



THE PRESIDENCY  
REPUBLIC OF SOUTH AFRICA

DEPARTMENT: PERFORMANCE MONITORING AND EVALUATION

# **Self-Assessment Module of the Management Performance Assessment Tool (MPAT)**

**Version 1.0  
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## ACRONYMS AND ABBREVIATIONS

|      |   |
|------|---|
| DPME | Department of Performance Monitoring and Evaluation |
| DPSA | Department of Public Service and Administration     |
| EA   | Executive Authority                                 |
| HR   | Human Resources                                     |
| HOD  | Head of Department                                  |
| M&E  | Monitoring and Evaluation                           |
| MTSF | Medium Term Strategic Framework                     |
| MPSA | Minister of Public Service and Administration       |
| NT   | National Treasury                                   |
| OPSC | Office of the Public Service Commission             |
| PFMA | Public Finance Management Act                       |
| PGDS | Provincial Growth and Development Strategy          |
| PMDS | Performance Management and Development System       |
| PSA  | Public Service Act                                  |
| SMS  | Senior Management Service                           |

## INTRODUCTION

The MPAT Framework considers that each department has a set of resources, namely, human capital (people), financial resources (budget allocation); and facilities. Each department is responsible for a set of core competencies that are broadly categorised as four Key Performance Areas (KPA); namely, Strategic Management; Governance and Accountability; Human Resource and Systems Management and Financial Management.

Each KPA is further disaggregated into performance areas. Together, the KPAs and performance areas with specific inputs and activities result in a set of targeted outputs. In this version, however, MPAT is focused on Management Practices.

### Key Performance Areas (KPAs) and Performance Areas

The Management Practices assessed through MPAT fall under one of the four KPAs; namely Strategic Management, Governance and Accountability, Human Resource and Systems Management and Financial Management. The KPAs are further broken down to various Performance Areas.

The KPAs and Performance Areas are as follows:

| <b>MPAT KEY PERFORMANCE AREAS AND PERFORMANCE AREAS</b> |   |   |   |
|---|---|---|---|
| <b>1. Strategic Management</b>                          | <b>2. Governance and Accountability</b> | <b>3. Human Resource and Systems Management</b> | <b>4. Financial Management</b>  |
| 1.1 Strategic Planning                                  | 2.1 Service Delivery Improvement        | 3.1 Human Resource Strategy and Planning        | 4.1 Supply Chain Management   |
| 1.2 Programme Management                                | 2.2 Management Structures               | 3.2 HR Practices & Administration               | 4.2 Asset Management  |
| 1.3 Monitoring and Evaluation                           | 2.3 Accountability                      | 3.3 Management of Performance                   | 4.3 Revenue Management  |
|   | 2.4 Ethics                              | 3.4 Employee Relations                          | 4.4 Compensation of Employees (Addresses the HR capacity within Financial Management) |
|   | 2.5 Internal audit                      | 3.5 IT Systems                                  | 4.5 General   |
|   | 2.6 Risk management                     |   | 4.6 Goods and Services  |
|   | 2.7 Delegations                         |   | 4.7 Transfer Payments   |
|   |   |   | 4.8 Liability Management  |

In each performance area, indicators are specified to provide a reliable and valid measure of performance. The Indicator Framework contains details of indicators under each Key Performance Area. There are different types of indicators for different types assessments in the MPAT, for example, some indicators are for the Secondary Assessment, while others are to be used for the Self-Assessment Module.

## Structure of Self-Assessment Module

The Self-Assessment Module uses a set of statements against which a department assesses the extent to which it meets management performance requirements. The statements reflect the four performance levels as set out in the MPAT Framework approved by Cabinet, with each level representing an improvement on the previous level.

| Description  | Performance Level |
|--|-------------------|
| Non compliance with legal/regulatory requirements in management area     | Level 1           |
| Partial compliance with legal/regulatory requirements in management area | Level 2           |
| Full compliance with legal/regulatory requirements in management area    | Level 3           |
| Full compliance and doing things smartly                                 | Level 4           |

The Self-Assessment Module is divided into four sections, each covering a Key Performance Area. In addition to the Self-Assessment statements, each section sets out the relevant regulatory documents that govern the performance requirements in a particular Key Performance Area. Each section also provides an indicative list of documents that may serve as sources of evidence.

## 1. STRATEGIC MANAGEMENT

### Regulatory documents and evidence

The following is a list of relevant regulatory documents guiding Strategic Management in the public service:

| <b>List of regulatory documents</b>   |
|---|
| <ul style="list-style-type: none"><li>• Programme and Budget Structures (National Treasury)</li><li>• Strategic Planning Framework and Annual Performance Plan Framework (National Treasury)</li><li>• Programme Performance Information Framework (National Treasury)</li><li>• Government-Wide Monitoring and Evaluation Framework</li><li>• Public Service Regulations</li><li>• Departmental legislation</li><li>• Annual Report Guideline of the Accountant General</li><li>• Sector-agreed performance measures (Treasury Circular)</li></ul> |

The following is an indicative list of documents that may be used to verify and moderate the Self-Assessment:

| <b>List of documents for evidence</b>  |
|--|
| <ul style="list-style-type: none"><li>• Departmental Strategic Plan</li><li>• Annual Performance Plan</li><li>• Estimates of National Expenditure</li><li>• Delivery Agreements</li><li>• Departmental monitoring and evaluation policy/framework</li><li>• Annual reports</li><li>• Auditor-General reports</li><li>• Departmental internal and external quarterly reports</li><li>• Departmental reports to oversight bodies (legislature, PSC)</li><li>• PSC reports (departmental monitoring, State of Public Service, specific evaluations)</li><li>• Departmental monitoring and evaluation reports</li><li>• Departmental reports for Programme of Action/ Delivery Agreements</li><li>• Minutes of EXCO meetings</li></ul> |

