

- To : Audit and Performance Committee Members Chairperson: RMC, Acting CEO, Executive Manager: CPS, CFO Executive Manager: Programme
- From : Chief Audit Executive

Date : 26 January 2023

Subject : Final IA report: Adjusted SDBIP, Mid-term Budget adjustment and Multi-year business plan 2022/23 financial year

We have pleasure in submitting our Internal Audit Report relating to Adjusted SDBIP, Mid-term Budget adjustment and Multi-year business plan 2022/23 financial year

The report sets out our objectives, approach and scope of the review, our findings and recommendations.

This report has been prepared for the Audit Committee and members of management. This report should not be placed at the disposal of third parties without our written approval. We do not accept responsibility to any other party to whom it may be shown, or who, on their own volition, may decide to rely on it. Should a third party obtain this report without our written consent, we will not be held responsible for any conclusion they might draw from this report. We would be pleased to provide you with further assistance and request that you do not hesitate to contact Mr. S Nelani on 039 254 5108.

Your input into this document will be highly appreciated.

Regards,

Mr. S Nelani: Chief Audit Executive

Date

ADJUSTED SDBIP, MID-TERM BUDGET ADJUSTMENT AND

MULTI- YEAR BUSINESS PLAN 2022/23 FINANCIAL YEAR

REPORT STATUS (FINAL)

2022-2023

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SECTION A

1. INTRODUCTION

In terms of the Internal Audit strategic Plan for 2022-23, Internal Audit commenced with the Audit of Adjusted SDBIP, Mid-term Budget adjustment and Multi-year business plan 2022/23 financial year

Upon conclusion of the audit, a summary of significant findings, if any, will be included in the Executive Summary as well as in the detailed audit report. The detailed audit findings with agreed management comments thereto are shown as appendices to the report.

2. AUDIT OBJECTIVES

 To provide assurance on whether the key management controls in place are adequate and effective to eliminate and/or minimize the high risk areas as identified in Adjusted SDBIP, Multi-year Business plan and Mid-term budget adjustment for the 2022/23 financial year.

3. AUDIT SCOPE

- Test the alignment of the Adjusted SDBIP, Multi-year Business plan and Midterm budget adjustment for the 2022/23 financial year;
- Test SMART principles on targets both Annual and Quarterly;
- Test the completeness of the Adjusted SDBIP, Multi-year Business plan and Mid-term budget adjustment for the 2022/23 financial year.

4. AUDIT APPROACH

The audit project will be generally focused on the discussions with the relevant key personnel, the review and analysis of the relevant policy, information and source documentation by means of walk through, observation and audit testing.

Due professional care will be exercised during the planning, execution and reporting of the results in respect of this audit project.

Due to limited audit testing and audit test procedures being envisaged, it is important to note that not all significant non-compliance, deficiencies or irregularities may be identified during the execution of this audit project.

5. MANAGEMENT COMMENTS

The matters raised in the draft report have been discussed with personnel at operational level through informal query sheets that were issued during the reviews. Communications of Audit Findings were also issued and Management was also requested to provide comments on the findings and indicate the Responsible Officials for implementation of Internal Audit recommendations. Written Management Comments and Agreed Solutions are included in Section B of this report.

6. FRAUD AND INTERNAL CONTROL

Internal audit work was planned with a reasonable expectation of detecting significant control weaknesses in the specific areas reviewed. Internal Audit procedures alone do not guarantee that fraud will be detected even when carried out with due professional care. Our reviews and investigations as internal auditors should not be relied upon solely to disclose fraud, defalcation or other irregularities that may exist.

7. RISK DEFINITION

Internal audit defines risk as the likelihood of an adverse event occurring that could result in missed business opportunities as well as the organisation not attaining its primary goals and objectives. We assess this risk based upon two parameters, viz. the likelihood of the risk occurring and the impact that the event could have on operations.

Category

Impact:The possible effect of the weakness in control on the division.Likelihood:The probability of the risk occurring.

Rating

| Rating | Impact | Likelihood | Timeliness |
|-----------------|-----------------------------------|--------------------|--------------------|
| H – High | Significant effect on meeting | It is probable | The risk needs to |
| | strategic objectives with long- | unless we do | be addressed |
| | term effects on reputation | something about | immediately. |
| | and/or image. | it. | |
| м – | Limited effect on meeting | It could happen if | The risk needs to |
| Medium | strategic objectives with short- | it is not given | be addressed |
| | term effects on reputation | attention. | within three |
| | and/or image. | | months. |
| L – Low | Minimal effect on meeting | It is not expected | The risk needs to |
| | strategic objectives with limited | to happen except | be addressed |
| | effects on reputation and/or | in unusual | within six months. |
| | image. | conditions. | |

8. SUMMARY OF SIGNIFICANT FINDINGS

Details of our review findings are contained in Section B of this report. The following is, however a summary of our findings:-

| # | Audit Finding | Rating |
|----|---|--------|
| 1. | Omission of targets on the Annual SDBIP Target; | Н |
| 2. | No Annual budget allocated for the target; | Н |
| 3. | Misalignment of annual budget amount vs Quarterly target budget amount | Н |
| 4. | Misalignment of Mid-term adjustment budget vs Adjusted SDBIP | Н |
| 5. | Duplication of SDBIP Reference on the Adjusted SDBIP | Н |
| 6. | Targets designed do not meet smart criteria | Н |
| 7. | Key performance indicator on the SDBIP do not meet the criteria of a good performance indicator | Н |
| 8. | Duplication of SDBIP Key Performance Indicator | Н |

9. CONCLUSION

The review of processes relating to the Adjusted SDBIP, Mid-term budget adjustment and Multi-year business plan indicated that controls are weak and not effectively implemented.

The control activities that require strengthening are presented in the body of the report.

10. ACKNOWLEDGEMENT

We would like to express our appreciation to the various staff members of the Office of Programmes, BTO, OCEO and CPS for their assistance and co-operation during the course of the audit.

ANNEXTURE A: DISTRIBUTION LIST

| Name and Designation | Secure action | Implement Action | Information |
|-----------------------|---------------|---------------------|-------------|
| | | | |
| Ms. B. Jojo CA (SA) | | | X |
| Audit and Performance | | | |
| Committee Member | | | |
| Mr Tshangana | | | X |
| Audit and Performance | | | |
| Committee Member | | | |
| Mr Z. Zulu | | | X |
| Audit and Peformance | | | |
| Committee Member | | | |
| AGSA | | | X |
| | | | |
| Mr. N.R Xolo | X | | X |
| Acting CEO | | | |
| Ms. D Mrwetyana | X | X | X |
| Executive Manager-CPS | | | |
| Ms. N Maloi | X | X | X |
| Executive Manager- | | | |
| Programmes | | | |
| Mr.L Bam CFO | X | X | X |

ANNEXURE B: DETAILED INTERNAL AUDIT REPORT

| Finding | SDBIP | Department | Description of | Legal description |
|----------------|-----------|------------|----------------|--|
| | Reference | | audit findings | |
| | | | , C | |
| | | | | |
| | | | | |
| 1. Omission of | 7.1.1 | Programmes | Omission of | Paragraph 3.3 of Framework for |
| target on the | | | target on the | Managing programme |
| Annual | | | following | Performance Information (FMPPI) |
| target | | | SDBIP | states the following: |
| | | | Project: | |
| | | | Cannabis | A useful set of criteria for selecting |
| | | | production[| performance targets is the |
| | | | 2xbusiness | "SMART" criteria |
| | | | plans | • Specific: the nature |
| | | | developed | and required level of |
| | | | | performance can be |
| | | | | , clearly identified |
| | | | | |
| | | | | • Measurable: the |
| | | | | require performance |
| | | | | can be measured |
| | | | | |
| | | | | Achievable: the |
| | | | | target is realistic given |
| | | | | the existing capacity |
| | | | | |
| | r | | | Relevant: the |
| | | | | required performance |
| | | | | is linked to the |
| 7 | | | | achievement of a goal |
| | | | | |
| | | | | • Time-bound: the time |
| | | | | period or deadline for |
| | | | | delivery is specified. |
| | | | | |
| | | | | |

