)	Conduct a Safety Drill to increase safety awareness	Action completed - Safety drills have been conducted for all plants. Next schedule will start in the next financial year	Action Plan Completed
				CC1 1.1.5	Safety Induction		RAP1 1.1.5	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
		CF11.2	Deteriorating workplace condition due to inadequate maintenance	CC1 1.2.1	2022/2023 Maintenance Plan		RAP1 1.2.1	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
				CC1 1.2.2	Medical Surveillance policy		RAP1 1.2.2	Develop a Medical Surveillance Standard Operating Procedure to expand on the baseline and categories of employees	Draft document is being finalised and will circulated by the 30 March 2024 for inputs	Action plan completed- ERW-SOP-SA-011 Medical Surveillance Procedure was approved and signed off.
		CF11.3	Unauthorised entry to ERWAT properties with the aim of vandalising, threat to lives, theft, (armed robberies)	CC1 1.3.1	Security Services Policy		RAP1 1.3.1	The current mitigation controls are deemed to be adequate. Therefore, no further risk action plan to be implemented.	There will be no reporting for the period under review.	There will be no reporting for the period under review.
				CC1 1.3.2	Security Services Standard Operating Procedure -Security		RAP1 1.3.2	The current mitigation controls are deemed to be adequate. Therefore, no	There will be no reporting for the period under review.	There will be no reporting for the period under review.

REF	Risk Title	Contributing Factors		Current Mitigating Controls		RR	Risk Action Plans		Detailed Progress Quarter 3	Detailed Progress Quarter 4
					Operations Room Procedure -Security Systems Procedure -Trespass procedure -Guarding Procedure -Incident Reporting Procedure -Access control Procedure -Security Awareness Procedures			further risk action plan to be implemented.		
				CC1 1.3.3	Security Awareness Program (Induction,Newsletters,Flash)		RAP1 1.3.3	Implementation of the Security Awareness Programs for 2023/2024	Security Awareness Flash issued on the 27th of March for quarter3	Action plan completed-A late Security Awareness Flash was issued to the business for quarter 4.
		CF11.4	Unavailability of Fire Detection & Suppression System for the buildings	CC1 1.4	Fire extinguishers and Fire Hydrants		RAP1 1.4	Annual Servicing of the Fire Fighting Equipment (Fire Extinguishers & Fire Hydrants)	Action Plan Completed	Action Plan Completed
								Raise Safety Awareness through quarterly newsflash	In progress-Ongoing Safety Awareness through Weekly Flash	Action plan completed- Safety Awareness through communication flash aiming to be done weekly or as much as possible
								Conduct a Safety Drill to increase safety awareness	Action completed. Drills completed for all 19 WCW and Head-Office.	Action Plan Completed

7. Legislative (only if applicable to your department)

Compliance with legislation that applies to the entity is critical to the existence and operations of ERWAT. Management and the board have identified and prioritised seven (7) key legislation for monitoring. Compliance risk management plans are developed to ensure that all the risks are mitigated. Any changes to legislation is aligned with internal policies and processes The Regulatory Landscape consist of the following

1. Companies Act 71 of 2008
2. Municipal Systems Act 32 of 2000
3. National Water Act 36 of 1998
4. National Environmental Management Act
5. Municipal Finance Management 56 of 2003
6. Labour Relations Act 66 of 1995
7. Occupational Health and Safety Act 85 of 1993
8. Disaster Management Act 57 of 2005
9. Personal Protection of Information Act 4 of 2

8. Key Audit Matters and Progress

ERWAT obtained an unqualified audit opinion from the AGSA for the 2022/2023 financial year. Thirty-nine (39) findings were included in the ERWAT AGSA Management Report, of which thirty-nine (39) were audit report items. Of these thirty-nine (39) findings, thirty-eight (38) findings have been finalized and one (1) finding has been okay-manageable issues.

2022/2023 OPCA

No	Finding Heading	Status	Action Plan
1	Procurement and contract management - Bid awarded to a bidder that is not tax compliant.	**Finalized**	a) Checklist to be implemented to ensure all tick boxes are completed that will ensure that all legislation has been adhered to. b) A final SARS check will be conducted at the time of the AO sign off on the award.
2	The reported achievement was overstated due to a calculation error.	**Finalized**	a) Management shall assess and correct the population used to calculate the reported achievement and adjust the annual performance report to reflect the correct percentage achieved for the percentage of wastewater treatment capacity unused indicator. b) The reviewed calculations and supporting schedules shall be reviewed by the Engineering Manager and Executive Manager: IPAP.
3	Incorrect reasons for the variance reported in the annual performance report.	**Finalized**	a) Finding was resolved after reviewing the managements response by Auditors. No further action is required.
4	Information supporting reported performance information has calculation errors.	**Finalized**	a) Excel sheets are in use to record the actual flow readings taken by shift leaders, with built in formulas to automatically calculate the daily flow totals in order to prevent human calculation errors. b) Plant Manager and District Manager review will be conducted regular to identify human errors.
5	Splitting of quotation to avoid competitive bidding.	**Finalized**	a) Recurring commodities to follow the correct SCM Process. b) The Contract Register must be enhanced to include all procurement of the recurring commodities. c) All procurement below R200 000 to be signed off by the SCM Manager. d) FPQ's between the value of R200 000 and R750 000 to be signed off by the CFO and or AO pending the finalisation of the review of the SCM DOA.
6	Contractual terms are not complete.	**Finalized**	a) All service level agreements to be concluded and signed off by the delegated official as per the approved DOA.