## Self-Assessment Statements for KPA Strategic Management

| <b>1.1 Performance Area: Strategic Planning</b>   |  |                          |
|---|--|--------------------------|
| <b>1.1.1 Indicator name: Strategic Planning Alignment</b>   |  |                          |
| <b>Indicator definition:</b> Extent to which strategic plan based on analysis, is aligned with MTSF and/or PGDS, Delivery Agreements, informs APP, and includes risk mitigation.  |  |                          |
| <b>Secondary Data:</b> AGSA Report- Findings on pre-determined objectives - Non- compliance with regulatory requirements.   |  |                          |
| <b>Question:</b> Which set of statements best reflects the quality of the department’s strategic planning?  |  |                          |
| <b>Statement</b>  | <b>Evidence</b>  | <b>Performance level</b> |
| <p>Department’s strategic plan is not compliant with Treasury guidelines.</p> <p>Department’s strategic plan does not have a clear link with MTSF (PGDS for provinces) and/or any of the Delivery Agreements. Little or no evidence of risk mitigation strategies.</p>  | <ul style="list-style-type: none"> <li>• Not required</li> </ul>   | Level 1                  |
| <p>Department’s strategic plan is partially compliant with Treasury guidelines.</p> <p>Department’s strategic plan is linked to the MTSF (PGDS for provinces) and the relevant Delivery Agreement(s).</p>   | <ul style="list-style-type: none"> <li>• Alignment between strategic plan, MTSF and delivery agreements</li> </ul>   | Level 2                  |
| <p>Department’s strategic plan is fully compliant with Treasury guidelines.</p> <p>Department’s strategic plan is based on situational analysis.</p> <p>Performance information policy including procedures and business processes in line with NT framework and APP is in place and being implemented.</p> <p>Department’s strategic plan is linked to the MTSF (PGDS for provinces) and the relevant Delivery Agreement(s).</p> <p>Strategic plan is submitted to Parliament/ Provincial legislature on time.</p> | <ul style="list-style-type: none"> <li>• Analytical work done for strategic planning</li> <li>• Alignment between strategic plan, MTSF and delivery agreements</li> <li>• Performance information policy, procedures and business processes</li> </ul>   | Level 3                  |
| <p>All above in Level 3 plus:</p> <p>Department’s strategic plan has a ‘line of sight’ externally to government’s medium term priorities and delivery agreements, and internally to the department’s mandate.</p> <p>Department actively monitors the risks to achieving strategic outcomes of the Strategic Plan.</p> <p>Strategic plan reviewed annually and adjusted as required.</p>  | <ul style="list-style-type: none"> <li>• All above in Level 3 plus</li> <li>• Evidence of total alignment between strategic plan, annual performance plan and MTSF and delivery agreements</li> <li>• Implementation of risk mitigation strategies</li> <li>• Documented evidence of review of strategic plan</li> </ul> | Level 4                  |

| <b>1.1 Performance Area: Strategic Planning</b>  |   |                          |
|--|---|--------------------------|
| <b>1.1.2 Indicator name: Annual Performance Plans</b>  |   |                          |
| <b>Indicator definition:</b> Extent to which contents of APP complies with Treasury guidelines and implementation reported and monitored effectively.  |   |                          |
| <b>Question:</b> Which set of statements best reflects the quality of the contents of the department's Annual Performance Plan?  |   |                          |
| <b>Statement</b>   | <b>Evidence</b>   | <b>Performance level</b> |
| <p>APP is not compliant with Treasury guidelines.</p> <p>Department's APP is not aligned with its strategic plan. Strategic objectives and targets are not quantified and linked to a budget programme. No alignment between APP and high level plans such as delivery agreements.</p>   | <ul style="list-style-type: none"> <li>• Not required</li> </ul>  | Level 1                  |
| <p>APP is partially compliant with Treasury guidelines.</p> <p>Department's APP is linked to the Strategic Plan, strategic objectives, budget programmes, delivery agreements and other cross cutting programmes where applicable but lack required measureable quarterly targets, indicators and performance data mechanisms to monitor implementation.</p>   | <ul style="list-style-type: none"> <li>• Alignment between strategic plan, annual performance plan, delivery agreements, budget and all programmes are demonstrated.</li> </ul>   | Level 2                  |
| <p>APP fully compliant with Treasury guidelines.</p> <p>Department's APP is linked to the Strategic Plan, strategic objectives, budget programmes and other cross cutting programmes where applicable and has measureable quarterly targets and indicators to track implementation progress.</p> <p>Draft APP is submitted to NT and DPME for comments on time.</p> <p>APP is submitted to Parliament on time.</p> | <ul style="list-style-type: none"> <li>• Alignment between strategic plan, annual performance plan, delivery agreements, budget and all programmes are demonstrated. Key deliverables are quantified in terms of the SMART criteria</li> <li>• Evidence of submission to NT, DPME and Parliament</li> </ul> | Level 3                  |
| <p>All above in Level 3 plus:</p> <p>Quarterly reports are submitted on time and demonstrate performance. Programmes are costed and informed by service delivery targets.</p> <p>Management regularly monitors progress against APP and takes actions to address bottlenecks/ blockages.</p>   | <ul style="list-style-type: none"> <li>• All above in level 3 plus:</li> <li>• Minutes of management meetings</li> <li>• Quarterly reports</li> </ul>   | Level 4                  |

## 1.2 Performance Area: Programme<sup>1</sup> Management

### 1.2.1 Indicator name: Programme Management Alignment

**Indicator definition:** Internal logic of APP programmes and use of programme performance information.

**Secondary Data:** AGSA findings on predetermined objectives – Reported information not useful.

**Question:** Which of the following statements demonstrates best the logic layout of the department's programmes in terms of a programme performance and or log frame approach?