| Finding | SDBIP | Department | Description of | Legal description |
|---------------------|-----------|------------|----------------|---------------------------------------|
| | Reference | | audit findings | |
| | | | | |
| | | | | |
| | | | | |
| 2. No budget | 7.1.1 | Programmes | Business plan | Section 87(5)(a)and (b) of the |
| allocated for the | | Ū. | project: | MFMA on Municipal entity Budgets |
| target | | | Cannabis | states the following: " the budget of |
| | | | production | a municipal entity must- |
| | | | | (a) Be balanced; |
| | | | | (b) Be consistent with |
| | | | | any service delivery |
| | | | | agreement or other |
| | | | | agreement between |
| | | | | the entity and the |
| | | | | entity's parent |
| | | | | municipality; |
| | | | | |
| | | | | |
| | | | | |
| 3. Misalignment of | 7.1.11.8 | Programmes | Business plan | Section 87"(5) (d)(i)(ii)(iii) of the |
| Annual Budget | | | project: NSF | MFMA states the following: The |
| Amount vs Quarterly | | | Mixed farming | budget of a municipal entity must- |
| target budget | | | learnership | (d) include a multi-year business |
| amount | | | | plan for the entity that- |
| | | | Budget amount | (i) sets key financial and non- |
| | | | as per the | financial performance objectives |
| | | | annual output: | and measurement criteria as |
| | | | R1606 318.75 | agreed with the parent |
| | | | Budget amount | municipality; |
| | | | as per | (ii) is consistent with the budget |
| | | | quarterly | and intergrated development plan |
| | | | targets: R1606 | of the entity's parent municipality; |
| | | | 318.75 + | (iii) is consistent with any service |
| | | | R1606 318.75 | delivery agreement or other |
| | | | | agreement between the entity and |
| | | | | the entity's parent municipality. |
| | | | | |

| Finding | SDBIP | Department | Description of | Legal description |
|--------------|-----------|------------|-----------------|---------------------------------------|
| | Reference | | audit findings | |
| | | | | |
| | | | | |
| | | | | |
| | 7.2.4 | CPS | Business Plan | Section 87"(5) (d)(i)(ii)(iii) of the |
| | | | project: Skills | MFMA states the following: The |
| | | | Development | budget of a municipal entity must- |
| | | | Budget amount | (d) include a multi-year business |
| | | | as per Annual | plan for the entity that- |
| | | | budget | (i) sets key financial and non- |
| | | | output:R10 | financial performance objectives |
| | | | 000.00 | and measurement criteria as |
| | | | Budget amount | agreed with the parent |
| | | | as per the | municipality; |
| | | | quarterly | (ii) is consistent with the budget |
| | | | targets:R 29 | and intergrated development plan |
| | | | 000.00 | of the entity's parent municipality; |
| | | | | (iii) is consistent with any service |
| | | | | delivery agreement or other |
| | | | | agreement between the entity and |
| | | | | the entity's parent municipality. |
| | | | | |
| 4. | 7.1.11.6 | Programmes | Business Plan | Section 87"(5) (d)(i)(ii)(iii) of the |
| Misalignment | | | project: LG | MFMA states the following: The |
| of Mid-term | | | SETA- | budget of a municipal entity must- |
| | | | Discretional | (d) include a multi-year business |
| adjustment | | | grant and Short | plan for the entity that- |
| budget vs | | | skills | (i) sets key financial and non- |
| Adjusted | | | programme. | financial performance objectives |
| SDBIP | | | Adjusted | and measurement criteria as |
| | | | SDBIP | agreed with the parent |
| 7 | | | Amount: | municipality; |
| | | | R3315 200.00 | (ii) is consistent with the budget |
| | | | Mid-term | and intergrated development plan |
| | | | adjustment | of the entity's parent municipality; |
| | | | budget:R1 555 | (iii) is consistent with any service |
| | | | 200.00 | delivery agreement or other |
| | | | | agreement between the entity and |
| | | | | the entity's parent municipality. |

| Finding | SDBIP | Department | Description of | Legal description |
|---------|-----------|------------|--|--|
| | Reference | | audit findings | |
| | | | | |
| | | | | |
| | | | | |
| | 7.1.11.8 | Programmes | Business Plan project: NSF Mixed farming Learnership Adjusted SDBIP Amount: R1606 318.75 Mid-term adjustment budget:R1 672 318.75 | Section 87"(5) (d)(i)(ii)(iii) of the MFMA states the following: The budget of a municipal entity must- (d) include a multi-year business plan for the entity that- (i) sets key financial and non- financial performance objectives and measurement criteria as agreed with the parent municipality; (ii) is consistent with the budget and intergrated development plan of the entity's parent municipality; (iii) is consistent with any service delivery agreement or other agreement between the entity and the entity's parent municipality. |
| | 7.1.11.14 | Programmes | Business Plan project: Services Seta Internship Adjusted SDBIP Amount: R735 000.00 Mid-term adjustment budget:R220 5000.00 | Section 87"(5) (d)(i)(ii)(iii) of the MFMA states the following: The budget of a municipal entity must- (d) include a multi-year business plan for the entity that- (i) sets key financial and non- financial performance objectives and measurement criteria as agreed with the parent municipality; (ii) is consistent with the budget and intergrated development plan of the entity's parent municipality; (iii) is consistent with any service delivery agreement or other agreement between the entity and |

| Finding | SDBIP | Department | Description of | Legal description |
|-------------|-----------|------------|---------------------|---|
| | Reference | | audit findings | |
| | | | , C | |
| | | | | |
| | | | | |
| | | | | the entity's parent municipality. |
| | | | | |
| 5. | 7.1.11.12 | Programmes | Business Plan | Section 87(5)(a)and (b) of the |
| | | | Projects: | MFMA on Municipal entity Budgets |
| Duplication | | | , Services Seta- | states the following: " the budget of |
| of SDBIP | | | Learnership | a municipal entity must- |
| References | | | And Services | (c) Be balanced; |
| in the | | | Seta- Project | |
| Adjusted | | | Management | (d) Be consistent with |
| SDBIP. | | | | any service delivery |
| | | | | agreement or other |
| | | | | agreemement |
| | | | | - |
| | | | | betweenthe entity and |
| | | | | the entity's parent |
| | | | | municipality; |
| | | | | |
| | | | | |
| | 7.1.11.12 | | Business Plan | Section 87(5)(a)and (b) of the |
| | 7.1.11.12 | | Projects: | Section 87(5)(a)and (b) of the MFMA on Municipal entity Budgets |
| 4 | | | Services Seta- | states the following: " the budget of |
| | | | Project | a municipal entity must- |
| | | | Management | |
| | | | Management | (e) Be balanced; |
| | | | | (f) Be consistent with |
| | | | | any service delivery |
| | | | | agreement or other |
| <i>F</i> | | | | č |
| | | | | agreemement |
| | | | | betweenthe entity and |
| | | | | the entity's parent |
| | | | | municipality; |
| | | | | |
| | | | | |
| | | | | |

| Finding | SDBIP | Department | Description of | Legal description |
|---------|-----------|------------|----------------|---------------------------------------|
| | Reference | | audit findings | |
| | | | | |
| | | | | |
| | | | | |
| | 7.1.11.4 | Programmes | Business Plan | Section 87(5)(a)and (b) of the |
| | | | Projects: | MFMA on Municipal entity Budgets |
| | | | Services Seta- | states the following: " the budget of |
| | | | Adult | a municipal entity must- |
| | | | Education and | (g) Be balanced; |
| | | | Training | |
| | | | | (h) Be consistent with |
| | | | | any service delivery |
| | | | | agreement or other |
| | | | | agreemement |
| | | | | betweenthe entity and |
| | | | | the entity's parent |
| | | | | municipality; |
| | | | | |
| | | | | |
| | | | | |
| | 7.1.11.4 | Programmes | Business Plan | Section 87(5)(a)and (b) of the |
| | | | Projects: | MFMA on Municipal entity Budgets |
| | | | Services Seta- | states the following: " the budget of |
| | | | Internship | a municipal entity must- |
| | | | programme | (i) Be balanced; |
| | | | | (j) Be consistent with |
| | | | | any service delivery |
| | | | | |
| | | | | agreement or other |
| | | | | agreemement |
| | | | | betweenthe entity and |
| | | | | the entity's parent |
| | | | | municipality; |
| | | | | |
| | | | | |
| | | | | |

Lack of adequate review of SDBIP, budget and Multi-year business plan by management due to lack of capacity.