No	Finding Heading	Status	Action Plan
			b) The contract register to be reviewed to identify contracts concluded that require SLAs to be completed and signed including the regulation 32 and 36 contracts and the section 110 contracts.
7	Non-compliance with performance monitoring requirements.	**Finalized**	a) The contract register to include the monitoring of performance evaluations of awarded contracts including regulation 32 and 36 and section 110 awards, on monthly basis and non-compliance reported to EXCO. b) Performance evaluations be submitted to SCM on a monthly basis indicating the appointed service providers performance or no services rendered in that particular months. c) The SA template to be amended to include measures to monitor performance and delivery by the supplier in the form of an annexure.
8	Deviations not timely reported to the board of directors.	**Finalized**	a) The deviations register be updated as and when deviations are approved. b) That the deviations be reported to the next council through the Implementation for the SCM Policy. c) That any corrections to the respective quarters be reported to Council as soon as it becomes know.
9	Formal Price Evaluation Report not authorised by delegated officials.	**Finalized**	a) All FPQ processes to include a checklist and proper record of the process including the sign off of the capturer, the reviewer and or approver as per the SCM DOA.
10	Contracted service provider that does not reside within municipal area is incorrectly included in the reported performance information.	**Finalized**	a) The annual report figures to be updated and KPI be corrected as per the definition of contracted services utilizing the CSD report and award register applicable for the year.
11	Capital expenditure that does not relate to the planned projects is incorrectly included in the schedule supporting the reported achievement.	**Finalized**	a) Completed. No further action required.
12	Internal controls deficiencies identified in the procurement process.	**Finalized**	a) All FPQ processes to include a checklist and proper record of the process including the sign off of the capturer, the reviewer and or approver as per the SCM DOA.
13	Consequence Management - Instances of irregular expenditure NOT investigated to determine if someone is responsible for irregular expenditure incurred.	**Finalized**	a) Correct the AFS by reversing the non-compliant irregular expenditure written off as per the AGSA.
14	Irregular expenditure written off presented as condoned.	**Finalized**	a) Amend the annual financial statements with the disclosure recommended by the AGSA.
15	Assets recorded in the fixed asset register that could not be verified.	**Finalized**	a) Verification of assets.

No	Finding Heading	Status	Action Plan
16	Assets that are damaged and not in operation.	**Finalized**	a) Test assets for impairment at year end.
17	Assets with Rnil value on the asset register.	**Finalized**	a) Asset register report writer to be configured by BCX to exclude Rnil value assets. b) Remaining useful life adjustment to be made for assets that have a Rnil value but still have a remaining useful life.
18	Assets without tags and assets tagged but not recorded in the fixed asset register.	**Finalized**	a) Verification of assets
19	Non-compliances in the pre-qualification assessment.	**Finalized**	a) Update the irregular expenditure register and notes to the AFS. b) Implement an FPQ checklist for sign off to ensure full compliance, internal controls and verification of information.
20	Procurements not recorded in SCM tender register.	**Finalized**	a) Update the contract register to include non-awarded and cancelled bids.
21	Reported performance information is overstated due to calculation error.	**Finalized**	a) The annual report figures to be updated and KPI be corrected as per the definition of contracted services utilizing the CSD report and award register applicable for the year. b) Review information submitted for 2023/2024.
22	Target set as a negative and is not consistent with the purpose of the indicator.	**Finalized**	a) N/A
23	Pre-determined target was set below the industry norm.	**Finalized**	a) The task identified was to increase the target in 2023/2024 to be in line with industry norm of 8%.
24	Reported performance information is overstated due to suppliers not qualifying as EME/QSE included in the numerator.	**Finalized**	a) The annual report figures to be updated and KPI be corrected as per the definition of contracted services utilizing the CSD report and award register applicable for the year.
25	Suppliers qualifying as EME/QSE not included in the numerator.	**Finalized**	a) The annual report figures to be updated and KPI be corrected as per the definition of contracted services utilizing the CSD report and award register applicable for the year.
26	Reasonable steps not taken to prevent irregular expenditure.	**Finalized**	a) Ensure internal controls are effective by developing procedures to ensure that all scm compliance requirements are met before transactions are approved and enforce adherence to all SCM prescripts. b) Implement controls to ensure effective contract management in place to avoid incurring irregular expenditure
27	Local content awards not reported to DTI.	**Finalized**	a) Report local content awards made during the period of July 2022 until 31 December 2023 to the required regulatory body.
28	Internal controls deficiencies identified relating to the quotation process.	**Finalized**	a) ERWAT to do a screen shot of the CSD listing under the commodity when the search is conducted on the CSD portal.