| Statement   | Evidence   | Performance level |
|---|--|-------------------|
| No evidence that Departmental APP programmes show linkages between departmental goals, objectives, desired programme outcomes, outputs, inputs and activities.  | <ul style="list-style-type: none"> <li>Not required</li> </ul>   | Level 1           |
| Departmental APP's programmes show limited linkages between departmental goals, desired programme outcomes, outputs, inputs and activities.   | <ul style="list-style-type: none"> <li>Strategic Plan, APP, and Programme plans</li> </ul>   | Level 2           |
| Departmental programmes show a high degree of linkages between departmental goals, desired programme outcomes, outputs, inputs and activities. Programme baselines are correctly set in terms of norms and standards of the sector and performance targets are achievable.  | <ul style="list-style-type: none"> <li>Strategic Plan, APP, and Programme plans</li> </ul>   | Level 3           |
| <p>All above in Level 3 plus:</p> <p>Complete alignment between Strategic Plan, APP and Programmes.</p> <p>Programme Performance targets are measurable to enable programme evaluations to be conducted.</p> <p>Active utilisation of programme performance information by management to inform decisions and improvements to programme plans and implementation.</p> | <ul style="list-style-type: none"> <li>All above in Level 3 plus:</li> <li>Changes to programme plans and implementation based on analysis of performance information</li> </ul> | Level 4           |

<sup>1</sup> "Programme" means a delivery programme and not the budget programme. Examples of programmes include EPWP and ECD.

**1.3 Performance Area: Monitoring and Evaluation**

**1.3.1 Indicator name: Use of monitoring and evaluation outputs**

**Indicator definition:** Extent to which the department uses monitoring and evaluation information.

**Secondary Data:** AGSA findings on pre determined objectives – Reported information not reliable.

**Question:** Which set of statements best reflects the department’s use of M&E outputs?

| Statement   | Evidence  | Performance level |
|---|---|-------------------|
| Department does not have an M&E Policy/Framework or capacity to generate information.   | <ul style="list-style-type: none"> <li>• Not required</li> </ul>  | Level 1           |
| Monitoring reports are available but are not used regularly by top management and programme managers to track progress and inform improvement.  | <ul style="list-style-type: none"> <li>• Quarterly monitoring reports</li> <li>• Minutes of top management meetings or programme meetings to assess use of reports</li> </ul> | Level 2           |
| Monitoring reports are regularly used by top management and programme managers to track progress and inform improvement.  | <ul style="list-style-type: none"> <li>• Quarterly monitoring reports</li> <li>• Minutes of top management meetings or programme meetings to assess use of reports</li> </ul> | Level 3           |
| All above in Level 3 plus:<br>Evaluations of major programmes are conducted periodically and the results are used to inform changes to programme plans, business processes, APP and strategic plan. | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Evaluation Reports</li> <li>• Changes to programmes and plans</li> </ul>                       | Level 4           |

## 2. GOVERNANCE AND ACCOUNTABILITY

### Regulatory documents and evidence

The following is a list of relevant regulatory documents guiding Governance and Accountability in the public service:

| <b>List of regulatory documents</b>   |
|---|
| <ul style="list-style-type: none"><li>• Constitution (Chapters 3, 5, 6, 7 and 10)</li><li>• Public Service Act and Regulations</li><li>• Public Finance Management Act and Regulations</li><li>• Inter-Governmental Relations Framework</li><li>• Code of Conduct for Public Service</li><li>• White Papers on Public Service</li><li>• Minimum Requirements for Anti-Corruption Capacity</li><li>• Promotion of Access to Information Act</li><li>• Promotion of Administrative Justice Act</li><li>• Prevention and Combating of Corrupt Activities Act</li></ul> |

The following is an indicative list of documents that may be used to verify and moderate the Self-Assessment:

| <b>List of documents for evidence</b>   |
|---|
| <ul style="list-style-type: none"><li>• Annual reports</li><li>• Auditor-General reports</li><li>• Departmental internal and external quarterly reports</li><li>• Departmental reports to oversight bodies (legislature, PSC)</li><li>• PSC reports (departmental monitoring, State of Public Service, specific evaluations)</li><li>• Departmental internal audit plans and reports</li><li>• Departmental risk management plans and reports</li><li>• Departmental monitoring and evaluation reports</li><li>• Service Delivery Improvement Plans</li><li>• Departmental Code of Conduct</li><li>• Departmental organogram</li><li>• Surveys, citizen feedback</li><li>• Minutes of meetings (EXCO, Audit Committee, other committees)</li><li>• Delegations register</li><li>• Risk register</li></ul> |

## Self-Assessment Statements for KPA Governance and Accountability

| <b>2.1 Performance Area: Service Delivery Improvement</b>   |   |                   |
|---|---|-------------------|
| <b>2.1.1 Indicator name: Service delivery improvement mechanisms</b>  |   |                   |
| <b>Indicator definition:</b> Whether the department has an approved service delivery charter, standards and service delivery improvement plans and adheres to these to improve services.  |   |                   |
| <b>Secondary Data: PMW</b> – Quality rating of SDIP<br>PSC M&E – Effectively involved in programmes that aims to promote<br>PSC M&E – The department dasilitate public participation in policy making   |   |                   |
| <b>Question:</b> Which set of statements best reflects the state of the department’s service delivery improvement mechanisms?   |   |                   |
| Statement   | Evidence  | Performance level |
| Department does not have a service charter and service standards.   | <ul style="list-style-type: none"> <li>• None required</li> </ul>   | Level 1           |
| Department has a service charter and service standards.   | <ul style="list-style-type: none"> <li>• Service charter and Service standards</li> </ul>   | Level 2           |
| Department has a service charter, service standards and SDIP.<br>Department displays its service charter.   | <ul style="list-style-type: none"> <li>• Service charter, service standards and SDIP</li> <li>• Display of service charter</li> </ul>   | Level 3           |
| All above in Level 3 plus:<br>Department regularly monitors compliance to service delivery standards and reports on this are considered by top management and used to inform the SDIP.<br>Progress reports against the SDIP are regularly considered by top management. | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Minutes of top management meetings</li> <li>• Progress reports and monitoring reports</li> <li>• Stakeholders’ feedback</li> </ul> | Level 4           |