Risk/impact

There is risk that performance information reported to the public may not be useful. There is a risk of negative external audit opinion regarding predetermined objectives.

Recommendations

Management should revise the SDBIP before approval by the board to ensure that there is no omission of targets;

Management must ensure that there is a budget allocated for all Annual and Quarterly targets on the SDBIP;

Management must ensure that there is alignment between SDBIP and Mid-term budget adjustment and multi-year business plan.

Management Response

Management Comment

- Management will revise the SDBIP before approval by the board to ensure that there is no omission of targets;
- Management will ensure that there is a budget allocated for all Annual and Quarterly targets on the SDBIP;
- Management will ensure that there is alignment between SDBIP and Mid-term budget adjustment and multi-year business plan.

| Corrective Measure (How are you going to resolve the issue that has been identified) | | | | | | |
|--|---------------------------------|-------------------------------------|--------------------------------------|--|--|--|
| Description of the corrective measure | Due Date | Description of the POE | Responsible Person | | | |
| - Comparison will be made of the MYBP and SDBIP, any | Thursday (02- February 2023) | Revised SDBIP with all corrections. | - Executive Manager Programmes | | | |

| projects that appear in the MYBP and don't appear in the SDBIP will be included in the SDBIP. | - Executive Manager CPS - CFO - CEO |
|--|---|
| - A comparison will be made of the Adjusted Budget Project allocations and the Project amounts in the SDBIP. Any variances will be corrected. | |
| - Management will ensure the Quarterly budget amount are a pro-rata of Annual Budget amounts. | |
| - Comparison of MYBP references with SDBIP project references any duplications should be removed. | |

Preventative Control (What control are you putting in place to ensure that the finding does not recur

| Description of the Preventative Control | Due Date | Description of the POE | Responsible Person |
|--|----------------|---------------------------------------|-----------------------|
| Matching targets | 02 March 2023 | MYBP with targets | - Executive |
| per MYBP with | when preparing | that agree to those | Manager |
| targets per | the 110 day | of the SDBIP. | Programmes |
| SDBIP. | 2023-24 | | Euro eurtinea |
| | Budget. | SDBIP with budget | - Executive |
| Matching project | Buugot. | amounts that | Manager |

| budget amounts | match to those of | CPS |
|--------------------------------|-------------------|-------|
| in budget with those in SDBIP. | the SDBIP. | - CFO |

| Detective Control (Should your preventative control not function, how are you going to detect the lapse of the preventative control) | | | |
|---|--|--|---|
| Description of the Detective Control | Due Date | Description of the POE | Responsible Person |
| Matching targets per MYBP with targets per SDBIP. Matching project budget amounts in budget with those in SDBIP. | 02 March 2023 when preparing the 110 day 2023-24 Budget. | MYBP with targets that agree to those of the SDBIP. SDBIP with budget amounts that match to those of the SDBIP. | - Executive Manager Programmes - Executive Manager CPS - CFO - CEO |

6. TARGETS DESIGNED DO NOT MEET SMART CRITERIA

Standard

Paragraph 3.3 of Framework for Managing programme Performance Information (FMPPI) states the following:

A useful set of criteria for selecting performance targets is the "SMART" criteria

- **Specific:** the nature and required level of performance can be clearly identified
- Measurable: the require performance can be measured
- Achievable: the target is realistic given the existing capacity
- **Relevant:** the required performance is linked to the achievement of a goal
- *Time-bound:* the time period or deadline for delivery is specified.

Finding

During the review of adjusted SDBIP of ANDA, it was identified that the targets on the table below do not meet SMART criteria. Please refer to the table for internal audit comments.

| Business | Department | Annual KPI | Annual Target | Internal audit comments |
|-------------------|------------|--------------------------------|-----------------------------------|-------------------------------|
| Plan Reference | | | | |
| Reference | | | | |
| 3.7.4.1 | OCEO | Number of organisational | 1. Review and facilitate approval | The target does not meet the |
| | | policies reviewed and approved | of organisational policies by 30 | SMART Criteria. It is not |
| | | | June 2023 | measurable. |
| 3.7.4.2 | OCEO | Number of targets achieved | 1. Hold 4 Ordinary ANDA Board | There is no alignment between |
| | | | Meetings held by 30 June 2023. | the target and the KPI. |
| | | | 2. Hold 1x Strategic Planning | |
| | | | Session by 30 June 2023. | |
| | | | 3. Submit 1 Adjusted Budget | |
| | | | 2022/23, 1 Budget 2023/23, 1x | |
| | | | Multi-Year Business Plan | |
| | | | 2022/2023, 4 In-Year Reports | |
| | | | 2021/22, 1 Annual Report | |
| | | | 2021/22, 1 Mid-Term Report | |
| | | | 2022/23 and 1 Annual | |
| | | | Performance Report 2021/22 to | |
| | | | ANDM and the Board by 30 June | |
| | | | 2023 | |
| | | | 4.Submit 1 Adjusted Multi-Year | |
| | | | Business Plan 2022/23, 1 Final | |
| | | | SDBIP 2023/2024 and 1 Adjusted | |
| | | | SDBIP 202/23 the Board by 30 | |
| | | | June 2023. | |

| Business | Department | Annual KPI | Annual Target | Internal audit comments |
|-----------|------------|-----------------------|---------------------------------|-------------------------------|
| Plan | | | | |
| Reference | | | | |
| | | | | |
| 3.7.4.3 | OCEO | Number of CDF Meeting | 1. Attend 4x DCF Meetings by 30 | There is no alignment between |
| | | attended | June 2023 | the target and the KPI. |

| Business | Department | Annual KPI | Annual Target | Internal audit comments |
|-----------|------------|--------------------------------|-------------------------------------|-------------------------------|
| Plan | | | | |
| Reference | | | | |
| 3.7.4.4 | OCEO | Number of Quartely in-year | 1.Facilitate the consolidation and | There is no alignment between |
| | | Performance and Financial | submission of 4x Quarterly In- | the target and the KPI. |
| | | reports consolidated and | year Performance and Financial | |
| | | submitted to the Office of the | Reports to ANDM, Audit and | Y |
| | | CEO, Number of Mid-term | performance Committee and | |
| | | Budget and performance | Board by 30 June 2023. | |
| | | assessment reports | 2. Facilitate the consolidation and | |
| | | consolidated and submitted to | submission of 1x Mid-term Budget | |
| | | the Office of the CEO, Number | and performance assessment | |
| | | of Draft ANDA Multi-year | report 2022/23 to ANDM, Audit | |
| | | Business Plans consolidated | and performance Committee and | |
| | | and submitted to the Office of | Boardby 31 May 2023. | |
| | | the CEO and Number of Draft | 3. Facilitate the consolidation and | |
| | | SDBIP consolidated and | submission of 1x Draft ANDA | |
| | | submitted to the Office of the | Multi-year Business Plan 2023/24 | |
| | | CEO, Number of Monthly | to ANDM, Audit and performance | |
| | | management meetings held, | Committee and Board by 31 May | |
| | | Number of Annual reports | 2023. | |
| | | consolidated and submitted to | 4. Facilitate the consolidation and | |
| | | the Office of the CEO | submission of 1x Draft SDBIP | |
| | | | 2023/24 to ANDM, Audit and | |
| | | | performance Committee and | |
| | | | Board by 31 May 2023. | |
| | | | 5 Hold 12-Monthly management | |
| | | | meetings by 30 June 2023 | |
| | | | 6. Facilitate consolidation and | |
| | | | submission of the Annual Report | |