No	Finding Heading	Status	Action Plan
29	Concerns and issues noted during site visits at Olifantsfontein and Waterval WWTW's.	**Okay – manageable issues**	a) Olifantsfontein resource needs (funding for operation, capital budget, equipment and workforce) are developed on an annual basis and submitted to the City of Ekurhuleni for approval. b) However, the approved funds are not enough to implement the required infrastructure upgrades thus ensure proper service delivery. c) The design for the upgrading of Olifantsfontein WCWs has commenced. d) The inception stage is 100% complete. The preliminary design stage is 80% complete. The preliminary design stage was at 80% complete with the original appointed consultant at the end of their contract with COE. e) There is no report received from the newly appointed consultant yet despite the meetings held with them. f) The entity is unable to fill all approved vacancies on the organogram due to limited funding, only funded positions are filled and this result in under staffing. g) All measures to treat, process and dispose of waste, wastewater and other pollutants are in place e.g. the usage of SOPs, plant manuals to operate/treat the processes in order to comply with WUL, the usage of IMPS as a guide to report any incidents to all stakeholders and the usage of sludge guidelines for the disposal of waste sludge. h) The plant and infrastructure are managed, maintained, operated, monitored and safeguarded to effectively treat wastewater by ensuring that there are personnel at the plants 24/7 through 2 x 12 hours shifts per day and samples are taken to monitor compliance with the relevant legislation daily. i) The actions are then taken for the non-compliance parameters depending on the root cause of the non-compliance and they are also reported to management accordingly. The maintenance team is available for maintenance of infrastructure. j) Contingency plans (generators) are in place to limit the impacts of load shedding and other issues that may cause improper treatment like high hydraulic & organic loads need capex funding to refurbish and upgrade the plants. k) Management continually identifies address and monitor all general and control

No	Finding Heading	Status	Action Plan
			weaknesses relating to environmental activities which may impact on the environment by ensuring that plant inspections and risk assessments are carried out with capturing of findings and action plans for mitigation purpose are reported and tracked.
30	General Expenditure- expenditure incurred incorrectly classified as professional fees.	**Finalized**	a) Monitor and Review
31	Assets recorded as WIP but have been completed.	**Finalized**	a) Verification of all WIP assets to confirm that asset is not yet in use and should remain as WIP
32	Misstatements identified relating to the prior period error note.	**Finalized**	a) Management evaluated and adjusted the financial statements as per the AG recommendations
33	Differences noted in the related parties note.	**Finalized**	a) Completed. No further action required.
34	Overtime paid without evidence of work done.	**Finalized**	a) An SOP has been developed.
35	Human Resource Management – No performance agreements concluded for the 2022/23 financial year.	**Finalized**	a) 2022/2023 Performance agreements have been completed.
36	Achievement reported does not agree to the supporting schedule.	**Finalized**	a) Completed. No further action required.
37	Tenders/quotations (below R30 000) that were invited on or after 16 January 2023 were not awarded in accordance with the PPPFA and PPR of 2022.	**Finalized**	a) Review SCM policy to provide for procurement process for purchase below R30 000
38	Limitation of scope on procurement and contract management.	**Finalized**	a) Amend the tender checklist to include a tracking tool for documents from initiation to close out including the safe storage and movement of documents to ensure all information is properly maintained and easily retrievable when required.
39	Concerns and issues noted during site visits at Ancor WWTW's and Waterval licence –PA 03.	**Finalized**	**OPERATIONS COMMENTS** **ANCOR WCW** a) Ancor sludge lands are monitored twice daily to ensure any smoke is detected early and any fire is extinguished as soon as possible. b) Fencing of the sludge area and lining of the sludge paddies form part of the Capex 5-year plan, awaiting funding. c) Groundwater quality is monitored monthly to track possible pollution trends, however, the pollution will continue until Capex is available to construct a dewatering facility or line the sludge paddies for the WCW.

No	Finding Heading	Status	Action Plan
			d) Enforcement of the bylaws is the responsibility of the CoE and ERWAT reports all industrial pollution of the relevant CoE officials for their investigation and action. **WATERVAL WCW** a) Waterval sludge lands are monitored during the day by the security & staff to prevent any veld fires, and the un-authorized entry signs are erected. b) Fencing of the sludge area and lining of ponds part of 5-year CAPEX plan. c) Groundwater quality is monitored monthly to track possible pollution trends. d) Enforcement of the bylaws is the responsibility of the CoE and ERWAT reports all industrial pollution to the relevant CoE officials for their investigation and action. e) Application of new licenses for Waterval is in progress, currently notice for public participation was published on the 01 February 2024.