| <b>2.2 Performance Area: Management structure</b>  |  |                          |
|--|--|--------------------------|
| <b>2.2.1 Indicator name: Functionality of management structures</b>  |  |                          |
| <b>Indicator definition:</b> How well management structures function in the department.  |  |                          |
| <b>Question:</b> Which set of statements best reflects the functionality of the department’s management structures?  |  |                          |
| <b>Statement</b>   | <b>Evidence</b>  | <b>Performance level</b> |
| Department’s management structures do not have formal terms of reference.  | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1                  |
| Department has management structures with formal terms of reference. Management meetings are scheduled and meetings take place.  | <ul style="list-style-type: none"> <li>• Management terms of reference</li> <li>• Minutes of meetings and attendance register</li> <li>• Schedule of meetings</li> </ul>                                       | Level 2                  |
| Department has management structures with formal terms of reference. Management meetings are scheduled and meetings take place. Management decisions are documented, clear, responsibility allocated and followed through.   | <ul style="list-style-type: none"> <li>• Management terms of reference</li> <li>• Agenda , Minutes of meetings and attendance register</li> <li>• Action lists or matrix for follow up on decisions</li> </ul> | Level 3                  |
| <p>All above in Level 3 plus:</p> <p>Management gives feedback to lower levels in the Department on decisions taken at management meetings.</p> <p>Top Management Meeting agenda focuses on strategic objectives and priorities of department as described in the strategic plan and APP.</p> <p>MPAT results are used to drive improvements in the department once it is available.</p> | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Evidence of use of MPAT results</li> </ul>  | Level 4                  |

**2.3 Performance Area: Accountability**

**2.3.1 Indicator name: Annual reporting**

**Indicator definition:** Compliance with reporting requirements.

**Secondary Data:** PSC M&E – Adequacy of internal financial controls and performance is exerted over all departments

**Question:** Which set of statements best reflects the department’s compliance with annual reporting requirements?

| Statement   | Evidence   | Performance level |
|---|--|-------------------|
| Department did not table the annual report.   | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1           |
| Department did not table the annual report on time.   | <ul style="list-style-type: none"> <li>• Report tabled and date tabled</li> </ul>  | Level 2           |
| Department tabled the annual report on time and the report complies with Treasury Regulations.  | <ul style="list-style-type: none"> <li>• Report tabled and date tabled</li> <li>• Report contents</li> </ul>   | Level 3           |
| All above in Level 3 plus:<br>Accounting Officer attended meetings required by Parliament or provincial legislature on the annual report. | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Record of briefing of Parliament or provincial legislature</li> </ul> | Level 4           |

| <b>2.3 Performance Area: Accountability</b>  |   |                          |
|--|---|--------------------------|
| <b>2.3.2 Indicator name: Assessment of accountability mechanisms (Audit Committee)</b>   |   |                          |
| <b>Indicator definition:</b> Whether the department has the main accountability mechanisms (Audit Committee) in place and committee's level of functioning.  |   |                          |
| <b>Secondary Data:</b> PSC M&E – Annual report complies with National Treasury regulations<br>PSC M&E – Department complies with provision of the Promotion of Access to information<br>PSC M&E – Fraud prevention plan in place and implemented |   |                          |
| <b>Question:</b> Which of the following statements best reflects the state of the department's Audit Committee?  |   |                          |
| <b>Statement</b>   | <b>Evidence</b>   | <b>Performance level</b> |
| Department does not have an audit committee in place.  | <ul style="list-style-type: none"> <li>• None required</li> </ul>   | Level 1                  |
| Department has an audit committee in place.  | <ul style="list-style-type: none"> <li>• Appointment letters or agreement for shared audit committee</li> </ul>   | Level 2                  |
| Audit committee meets as scheduled.<br>Audit committee functions in terms of National Treasury guidelines for audit committees.  | <ul style="list-style-type: none"> <li>• Minutes of Audit Committee meetings</li> <li>• Department's assessment report on audit committee</li> </ul>                                    | Level 3                  |
| All above in Level 3 plus:<br>Management acts on information from the audit committee.<br>Internal Audit tracking of management responses and implementation of recommendations.   | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Internal Audit tracking reports on management responses and implementation of recommendations</li> </ul> | Level 4                  |