| Business | Department | Annual KPI | Annual Target | Internal audit comments |
|-----------|------------|-----------------------------|--|---------------------------------------|
| Plan | | | | |
| Reference | | | | |
| 3.7.4.5 | OCEO | Number of quartely reviews | Quartely review ANDA Audit | The target does not meet the |
| | | undertaken | Action Plan by 30 June 2023 | SMART Criteria. It is not measurable. |
| 3.7.4.6 | OCEO | Number of quartely reviews | Quarterly review ANDA Risk | The target does not meet the |
| | | undertaken | Register by 30 June 2023 | SMART Criteria. It is not measurable. |
| 3.7.4.7 | OCEO | Number of quarterly reviews | Quarterly review ANDA litigations | The target does not meet the |
| | | undertaken | Register by 30 June 2023 | SMART Criteria. It is not |
| | | | | measurable. |
| 3.7.3.2 | BTO | Number of Quartely Asset | To produce 4 Quartely Asset | The following target "Advertising |
| | | Management reports produced | Management Reports by 30 June | for insurance services" does not |
| | | | 2023 dealing with (12x fixed asset | meet SMART principle. It is not |
| | | | register, 12x purchase listing | measurable and it is not clear |
| | | | (additions), 4x asset verification | how it relates to the KPI. |
| | | | reports, 12x updates to the | |
| | | | portfolio of assets insured). | |
| | | | Advertising for insurance services | |
| | | | - | |
| | | | reports, 12x updates to the portfolio of assets insured). Advertising for insurance services by 30 June 2023. | |

| Business | Department | Annual KPI | Annual Target | Internal audit comments |
|-----------|------------|------------------------------|-----------------------------------|-----------------------------------|
| Plan | | | | |
| Reference | | | | |
| 3.7.3.3 | вто | Number of monthly fleet | 1. To produce 12 Monthly Fleet | There is lack of alignment |
| 0.7.0.0 | ыю | registers produced | Management Reports by 30 June | between KPI and the following |
| | | registers produced | 2023. | target "Update licensing of motor |
| | | | 2. Update licensing of motor | vehicle and servicing of motor |
| | | | vehicle and servicing of motor | vehicle by 30 June 2023" Further |
| | | | vehicle by 30 June 2023 | this target is not measurable. |
| 3.7.3.5 | вто | Number of deliverables | Complete 7 deliverables by 30th | The target does not meet the |
| | | completed | of June 2023 consisting of (1 x | SMART Criteria. It is not |
| | | | ANDA set of AFS,12 x Sec 87 | specific. |
| | | | reports (budget vs actual | |
| | | | expenditure), 1 x Sec 88 Mid-term | |
| | | | report 4 x Quarterly in-year | |
| | | | Financial and performance | |
| | | | Reports, External Auditing), | |
| | | | ANDA 2023/24 Final Budget, | |
| | | | ANDA 2022/23 Adjusted Budget | |
| 3.7.3.6 | вто | Number of System Reports and | 1. 100% mSCOA compliant by | The target does not meet the |
| | | proof of payments produced | 30 June 2023 | SMART Criteria. It is not |
| | | | 2. Faciliate payment of Licence | measurable. Further, |
| | | | fees by 30 June 2023 | management has used % as a |
| | | | | unit of measure for the target. |
| | | | | This requires data for numerator |

| Business | Department | Annual KPI | Annual Target | Internal audit comments |
|-----------|------------|--------------------------------|-----------------------------------|-------------------------------|
| Plan | | | | |
| Reference | | | | |
| | | | | |
| | | | | and data for denominator |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 3.7.3.7 | BTO | Number of reports produced | To produce 4 deliverables by 30 | There is no alignment between |
| | | | June 2023 entailing (12x Cash & | the target and the KPI. |
| | | | Investment reports, 4x VAT | |
| | | | reports, 12x PAYE,12x Bank | |
| | | | Reconciliation,12x Creditors | |
| | | | Reconciliation) | |
| 3.7.3.8 | BTO | Number of reviews and updates | 1. To review, update ANDA | The target does not meet the |
| | | undertaken on the Irregular | Irregular expenditure by 30 June | SMART Criteria. It is not |
| | | Expenditure | 2023 | measurable. |
| 3.7.1.1 | PROGRAMMES | Number of District Cannabis | 1. Development of District | The target does not meet the |
| | | Master Plans developed | Cannabis Master Plan by 30 June | SMART Criteria. It is not |
| | | | 2023 | measurable. |
| 3.7.1.4 | PROGRAMMES | Number of proposals submitted, | Mobilise funding for the | The target does not meet the |
| | | Number of social facilitation | development of technical studies | SMART Criteria. It is not |
| | | sessions undertaken | and undertake social facilitation | measurable. |
| | | | for Macadamia Nuts Plantation by | |

| Business | Department | Annual KPI | Annual Target | Internal audit comments |
|------------|------------|--------------------------------|------------------------------------|------------------------------------|
| Plan | | | | |
| Reference | | | | |
| | | | 20 June 2022 | |
| | | | 30 June 2023 | |
| | | | | |
| | | | | Y |
| 3.7.1.7.1 | PROGRAMMES | Number of operating partners | Secure PTO and operating | The target does not meet the |
| | | secured | partner for Msukeni Development | SMART Criteria. It is not |
| | | | Centre by 30 June 2023 | measurable. |
| 3.7.1.7.5 | PROGRAMMES | Number of social facilitations | 1. Undertake social Facilitation | The target does not meet the |
| | | undertaken. | and establish PSC by 30 June | SMART Criteria. It is not |
| | | | 2023 | measurable. |
| 3.7.1.11.5 | PROGRAMMES | Number of programmes | Monitor and report on the | The target does not meet the |
| | | monitored | implementation of Boxer and | SMART Criteria. It is not |
| | | | WRSETA Business training | measurable and is not specific. |
| | | | programme for 100 learners by | |
| | | | 30 June 2023 | |
| 3.7.1.11.6 | PROGRAMMES | Number of Learners trained, | 1 .Monitor the Implementation of | There is no alignment between |
| | | Number of learnership | horticulture short skills | the target and the KPI. Further, |
| | | programme monitored | programme on 240 learners by | target does not meet SMART |
| | | | 30 June 2023 | principles as it is not measurable |
| | | | 2. Monitor the Implementation of | and is not specific. |
| | | | learnership programme on | |
| | | | horticulture for 50 learners by 30 | |

| Business | Department | Annual KPI | Annual Target | Internal audit comments |
|------------|------------|------------------------------|----------------------------------|------------------------------------|
| Plan | | | | |
| Reference | | | | |
| | | | | |
| | | | June 2023 | |
| | | | | |
| | | | | |
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| | | | | |
| | | | | |
| 3.7.1.11.7 | PROGRAMMES | Number of Learners trained, | Monitor Implementation of | There is no alignment between |
| | | Number of monitoring reports | learnership programme on project | the target and the KPI. Further, |
| | | developed. | management for 60 learners by | target does not meet SMART |
| | | | 30 June 2023 | principles as it is not measurable |
| | | | | and is not specific. |
| 3.7.1.11.8 | PROGRAMMES | Number of close out reports | 1. Monitor close up of the | There is no alignment between |
| | | developed and 236 number of | learnership programme on mixed | the target and the KPI. Further, |
| | | certificates | farming by 30 June 2023 | target does not meet SMART |
| | | | | principles as it is not measurable |
| | | | | and is not specific. |
| 3.7.1.11.9 | PROGRAMMES | Number of payments monitored | Monitor payments of Final trench | The target is not measurable. |
| | | | for learnership programme by 30 | |
| | | | June 2023 | |
| | | | 1 | 1 |
| | | | | |
| | | Y | | |

| Business | Department | Annual KPI | Annual Target | Internal audit comments |
|-------------|------------|---------------------------------|--------------------------------------|--------------------------------------|
| Plan | | | | |
| Reference | | | | |
| 0744440 | | | En ellitete de since la mandation of | There is no all more such his to see |
| 3.7.1.11.10 | PROGRAMMES | Number of Learners trained, | Facilitate the implementation of | There is no alignment between |
| | | Number of monitoring reports | short skills programme in End | the target and the KPI. Further, |
| | | developed. | User Computing by 30 June 2023 | target does not meet SMART |
| | | | | principles as it is not measurable |
| | | | | and is not specific. |
| 3.7.1.11.11 | PROGRAMMES | Amount of financial support | 1. Provide financial support for | The target is not measurable. |
| | | provided to Emfundisweni | Emfundiswe operations by 30 | Therefore, it does not meet |
| | | | September 2022 | SMART principles. |
| 3.7.1.11.12 | PROGRAMMES | Number of learners trainined in | 1. Monitor Implementation of | There is no alignment between |
| | | Clothing manufacturing | learnership programme on | the target and the KPI. Further, |
| | | processes by 30 December | Business Administration and | target does not meet SMART |
| | | 2023 | Generic Mnagementt for 40 | principles as it is not measurable |
| | | | learners by 30 June 2023 | and is not specific. |
| 3.7.1.11.13 | PROGRAMMES | Number of learners trained in | Monitor Implementation of | There is no alignment between |
| | | Project Management by 30 | learnership programme on project | the target and the KPI. Further, |
| | | December 2023 | management for 31 learners by | target does not meet SMART |
| | | | 30 December 202 | principles as it is not measurable |
| | | | | and is not specific. |