| <b>2.4 Performance Area: Ethics</b>  |   |                          |
|--|---|--------------------------|
| <b>2.4.1 Indicator name: Assessment of policies and systems to ensure professional ethics</b>  |   |                          |
| <b>Indicator definition:</b> Systems and policies in place to promote ethical behaviour and discourage unethical behaviour and corruption.   |   |                          |
| <b>Secondary Data:</b> PSC Annual - % of financial disclosures submitted<br>PSC Annual – Anti Corruption hotline performance<br>PSC M&E – Management of misconduct hearing   |   |                          |
| <b>Question:</b> Which set of statements best reflects the department’s efforts to ensure professional ethics in the work place?   |   |                          |
| <b>Statement</b>   | <b>Evidence</b>   | <b>Performance level</b> |
| Department has no code of conduct or has not formally adopted the Code of Conduct for the Public Service.  | <ul style="list-style-type: none"> <li>• None required</li> </ul>   | Level 1                  |
| Department has an approved Code of Conduct.<br>Partial submission of SMS financial disclosures to OPSC.  | <ul style="list-style-type: none"> <li>• Approved Code of Conduct</li> <li>• Proof of financial disclosure submissions to OPSC</li> </ul>   | Level 2                  |
| Department supports staff in understanding and applying the Code of Conduct.<br>All SMS members’ completed financial disclosures signed by EA and submitted to PSC on time.<br>Department has a gift policy and gift register in place.  | <ul style="list-style-type: none"> <li>• Signatures of staff verifying receipt of Code of Conduct.</li> <li>• Visible display of the Code of Conduct.</li> <li>• Proof of financial disclosure submissions to OPSC</li> <li>• Gift policy and register</li> </ul> | Level 3                  |
| All above in Level 3 plus:<br>Department provides additional training in ethics (beyond Code of Conduct).<br>Department has surveyed staff to test their understanding of ethical behaviour and application of Code of Conduct.<br>Department performs a risk assessment on financial disclosure forms and identifies potential conflicts of interest. | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Proof of training in application of Code of Conduct</li> <li>• Risk assessment report</li> </ul>   | Level 4                  |

| <b>2.4 Performance Area: Ethics</b>   |   |                          |
|---|---|--------------------------|
| <b>2.4.2 Indicator name : Fraud prevention</b>  |   |                          |
| <b>Indicator definition:</b> Extent to which the department meets fraud prevention requirements.                                      |   |                          |
| <b>Secondary Data:</b> PSC M&E – Compliance with disciplinary Code and Procedures of Public Service                                   |   |                          |
| <b>Question:</b> Which set of statements best reflects the extent to which the department meets fraud prevention requirements?        |   |                          |
| <b>Statement</b>  | <b>Evidence</b>   | <b>Performance level</b> |
| Department does not have a fraud prevention plan.   | <ul style="list-style-type: none"> <li>• None required</li> </ul>   | Level 1                  |
| Department has an approved fraud prevention plan.   | <ul style="list-style-type: none"> <li>• Copy of approved plan</li> </ul>   | Level 2                  |
| Department has an approved fraud prevention plan and regularly monitors implementation.   | <ul style="list-style-type: none"> <li>• Copy of approved plan</li> <li>• Quarterly reports to Risk Management and Audit Committee</li> </ul> | Level 3                  |
| All above in Level 3 plus:<br>Department uses fraud prevention plan implementation reports to inform improvement to control measures. | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Evidence of improved control measures</li> </ul>               | Level 4                  |

| <b>2.5 Performance Area: Internal Audit</b>   |  |                          |
|---|--|--------------------------|
| <b>2.5.1 Indicator name: Assessment of internal audit arrangements</b>  |  |                          |
| <b>Indicator definition:</b> The capacity and level of functioning of the department’s internal audit unit.   |  |                          |
| <b>Secondary Data:</b> FMCMM SCORE – Internal Audit<br>AGSA – Score Internal Audit & Committee  |  |                          |
| <b>Question:</b> Which set of statements best reflects the state of internal audit in the department?   |  |                          |
| <b>Statement</b>  | <b>Evidence</b>  | <b>Performance level</b> |
| Department does not have an internal audit unit.  | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1                  |
| Department has an internal audit unit with suitably qualified staff.  | <ul style="list-style-type: none"> <li>• Structure and staff profile of internal audit unit</li> </ul>   | Level 2                  |
| <p>Department has an internal audit, with suitably qualified staff and an internal audit plan based on a risk assessment.</p> <p>Internal audit unit reports administratively to the Accounting Officer and functionally to the Audit Committee.</p> <p>Department updates internal audit plan annually.</p> <p>Complies with standards of Institute of Internal Auditors</p> | <ul style="list-style-type: none"> <li>• Structure and staff profile of internal audit unit</li> <li>• Approved 3 year and annual audit plan</li> <li>• Audit Committee minutes</li> <li>• Auditor-General’s report</li> </ul> | Level 3                  |
| <p>All above in Level 3 plus:</p> <p>Management acts on internal audit reports.</p>   | <ul style="list-style-type: none"> <li>• All above in Level 3 plus</li> <li>• Management responses to findings and recommendations</li> </ul>  | Level 4                  |

**2.6 Performance Area: Risk Management**

**2.6.1 Indicator name: Assessment of risk management arrangements**

**Indicator definition:** Whether the department has basic risk management elements in place and how well these function.

**Secondary Data:** FMCMM SCORE – Risk Management  
AGSA – Score Risk Management

**Question:** Which set of statements best reflects the state of risk management in the department?

| Statement  | Evidence  | Performance level |
|--|---|-------------------|
| Department has not conducted a risk assessment in the past year.   | <ul style="list-style-type: none"> <li>• None required</li> </ul>   | Level 1           |
| Department has risk management committee in place<br>Department has completed a risk assessment.   | <ul style="list-style-type: none"> <li>• Risk management committee membership and terms of reference</li> <li>• Copy of risk assessment</li> </ul>  | Level 2           |
| Department has a risk management plan approved by the accounting officer and Audit Committee.<br>Risk management committee regularly reports to the Audit Committee on the implementation of the risk management plan.<br>Department updates risk management plan regularly. | <ul style="list-style-type: none"> <li>• Copy of risk assessment</li> <li>• Copy of approved risk management plan and evidence of updating</li> <li>• Minutes of Risk Committee meetings</li> </ul> | Level 3           |
| All above in Level 3 plus:<br>Managers take responsibility for managing risks in their areas.<br>Management acts on risk management reports.   | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Updated risk register</li> <li>• Evidence of risk management on top management agenda</li> </ul>                     | Level 4           |

**2.7 Performance Area: Delegations**

**2.7.1 Indicator name: Approved EA and HOD delegations for public administration in terms of the Public Service Act, available in prescribed format and audited**

**Indicator definition:** Whether the EA has implemented the delegations framework set out in PSR and directed by the Minister for Public Service and Administration.

**Question:** Which set of statements best reflects the state of public administration delegations in the department?

| Statement  | Evidence   | Performance level |
|--|--|-------------------|
| Department has no delegations in place.  | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1           |
| Department has a set of delegations in place but this does not comply with DPSA guidelines.  | <ul style="list-style-type: none"> <li>• Documents to show actions taken thus far</li> </ul>   | Level 2           |
| Department's delegations are in the prescribed format and in alignment with DPSA guidelines and approved structure.                                    | <ul style="list-style-type: none"> <li>• Approved delegations document</li> <li>• Delegations register updated</li> <li>• Delegations aligned to organisational structure</li> </ul> | Level 3           |
| All above in Level 3 plus:<br>Delegations from the Executive Authority to the HOD and to all relevant performer levels are appropriate for the levels. | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Confirmation of appropriateness of delegations by Auditor General</li> </ul>                          | Level 4           |

**2.7 Performance Area: Delegations**

**2.7.2 Indicator name: Approved HOD delegations for financial administration in terms of the PFMA**

**Indicator definition:** Whether the department has financial delegations in place in format prescribed by the PFMA and audited.

**Question:** Which set of statements best reflects the state of financial administration delegations in your department?

| Statement  | Evidence  | Performance level |
|--|---|-------------------|
| Department has no financial delegations.   | <ul style="list-style-type: none"> <li>• None required</li> </ul>   | Level 1           |
| Department has financial delegations in place not aligned to Treasury guidelines.  | <ul style="list-style-type: none"> <li>• Documents to show actions taken thus far</li> </ul>  | Level 2           |
| Department has financial delegations in place and aligned to Treasury guidelines and approved structure.                           | <ul style="list-style-type: none"> <li>• Approved delegations document</li> <li>• Delegations register updated</li> <li>• Delegations aligned to organisational structure</li> <li>• Audit of delegations by Auditor-General</li> </ul> | Level 3           |
| All above in Level 3 plus:<br>Delegations from Accounting Officer to all relevant performer levels are appropriate for the levels. | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> </ul>  | Level 4           |

### 3. HUMAN RESOURCE AND SYSTEMS MANAGEMENT

#### Regulatory documents and evidence

The following is a list of relevant regulatory documents guiding Human Resource and Systems Management in the public service:

| List of regulatory documents  |
|---|
| <ul style="list-style-type: none"><li>• Public Service Act and Regulations</li><li>• Employment Equity Act</li><li>• Labour Relations Act</li><li>• Skills Development Act</li><li>• Occupational Health and Safety Act</li><li>• Human Resource Strategy for Public Service</li><li>• Directives of Minister of Public Service and Administration (e.g. Directive on Organisational Design, Directive on Human Resource planning)</li><li>• Senior Management Service Handbook and Directives</li><li>• Strategic Framework for Employee Health and Wellness</li><li>• Policy and procedures on incapacity and ill-health</li><li>• Incentive policy framework</li><li>• Gender equality strategic framework</li><li>• Managing HIV/AIDS in the work place</li><li>• Code of Conduct for Public Service</li><li>• Departmental Bargaining Chamber Agreements</li></ul> |

The following is an indicative list of documents that may be used to verify and moderate the Self-Assessment:

#### List of documents for evidence

- Annual reports
- Auditor-General reports
- Strategic Plan
- Annual Performance Plan
- Organisational structure
- Human resource plan
- Human resource development plan
- Work place skills plan
- Signed performance agreements
- Performance Management Development System
- Departmental human resource policies
- Gender, equality, youth, older persons and persons with disabilities reports
- COIDA reports
- Departmental Bargaining Chamber Agreements

## Self-Assessment Statements for KPA Human Resource and Systems Management

| <b>3.1 Performance Area: Human Resource Strategy and Planning</b>  |  |                          |
|--|--|--------------------------|
| <b>3.1.1 Indicator name: Human Resource Planning</b>   |  |                          |
| <b>Indicator definition:</b> The department complies with and implements the HR planning requirements. A MTEF HR plan has been developed and approved by the relevant authority.   |  |                          |
| <b>Secondary Data:</b> AGSA – Score management of HR planning  |  |                          |
| <b>Question:</b> Which set of statements best reflects the state of Human Resource Planning in the department?   |  |                          |
| <b>Statement</b>   | <b>Evidence</b>  | <b>Performance level</b> |
| Department does not have HR Plan.  | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1                  |
| Department has an approved HR plan and submitted to DPSA.  | <ul style="list-style-type: none"> <li>• Proof of draft plan and routed submission</li> </ul>  | Level 2                  |
| Department has an approved HR plan and submitted it to DPSA and submits implementation progress reports to DPSA.   | <ul style="list-style-type: none"> <li>• Signed plan and progress reports submitted to DPSA</li> </ul>   | Level 3                  |
| <p>All above in Level 3 plus:</p> <p>Department has a plan and are implementing it to ensure the continuous supply of critical skills.</p> <p>The implementation of the HR Plan is supporting the achievement of the objectives in the Strategic Plan and APP.</p> <p>The funding and activities related to the implementation of the HR Plan is catered for in the APP.</p> <p>Management considers and acts on analysis of HR information.</p> | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Proof of implementation of plan to ensure supply of critical skills</li> <li>• Strategic Plan and APP.</li> <li>• Implementation of management decisions based on analysis of HR information</li> </ul> | Level 4                  |