| Business | Department | Annual KPI | Annual Target | Internal audit comments |
|-------------|------------|----------------------------------|-------------------------------------|-------------------------------------|
| Plan | | | | |
| Reference | | | | |
| 3.7.1.11.14 | PROGRAMMES | Number of learners trained in | Facilitate the implementation of | There is no alignment between |
| | | Adult Education and Training by | short skills programme in Adult | the target and the KPI. Further, |
| | | 30 June 2023 | Education and Training by 30 | target does not meet SMART |
| | | | June 2023 | principles as it is not measurable |
| | | | | and is not specific. |
| 3.7.1.11.14 | PROGRAMMES | Number of unemployed | 1. Facilitate the implementation of | There is no alignment between |
| | | participating in internship | internship programme by 30 June | the target and the KPI. Further, |
| | | Programme by 30 June 2023 | 2023 | target does not meet SMART |
| | | | | principles as it is not measurable |
| | | | | and is not specific. |
| 3.7.2.1 | CPS | Number of CPS policies | 1. Monitor implementation of CPS | The target is not measurable and |
| | | monitored, Number of | Policies by 30 June 2023 | is not specific. Therefore, it does |
| | | organisational policies reviewed | 2. Monitor Reviewal and facilitate | not meet SMART principles. |
| | | and approved | approval of all ANDA policies by | |
| | | | 30 June 2023 | |
| 3.7.2.2 | CPS | Number of payroll runs | 1. To process 12x payroll runs by | There is no alignment between |
| | | processed | 30 June 2023 2. | the target and the KPI. Further, |
| | | | To submit tax returns to SARS by | target does not meet SMART |
| | | | 30 June 2023 | principles as it is not measurable, |
| | | | | is not specific and is not time |
| | | | | bound. |

| Business | Department | Annual KPI | Annual Target | Internal audit comments |
|-----------|------------|-----------------------------|------------------------------------|-------------------------------------|
| Plan | | | | |
| Reference | | | | |
| 3.7.2.3 | CPS | Number of organisational | 1.Facilitate the reviewal and | There is no alignment between |
| | | structures reviewed and | approval of organisational | the KPI and the target. Further, |
| | | approved | structure by 30 June 2023 | the target is not measurable. |
| 3.7.2.4 | CPS | Number employees trained on | 1. Approval of Annual Training | There is no alignment between |
| | | CPMD, Number of training | Plan 2.Coordinate | the target and the KPI. Further, |
| | | programmes facilitated | Training of BID Committees and | target does not meet SMART |
| | | | 3. OHS Committee by 30 June | principles as it is not measurable, |
| | | | 2023 4. Register 2 employees | and is not specific. |
| | | | on affiliation boards (CIGFARO | |
| | | | and IMFO) 5. Develop skills | |
| | | | audit for all entity employees and | |
| | | | develop annual training plan | |
| | | | thereof by 30 June 2023. | |
| 3.7.2.5 | CPS | Number of deliverables | Complete 3 deliverables entaling | There is no alignment between |
| | | completed | (Renewal of Anti-virus software | the target and the KPI. Further, |
| | | | on Laptops, Renewal of VIP | target does not meet SMART |
| | | | System license and Monitoring | principles as it is not measurable, |
| | | | validity of software Licences | and is not specific. |
| | | | (munisoft) by 30 June 2023) | |
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| | Annual KPI | Annual Target | Internal audit comments |
|------|---------------------------------|---|--|
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| 0.00 | | | The second second second |
| CPS | | | There is no alignment between |
| | | | the target and the KPI. Further, |
| | approved manual general filling | 2023 2. Conduct | target does not meet SMART |
| | systems | Workshop on Annual file plan by | principles as it is not measurable |
| | | 30 June 202 | and is not specific. |
| CPS | Number of Accountability | 1. Development and Approval of | There is no alignment between |
| | Agreements for Senior | x4 Accountability Agreements for | the target and the KPI. Further, |
| | Managers developed and | Senior Managers by 30 June | target does not meet SMART |
| | approved. Departmental | 2023 | principles as it is not measurable |
| | meetings conducted | 2. Coordinate PMS Workshop to | and is not specific. |
| | | all Entity Employees | |
| | | 3. Conduct performance | |
| | | assessment for CPS staff by 30 | |
| | | June 2023 | |
| CPS | Number of Cleaning Material | 1. Procure cleaning Material and | There is no alignment between |
| | procured, Number of monitoring | supplies by 30 June 2023 | the target and the KPI. Further, |
| | registers | 2. Monitor cleaning services by 30 | target does not meet SMART |
| | | June 2023 | principles as it is not measurable, |
| | | | and is not specific. |
| | | 1 | |
| | | | |
| | | | |
| | | CPS Number of Accountability Agreements for Senior Managers developed and approved. Departmental meetings conducted CPS Number of Cleaning Material procured, Number of monitoring Number of monitoring | for the implementation of the approved manual general filling systemsGeneral File plan by 30 June 20232. Conduct Workshop on Annual file plan by 30 June 202CPSNumber of Accountability Agreements for Senior Managers developed and approved. Departmental meetings conducted1. Development and Approval of x4 Accountability Agreements for Senior Managers by 30 June 2023CPSNumber of Accountability Agreements for Senior Managers developed and approved. Departmental meetings conducted2. Coordinate PMS Workshop to all Entity Employees 3. Conduct performance assessment for CPS staff by 30 June 2023CPSNumber of Cleaning Material procured, Number of monitoring registers1. Procure cleaning Material and supplies by 30 June 2023 |

| Business | Department | Annual KPI | Annual Target | Internal audit comments |
|-----------|------------|------------------------------------|---------------------------------------|-------------------------------------|
| Plan | | | | |
| Reference | | | | |
| 3.7.2.9 | CPS | Number of quartely procurement | 1. To procure stationery quartely | There is no alignment between |
| 0.1.2.0 | | undertaken, Number of quartely | by 30 June 2023 | the target and the KPI. Further, |
| | | service of the printing Machine | 2. Service Printing Machine | target does not meet SMART |
| | | | - | |
| | | | quarterly by 30 June 2023 | principles as it is not measurable, |
| | | | | and is not specific. |
| 3.7.2.10 | CPS | Number of positions filled in line | Recruitment of 5 vacant position | The target is not specific and is |
| | | with 2022/23 Organogram | as per 2022/2023 Organogram | not aligned to KPI |
| | | | (HR Practitioner,SMME | |
| | | | Coordinator,Budget and | |
| | | | Expenditure Officer, Procurement | |
| | | | Clerk and Programme Support | |
| | | | Officer) by 30 June 2022 | |
| 3.7.2.11 | CPS | Number of offices inspected of | To provide health and safety for | There is no alignment between |
| | | health and safety at a regular | employees and Assets of the | the target and the KPI. Further, |
| | | intervals | institution at all times by enforcing | target does not meet SMART |
| | | | a high standard of Safety, Health | principles as it is not measurable, |
| | | | and Hygiene by 30 June 2023 | and is not specific. |
| 3.7.2.12 | CPS | Number of Leave Applications | 1. To Manage the Leave | There is no alignment between |
| | | processed | Administration of the Institution by | the target and the KPI. Further, |
| | | | 30 June 2023 | target does not meet SMART |
| | | | | principles as it is not measurable, |
| | | | | and is not specific. |

| Business | Department | Annual KPI | Annual Target | Internal audit comments |
|-----------|------------|--------------------------------|-----------------------------------|-------------------------------|
| Plan | | | | |
| Reference | | | | |
| | | | | |
| 3.7.2.15 | CPS | Number of Quartely in-year | 1.Submission of 4x Quarterly | There is no alignment between |
| | | Performance and Financial | Reports by 30 June 2023 | the target and the KPI. |
| | | reports consolidated and | 2. Submission of 2021/2022 | |
| | | submitted to the Office of the | Adjusted Budget and Mid Term | 7 |
| | | CEO, Number of Mid-term | performance report 2021/22 to the | |
| | | Budget and performance | Office of the CEO by 31 May | |
| | | assessment reports | 2022. | |
| | | consolidated and submitted to | 3. Submission of 1x Draft ANDA | |
| | | the Office of the CEO, Number | Multi-year Business Plan 2022/23 | |
| | | of Draft ANDA Multi-year | to the Office of the CEO by 31 | |
| | | Business Plans consolidated | May 2022. | |
| | | and submitted to the Office of | 4. Submission of 1x Draft SDBIP | |
| | | the CEO and Number of Draft | 2022/23 to the Office of the CEO | |
| | | SDBIP consolidated and | by 31 May 2022. | |
| | | submitted to the Office of the | 5. Submission of Annual Report to | |
| | | CEO, Number of Monthly | the Office of the CEO by 30 June | |
| | | management meetings held, | 2022 | |
| | | Number of Annual reports | | |
| | | consolidated and submitted to | | |
| | | the Office of the CEO | | |

Root cause

Lack of adequate review of SDBIP by management due to lack of capacity.