| <b>3.1 Performance Area: HR Strategy and Planning</b>   |  |                          |
|---|--|--------------------------|
| <b>3.1.2 Indicator name: Organisational Design and Implementation</b>   |  |                          |
| <b>Indicator definition:</b> Organisational structure submitted for consultation by competent authority, meeting requirements of the Directive on Organisational Structuring.   |  |                          |
| <b>Secondary Data:</b> PMW - % post of filled additional to approved structure<br>AGSA – Score management of Employees Acting<br>PMW - % of posts filled out of adjustment<br>AGSA – Management of organisational structure<br>DPSA – Funded ratio  |  |                          |
| <b>Question:</b> Which set of statements best reflects how the department responds to the Directive on Organisational Structuring?  |  |                          |
| <b>Statement</b>  | <b>Evidence</b>  | <b>Performance level</b> |
| The department do not have a approved organisational structure or the approved organisational structure is not implemented.   | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1                  |
| The department have an approved structure and are implementing it but all positions are not funded within the MTEF.   | <ul style="list-style-type: none"> <li>• Approved organogram</li> </ul>  | Level 2                  |
| The department are implementing their approved organisational structure and all positions are funded.<br><br>PERSAL reflects approved funded structure.<br><br>The implementation of the approved organisational structure is supporting the achievement of the objectives in the Strategic Plan and APP. All activities and funding for the implementation of new structures are catered for in the APP. | <ul style="list-style-type: none"> <li>• Approved organogram</li> <li>• Costing of structure</li> <li>• Job grading reports</li> <li>• PERSAL structure report</li> <li>• Strategic Plan</li> <li>• APP</li> </ul> | Level 3                  |
| All above in Level 3 plus:<br>The department have/had a strategy in place to manage the implementation of the approved organisational structure. This strategy includes a change management; management of additional employees, employees earmarked for redeployment and new skills gaps as a result of the implementation of the new structure.   | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Implementation strategy for the approved organisational structure</li> </ul>  | Level 4                  |

**3.1 Performance Area: HR Strategy and Planning**

**3.1.3 Indicator name: Assessment of Human Resources Development**

**Indicator definition:** Whether the department workplace skills plan is based on departmental needs, scarce skills and national skills priorities.

**Secondary Data:** DPSA – Internships as a % of total employment  
 DPSA – Learnership as a % of total employment  
 DPSA – HRD spending as a % of total compensation  
 AGSA – Spending on skills development  
 PSC M&E – Compliance with provisions of the Skills Development Act

**Question:** Which set of statements best reflects the state of Human Resources Development in the department with regard to the WPSP?

| Statement   | Evidence   | Performance level |
|---|--|-------------------|
| Department does not have a workplace skills plan.   | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1           |
| Department does not have an approved workplace skills plan or it is not aligned to departmental and national scarce skills and youth priorities.<br>Department’s workplace skills plan is not informed by the majority of Personnel Development Plans.  | <ul style="list-style-type: none"> <li>• Draft plan</li> </ul>   | Level 2           |
| Department has an approved workplace skills plan and it is aligned to departmental and national scarce skills and youth priorities and is informed by the majority of Personnel Development Plans.<br>The implementation of the WPSP is supporting the achievement of the objectives in the Strategic Plan and APP. Activities and funding of the implementation of the WPSP is catered for in the APP.<br>Quarterly and Annual Reports submitted to relevant SETA as required. | <ul style="list-style-type: none"> <li>• Approved WPSP</li> <li>• Evidence of summarised PDP’s</li> <li>• Reports submitted to relevant SETA</li> <li>• Strategic Plan</li> <li>• APP</li> </ul> | Level 3           |
| All above in Level 3 plus:<br>Prioritised skills gaps have been closed.   | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Progress reports on implementation of the WPSP</li> </ul>   | Level 4           |

**3.2 Performance Area: HR Practices and Administration**

**3.2.1 Indicator name: Assessment of Personnel Administration Systems**

**Indicator definition:** Departmental procedures to manage payroll certification and quality control.

**Secondary Data:** AGSA – Score management of compensation

AGSA – Score management of over time

AGSA – Score management of overpayments

AGSA – Score management of payroll

AGSA – Score management of sick leave

PMW – Average days vacation leave credit

AGSA – Score management of other leave

PMW – Average days of sick leave credits

PMW - % Terminations back-dated

PMW – Average period of back-dated terminations

**Question:** Which set of statements best reflects the procedures in place to manage the payroll in the department?

| Statement  | Evidence   | Performance level |
|--|--|-------------------|
| No process in place to manage monthly payroll certification.   | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1           |
| A process is in place but is not or only partially being implemented.  | <ul style="list-style-type: none"> <li>• Procedure for payroll management</li> </ul>   | Level 2           |
| A process is in place and is fully implemented on a monthly basis and discrepancies are corrected in the system.   | <ul style="list-style-type: none"> <li>• Procedure for payroll management</li> <li>• Amendments/ updates made to payroll</li> </ul>      | Level 3           |
| All above in Level 3 plus:<br>Analysis is performed on adherence to payroll certification and possible risks areas and mitigation plans are developed and implemented. | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Mitigation plans implemented based on analysis</li> </ul> | Level 4           |