Risk/impact

There is risk that performance information reported to the public may not be useful. There is a risk that poorly designed targets may lead to lack of monitoring by leadership and lack accountability of management.

There is a risk of negative external audit opinion regarding predetermined objectives.

Recommendations

Management should revise the SDBIP before approval by the board to ensure that targets set meet SMART criteria.

Management should attend training on planning for performance management to ensure that management is capacitated to be able to design targets that are SMART and is able to critically review usefulness of set indicators.

Management Response

Management Comment

- Management will ensure that Annual Targets are aligned to Annual KPI's
- Management will ensure that SDBIP targets are SMART.
- Management will also ensure that SDBIP targets are traceable back to the MYBP.

| Description of the corrective measure | Due Date | Description of the POE | Responsible Person |
|---|---------------------------------|-------------------------------------|--|
| Comparing Annual KPI's with Annual Targets in SDBIP and make corrections for any variances. | Thursday (02- February 2023) | Revised SDBIP with all corrections. | - Executive Manage Programme - Executive Manage CPS |
| - Reviewing SDBIP targets and revise those that do not meet the SMART principles. | | | -CFC -CEC |
| Matching SDBIP targets to projects in the MYBP. | | | |

| Preventative Control (What control are you putting in place to ensure that the finding does not recur | | | | | |
|--|--|---|---|--|--|
| Description of the Preventative Control | Due Date | Description of the POE | Responsible Person | | |
| Matching Annual KPI's with Annual Targets in the SDBIP. Review SDBIP to ensure that all targets meet the SMART principles. Tracing SDBIP projects back to the MYBP | 02 March 2023 when preparing the 110 day 2023-24 Budget. | SDBIP with Annual KPI's that agree to Annual targets SDBIP with SMART targets. MYBP to which SDBIP can be traced. | - Executive Manager Programmes - Executive Manager CPS - CFO - CEO | | |

| Description of the Detective Control | Due Date | Description of the POE | Responsible Person |
|--|--|---|---|
| Matching Annual KPI's with Annual Targets in the SDBIP. Review SDBIP to ensure that all targets meet the SMART principles. Tracing SDBIP projects back to the MYBP | 02 March 2023 when preparing the 110 day 2023-24 Budget. | SDBIP with Annual KPI's that agree to Annual targets SDBIP with SMART targets. MYBP to which SDBIP can be traced. | Executive Manager Programmes Executive Manager CPS CFO CEO |

Detective Control (Should your preventative control not function, how are you going to

7. KEY PERFORMANCE INDICATORS ON THE SDBIP DO NOT MEET THE CRITERIA OF A GOOD PERFORMANCE INDICATOR

Standard

Chapter 3.2 of FMPPI states the following:

A good performance indicator should be:

- a) Reliabile: the indicator should be accurate enough for its intended use and respond to changes in the level of performance
- b) Well- defined: the indicator needs to have a clear, unambiguous definition so that data will be collected consistently m and be easy to understand and use
- c) Verifiable: it must be possible to validate the processes and systems that procedure the indicator.
- d) Cost-effective: the usefulness of the indicator must justify the cost of collecting the data.
- e) Appropriate: the indicator must avoid unintended consequences and encourages service delivery improvement, and not give managers incentives to carry out activities simply to meet a particular target.
- f) Relevant: the indicator must relate logically and directly to an aspect of the institution's mandate and the realisation of strategic goals and objectives.

Finding

During the review of 2022/23 Adjusted SDBIP of ANDA, it was identified that key performance indicators are not reliable, well defined, verifiable, costs effective, appropriate and relevant. Please refer to the table below for details and internal audit comments.

| Department | Annual KPI | Internal audit comment |
|------------|---|--|
| OCEO | Number of targets achieved | Key performance indicator lacks measurability, objectivity, relevance and preciseness as it does not indicate input or outcome or output the indicator is intended to measure |
| OCEO | Number of CDF Meeting attended | Internal Audit is unable to confirm measurability, objectivity, relevance and preciseness as CDF has not been explained by management. |
| OCEO | Number of Quartely in-year Performance and Financial reports consolidated and submitted to the Office of the CEO, Number of Mid-term Budget and performance assessment reports consolidated and submitted to the Office of the CEO, Number of Draft ANDA Multi-year Business Plans consolidated and submitted to the Office of the CEO and Number of Draft SDBIP consolidated and submitted to the Office of the CEO, Number of Monthly management meetings held, Number of Annual reports consolidated and submitted to the Office of the CEO | Management combined different key performance indicators, of which these indicators maybe a product of different activities. This could lead to limitation of scope regarding verifiability of the indicators. Further, Indicators relate to an internal management process i.e. submission of various documents to CEO. There is no corresponding organisational KPI, Top layer KPI. Even though the KPI as a bottom layer KPI maybe relevant, there is no corresponding relevant top layer KPI. |
| OCEO | Number of quartely reviews undertaken | The Key performance indicator lacks precision. It is general, there is no indication of what is to be reviewed quarterly. This could |

| Department | Annual KPI | Internal audit comment |
|------------|--|---------------------------------------|
| | | lead to targets that are irrelevant |
| | | to the KPI being set by |
| | | management. |
| OCEO | Number of quartely reviews undertaken | The Key performance indicator |
| | | lacks precision. It is general, |
| | | there is no indication of what is to |
| | | be reviewed quarterly. This could |
| | | lead to targets that are irrelevant |
| | | to the KPI being set by |
| | | management. |
| OCEO | Number of quarterly reviews undertaken | The Key performance indicator |
| | | lacks precision. It is general, |
| | | there is no indication of what is to |
| | | be reviewed quarterly. This could |
| | | lead to targets that are irrelevant |
| | | to the KPI being set by |
| | | management. The |
| вто | Number of deliverables completed | The Key performance indicator |
| | | lacks precision. It is general, |
| | · · · · · · · · · · · · · · · · · · · | there is no indication of what |
| | | deliverables are. This could lead |
| | | to targets that are irrelevant to the |
| | | KPI being set by management. |
| вто | Number of System Reports and proof of | The Key performance indicator |
| | payments produced | lacks precision. It is general, |
| | | there is no indication of what |
| | | system and there is also no |
| | | indication of proof of payment of |
| | | what. This could lead to targets |
| | | that are irrelevant to the KPI being |
| | | set by management. |
| BTO | Number of reports produced | The Key performance indicator |
| | | lacks relevance and precision. |
| | | There is no indication of what the |
| | | report is for. Therefore, targets |
| | | set may be irrelevant to the KPI. |

| Department | Annual KPI | Internal audit comment |
|------------|---|---------------------------------------|
| BTO | Number of reviews and updates undertaken on | The indicator lacks precision and |
| ыо | · | |
| | the Irregular Expenditure | measurability. How will the |
| | | management measure the |
| | | number of reviews and updates? |
| PROGRAMMES | Number of District Cannabis Master Plans | The KPI is not specific, it does not |
| | developed | indicate the district for which the |
| | | cannabis master plan is to be |
| | | developed. |
| PROGRAMMES | Number of proposals submitted, Number of social | The KPI is not specific, as it does |
| | facilitation sessions undertaken | not indicate what the proposals |
| | | are for and management has not |
| | | documented what social |
| | | facilitation relates to. |
| PROGRAMMES | Number of operating partners secured | The KPI lacks precision. |
| | | Management has not indicated |
| | | what these operating partners are |
| | | for. |
| PROGRAMMES | Number of social facilitations undertaken. | The KPI is not specific, as it does |
| | | not indicate what social facilitation |
| | Y III | relates to. |
| PROGRAMMES | Number of programmes monitored | The KPI is generic, management |
| | | has not indicated what |
| | | programmes are to be monitored. |
| PROGRAMMES | Number of Learners trained, Number of | The KPI does not indicate what |
| | learnership programme monitored | learners will be trained on. |
| | | Further, the indicator may not be |
| | | verifiable as it is vague. |
| | | |
| | | Management has not indicated |
| | | what the learnership programme |
| | | being monitored relates to. |
| | | 5 |

| Department | Annual KPI | Internal audit comment |
|------------|---|-------------------------------------|
| PROGRAMMES | Number of Learners trained, Number of | The KPI does not indicate what |
| | monitoring reports developed. | learners will be trained on. |
| | | Further, the indicator may not be |
| | | verifiable as it is vague. |
| | | |
| | | Management has not indicated |
| | | what the monitoring report to be |
| | | developed is about. i.e. what will |
| | | the management be monitoring? |
| PROGRAMMES | Number of close out reports developed and 236 | The KPI does not indicate what |
| | number of certificates | the close out report to be |
| | | developed is for, and does not |
| | | indicate what the certificates will |
| | | be for. Therefore, the KPI lacks |
| | | precision |
| PROGRAMMES | Number of payments monitored | The KPI does not indicate what |
| | | these payments will be for. |
| | | Therefore, the KPI lacks precision |
| PROGRAMMES | Number of Learners trained, Number of | The KPI does not indicate what |
| | monitoring reports developed. | learners will be trained on. |
| | | Further, the indicator may not be |
| | | verifiable as it is vague. |
| | | |
| | | Management has not indicated |
| | | what the monitoring report to be |
| | | developed is about. i.e. what will |
| | | the management be monitoring? |
| PROGRAMMES | Number of learners trainined in Clothing | The KPI does is not precise, and |
| | manufacturing processes by 30 December 2023 | is not measurable. The indicator |
| | | may not be verifiable, as it is not |
| | | clear as to how a trained learner |
| | | in clothing manufacturing process |
| | | will be identifiable. |

| Department | Annual KPI | Internal audit comment |
|------------|---|--|
| PROGRAMMES | Number of learners trained in Project | The KPI does is not precise, and |
| | Management by 30 December 2023 | is not measurable. The indicator |
| | | may not be verifiable, as it is not |
| | | clear as to how a trained learner |
| | | |
| | | in project management will be identifiable. |
| PROGRAMMES | Number of learners trained in Adult Education and | |
| PROGRAMMES | | The KPI does is not precise, and |
| | Training by 30 June 2023 | is not measurable. The indicator |
| | | may not be verifiable, as it is not |
| | | clear as to how a trained learner |
| | | in Adult Education and Training |
| | | will be identifiable. |
| PROGRAMMES | Number of unemployed participating in internship | The KPI is not clear as to what |
| | Programme by 30 June 2023 | unemployed refers to. Therefore, |
| | | targets may not be relevant to |
| | | KPI. |
| CPS | Number of CPS policies monitored, Number of | KPI is not measurable as the |
| | organisational policies reviewed and approved | process relating to the monitoring |
| | | of the CPS policies may not be |
| | Y | verifiable. Does organisational |
| | | policies refer to ANDA or to CPS? |
| | | The indicator relating to review |
| | | and approval of organisational |
| | | policies is similar to KPI reference |
| | | numbered 3.7.4.1 of the of CEO's |
| | | office. The key performance |
| | | indicator is not time bound |
| CPS | Number of payroll runs processed | How is a payroll run processed? |
| | | What does processing of a payroll |
| | | run mean. The KPI is not precise. |
| CPS | Number of organisational structures reviewed and | The KPI is not precise. How |
| | approved | many structures does ANDA |
| | | have? Does management intend |
| | | to measure the number of |
| | | structures reviewed? The KPI is |
| | | not time bound |
| | | |

| Department | Annual KPI | Internal audit comment |
|------------|--|---------------------------------------|
| CPS- | Number employees trained on CPMD, Number of | The KPI may not be verifiable i.e. |
| | training programmes facilitated | at what stage is an employee |
| | | trained on CPMD? KPI is not |
| | | measurable and is not precise. |
| | | The training programmes to be |
| | | facilitated have not been |
| | | specified. |
| CPS | Number of deliverables completed | The Key performance indicator |
| CP3 | Number of deliverables completed | |
| | | lacks precision. It is general, |
| | | there is no indication of what |
| | | deliverables are. This could lead |
| | | to targets that are irrelevant to the |
| | | KPI being set by management. |
| CPS | Number of Accountability Agreements for Senior | The Key Performance Indicator |
| | Managers developed and approved. | measures the an internal process |
| | Departmental meetings conducted | of developing and approval of |
| | | Accountability agreements. There |
| | | is no indicator that relates to |
| | | accountability agreements being |
| | Y | entered into with relevant parties. |
| | | Therefore, the KPI is inadequacy |
| | | regarding the relevance of this |
| | | KPI. The processes relating to |
| | | development and approval of |
| | | Accountability agreements of |
| | | senior managers may be different |
| | | to the process relating to |
| | | departmental meetings. It is |
| | | therefore not clear as to why the |
| | | two key performance indicators |
| X | | have been clustered |

| Department | Annual KPI | Internal audit comment |
|------------|--|--|
| CPS | Number of Cleaning Material procured, Number of monitoring registers | The Key performance indicator is not precise. The Key performance indicator has not been adequately designed. It is not clear as why management would choose number of cleaning material procured as a key performance indicator. What is the monitoring register for, i.e. what will the management be monitoring? The process relating to procurement of cleaning material or counting of cleaning material procured may be different from the processes of monitoring. therefore, it is not clear as to why |
| CPS CPS | Number of quartely procurement undertaken, Number of quartely service of the printing Machine Number of Quartely in-year Performance and Financial reports consolidated and submitted to the Office of the CEO, Number of Mid-term Budget and performance assessment reports | these key performance indicators are clustered. Does this KPI relate to any procurement done by CPS or procurement done at ANDA? The indicator relating to number of quarterly service of printing machine is not precise, therefore, it is vague. This KPI is a duplication of KPI with the following reference number 3.7.4.4 of the OCEO |
| | consolidated and submitted to the Office of the CEO, Number of Draft ANDA Multi-year Business Plans consolidated and submitted to the Office of the CEO and Number of Draft SDBIP consolidated and submitted to the Office of the | |

| Department | Annual KPI | Internal audit comment |
|------------|---|------------------------|
| | CEO, Number of Monthly management meetings | |
| | held, Number of Annual reports consolidated and | |
| | submitted to the Office of the CEO | |
| | | |
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Root cause

Lack of adequate review of SDBIP by management due to lack of capacity.

Risk/impact

There is risk that performance information reported to the public may not be useful. There is a risk that poorly designed key performance indicators may lead to lack of service delivery, lack of monitoring by leadership and lack accountability of management. There is a risk of negative external audit opinion regarding predetermined objectives.

Recommendations

Management should revise the SDBIP before approval by the board to ensure that key performance indicators meet the criteria of good performance indicator.

Management should attend training on planning for performance management to ensure that management is capacitated to be able to design good performance indicators and is able to critically review usefulness of set key performance indicators.

Management Response

Management Comment

- Management will revise the SDBIP to ensure that targets are precise.
- Management will ensure that KPI's are verifiable.
- Management will ensure that targets are specific

| Corrective Measure (How are you going to resolve the issue that has been identified) | | | | |
|---|---------------------------------|-------------------------------------|--------------------------------------|--|
| Description of the corrective measure | Due Date | Description of the POE | Responsible Person | |
| Management to revise SDBIP to make targets clear and | Thursday (02- February 2023) | Revised SDBIP with all corrections. | - Executive Manager Programmes | |
| unambiguous thus clarifiying what they are | | | - Executive Manager CPS | |
| measuring. Management to revise SDBIP to make targets have tangible aspects that can be verified. Management to revise SDBIP to make targets clear on what they are measuring. They should be specific. | | | -CFO -CEO | |

Preventative Control (What control are you putting in place to ensure that the finding does not recur

| Description of the Preventative Control | Due Date | Description of the POE | Responsible Person |
|--|--|---|---|
| Review SDBIP to ensure that targets clear and unambiguous. Review SDBIP to ensure that targets have tangible aspects that can be verified. To review SDBIP to make sure targets are clear on what they are measuring. They should be specific. | 02 March 2023 when preparing the 110 day 2023-24 Budget. | SDBIP targets that are clear and unambiguous. SDBIP with targets that are verifiable. SDBIP with targets that are specific. | Executive Manager Programmes Executive Manager CPS CFO CEO |

| Detective Control (Should your preventative control not function, how are you going to detect the lapse of the preventative control) | | | | | |
|--|--|--|---|--|--|
| Description of the Detective Control | Due Date | Description of the POE | Responsible Person | | |
| Review SDBIP to ensure that targets clear and unambiguous. Review SDBIP to ensure that targets have | 02 March 2023 when preparing the 110 day 2023-24 Budget. | MYBP with targets that agree to those of the SDBIP. SDBIP with budget amounts that match to those of the SDBIP. | Executive Manager Programmes Executive Manager CPS | | |

| tangible aspects that can be verified. To review SDBIP to make sure targets are clear on what they are measuring. They should be specific. | | | CFO CEO |
|---|--|--|------------|
| | | | |
| | | | |

8. DUPLICATIONS OF SDBIP

Standard

Chapter 3.2 (b) and 3.2 (e) of FMPPI states the following:

A good performance indicator should be:

- a) Well- defined: the indicator needs to have a clear, unambiguous definition so that data will be collected consistently m and be easy to understand and use
- b) Appropriate: the indicator must avoid unintended consequences and encourages service delivery improvement, and not give managers incentives to carry out activities simply to meet a particular target.

Finding

During the review of SDBIP it was identified that the indicators below had elements of duplication. Please refer to the table below for details

| Business Plan | Department | Annual KPI | Annual Target | Internal Audit comment |
|---------------|------------|--------------------------------|-------------------------------------|--------------------------|
| Reference | | | | |
| 3.7.1.11.14 | PROGRAMMES | Number of learners trained in | Facilitate the implementation of | Duplicated business plan |
| | | Adult Education and Training | short skills programme in Adult | reference number |
| | | by 30 June 2023 | Education and Training by 30 June | <i>Y</i> |
| | | | 2023 | |
| 3.7.1.11.14 | PROGRAMMES | Number of unemployed | 1. Facilitate the implementation of | Duplicated business plan |
| | | participating in internship | internship programme by 30 June | reference number |
| | | Programme by 30 June 2023 | 2023 | |
| 3.7.2.15 | CPS | Number of Quartely in-year | 1.Submission of 4x Quarterly | Duplicated KPI |
| | | Performance and Financial | Reports by 30 June 2023 | |
| | | reports consolidated and | 2. Submission of 2021/2022 | |
| | | submitted to the Office of the | Adjusted Budget and Mid Term | |
| | | CEO, Number of Mid-term | performance report 2021/22 to the | |
| | | Budget and performance | Office of the CEO by 31 May 2022. | |
| | | assessment reports | 3. Submission of 1x Draft ANDA | |
| | | consolidated and submitted to | Multi-year Business Plan 2022/23 to | |
| | | the Office of the CEO, | the Office of the CEO by 31 May | |
| | | Number of Draft ANDA Multi- | 2022. | |
| | | year Business Plans | 4. Submission of 1x Draft SDBIP | |
| | | consolidated and submitted to | 2022/23 to the Office of the CEO by | |
| | | the Office of the CEO and | 31 May 2022. | |
| | | Number of Draft SDBIP | 5. Submission of Annual Report to | |
| | | consolidated and submitted to | the Office of the CEO by 30 June | |
| | | the Office of the CEO, | 2022 | |
| | y | Number of Monthly | | |

| Business Plan | Department | Annual KPI | Annual Target | Internal Audit comment |
|---------------|------------|-------------------------------|---------------|------------------------|
| Reference | | | | |
| | | management meetings held, | | |
| | | Number of Annual reports | | |
| | | consolidated and submitted to | | |
| | | the Office of the CEO | | |

| Business Plan | Department | Annual KPI | Annual Target | Internal Audit comment |
|---------------|------------|--------------------------------|-------------------------------------|------------------------|
| Reference | | | | |
| 3.7.4.4 | OCEO | Number of Quartely in-year | 1.Facilitate the consolidation and | Duplicated KPI |
| | | Performance and Financial | submission of 4x Quarterly In-year | |
| | | reports consolidated and | Performance and Financial Reports | |
| | | submitted to the Office of the | to ANDM, Audit and performance | |
| | | CEO, Number of Mid-term | Committee and Board by 30 June | |
| | | Budget and performance | 2023. | |
| | | assessment reports | 2. Facilitate the consolidation and | |
| | | consolidated and submitted to | submission of 1x Mid-term Budget | |
| | | the Office of the CEO, | and performance assessment report | |
| | | Number of Draft ANDA Multi- | 2022/23 to ANDM, Audit and | |
| | | year Business Plans | performance Committee and | |
| | | consolidated and submitted to | Boardby 31 May 2023. | |
| | | the Office of the CEO and | 3. Facilitate the consolidation and | |
| | | Number of Draft SDBIP | submission of 1x Draft ANDA Multi- | |
| | | consolidated and submitted to | year Business Plan 2023/24 to | |
| | | the Office of the CEO, | ANDM, Audit and performance | |
| | | Number of Monthly | Committee and Board by 31 May | |
| | | management meetings held, | 2023. | |
| | | Number of Annual reports | 4. Facilitate the consolidation and | |
| | | consolidated and submitted to | submission of 1x Draft SDBIP | |
| | | the Office of the CEO | 2023/24 to ANDM, Audit and | |
| | | Y | performance Committee and Board | |
| | | | by 31 May 2023. | |
| | 7 | | 5.Hold 12 Monthly management | |

| Business Plan | Department | Annual KPI | Annual Target | Internal Audit comment |
|---------------|------------|------------|------------------------------------|------------------------|
| Reference | | | | |
| | | | meetings by 30 June 2023 | |
| | | | 6. Facilitate consolidation and | |
| | | | submission of the Annual Report to | |
| | | | ANDM, Audit and Performance | |
| | | | Committee and Board by 30 June | |
| | | | 2023 | |
| | | | | |
| | | | | |
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Lack of adequate review of SDBIP by management due to lack of attention to details.

Risk/impact

There is risk that performance information reported to the public may not be useful. There is a risk of negative external audit opinion regarding predetermined objectives.

Recommendations

Management should revise the SDBIP before approval by the board to ensure that duplications of the SDBIP are resolved.

Management Response

Management Comment

- Management will ensure that KPI's are not duplicated.

| Corrective Measure (How are you going to resolve the issue that has been identified) | | | |
|---|---------------------------------|-------------------------------------|--|
| Description of the corrective measure | Due Date | Description of the POE | Responsible Person |
| Management to revise SDBIP to remove duplicate KPI's. | Thursday (02- February 2023) | Revised SDBIP with all corrections. | Executive Manager Programmes Executive Manager CPS |
| | | | -CFO |
| / | | | -CEO |

Preventative Control (What control are you putting in place to ensure that the finding does not recur

| Description of the Preventative Control | Due Date | Description of the POE | Responsible Person |
|--|--|--|---|
| - Review SDBIP to ensure that KPI's are not duplicated. | 02 March 2023 when preparing the 110 day 2023-24 Budget. | - SDBIP KPI's that are not duplicated. | Executive Manager Programmes Executive Manager CPS CFO CEO |

| Detective Control (Should your preventative control not function, how are you going to detect the lapse of the preventative control) | | | | |
|--|--|--|---|--|
| Description of the Detective Control | Due Date | Description of the POE | Responsible Person | |
| - Review SDBIP to ensure that KPI's are not duplicated. | 02 March 2023 when preparing the 110 day 2023-24 Budget. | - SDBIP KPI's that are not duplicated. | - Executive Manager Programmes - Executive Manager CPS - CFO - CEO | |