| <b>3.2 Performance Area: Human Resource Practices and Administration</b>  |  |                          |
|---|--|--------------------------|
| <b>3.2.2 Indicator name: Application of recruitment practices</b>   |  |                          |
| <b>Indicator definition:</b> Recruitment practices adhere to regulatory requirements and are strategic in nature, supporting the continuing resourcing of the department.   |  |                          |
| <b>Secondary Data:</b> AGSA score management vacancies<br>AGSA Score management of Appointments<br>PMW Replacement Rate Pro and Managers rest<br>PMW- Replacement Rate Prof and Managers<br>PMW- Prof and Managers vacancy rate<br>PMW – Vacancy Rate Rest<br>PMW – Average period in months of post vacant<br>DPSA – Average period to fill vacancies<br>DPS - % exits of permanent employees before 12 month of service |  |                          |
| <b>Question:</b> Which set of statements best reflects the department’s approach to recruitment?  |  |                          |
| <b>Statement</b>  | <b>Evidence</b>  | <b>Performance level</b> |
| The department does not comply with public service regulations for recruitment processes, and no recruitment processes have been defined.   | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1                  |
| A recruitment process has been approved which is compliant to the public service regulations but is not fully or consistently implemented.  | <ul style="list-style-type: none"> <li>• Standard operating procedure or policy for recruitment</li> </ul>   | Level 2                  |
| A recruitment process with clear roles and responsibilities has been approved and is fully and consistently implemented.<br>All vacant posts are filled within twelve months.   | <ul style="list-style-type: none"> <li>• Standard operating procedure or policy for recruitment</li> <li>• Implementation of process</li> <li>• Delegations clarifying roles and responsibilities</li> <li>• Recruitment statistics</li> </ul>   | Level 3                  |
| All above in Level 3 plus:<br>Department has a process to clearly define job descriptions and competency requirements and these are used in the recruitment process.<br>All vacant posts are filled within four months.   | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Job descriptions and competency requirements</li> <li>• Evidence that interview questions are designed with due consideration to the job responsibilities and competency requirements.</li> <li>• Priorities in HR Plan are evident and addressed in recruitment practices</li> </ul> | Level 4                  |

**3.2 Performance Area: Human Resource Practices and Administration**

**3.2.3 Indicator name: Staff retention**

**Indicator definition:** Efforts to develop and retain staff, especially retaining staff with scarce and critical skills.

**Secondary Data:** PMW – Turnover Rate Prof and Managers  
 PMW – Turnover Rate Rest  
 DPSA – Stability ratio

**Question:** Which set of statements best reflects the department’s approach to staff retention?

| Statement   | Evidence   | Performance level |
|---|--|-------------------|
| Staff retention efforts are not informed by a standardised approach or procedure to deal with retention of scarce and critical skills.  | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1           |
| Inconsistent application of an approved standardised approach or procedure to deal with retention of scarce and critical skills.  | <ul style="list-style-type: none"> <li>• Approved procedure with an indication of the occupational classes to be prioritised for retention</li> </ul>  | Level 2           |
| Department consistently applies an approved standardised approach or procedure to deal with staff retention, scarce and critical skills and the development of staff.<br>Systems are in place to inform decision making on retention.<br>Exit interviews are conducted with all employees leaving the department and an analysis is performed on the information in the exit interviews.  | <ul style="list-style-type: none"> <li>• Approved procedure with an indication of the occupational classes to be prioritised for retention</li> <li>• Report on findings of exit interviews</li> </ul>   | Level 3           |
| All above in Level 3 plus:<br>Department’s approach in dealing with staff retention, scarce skills and development of talent are aligned to the HR and HRD Plans.<br>Department have a mechanism in place to assess the working environment and are implementing it in accordance to its requirements. Recommendations are developed based on the assessment and implemented.<br>Department uses analysis of internal and external supply and demand factors to inform decisions on critical and scarce skills retention. | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Mechanism to assess working environment</li> <li>• Implementation of recommendations</li> <li>• HR Plan</li> <li>• HRD Plan</li> <li>• Analytical reports presented skills supply and demand</li> </ul> | Level 4           |

**3.2 Performance Area: Human Resource Practices and Administration**

**3.2.4 Indicator name: Management of diversity**

**Indicator definition:** Management practices adhere to regulatory requirements and are strategic in nature, supporting the management of diversity within the department.

**Secondary Data:** DPSA - % of women in SMS  
 DPSA - % of people with disabilities employed  
 DPSA - % of SMS employees in designated racial groups EE target  
 DPSA - % of new appointments under the age of 35  
 DPSA – Turnover rate of 35 disabled and women in SMS  
 PSC – Representative of the South African people

**Question:** Which set of statements best reflects the department’s approach to diversity management?

| Statement  | Evidence   | Performance level |
|--|--|-------------------|
| Department does not have strategies that address issues of diversity (e.g. Gender, disability, etc.), implementation plan and does not provide implementation reports to DPSA.   | <ul style="list-style-type: none"> <li>• None required.</li> </ul>   | Level 1           |
| Department has strategies that address issues of diversity (e.g. Gender, disability etc), implementation plan but does not provide implementation reports to DPSA.   | <ul style="list-style-type: none"> <li>• Copy of approved strategy and implementation plan</li> </ul>  | Level 2           |
| Department has strategies that address issues of diversity (e.g. Gender, disability etc), implementation plan and provides implementation reports to DPSA.   | <ul style="list-style-type: none"> <li>• Copy of approved strategy and implementation plan</li> <li>• Copies of implementation reports</li> </ul>              | Level 3           |
| All above in Level 3 plus:<br>Department has an active programme to mainstream diversity management and is addressing perceptions within the department.<br>Department is actively implementing initiatives to address the supply of employees that meet the diversity criteria. | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Copy of advocacy programme</li> <li>• Evidence of supply initiatives</li> </ul> | Level 4           |

| <b>3.3 Performance Area: Management of Performance</b>  |  |                          |
|---|--|--------------------------|
| <b>3.3.1 Indicator name: Implementation of Level 1-12 Performance Management System</b>   |  |                          |
| <b>Indicator definition:</b> Department implements its PMDS in terms of all employees within the requisite policy provisions.   |  |                          |
| <b>Secondary Data: AGSA – Score management of Performance</b>   |  |                          |
| <b>Question:</b> Which set of statements best reflects the state of performance management in the department?   |  |                          |
| <b>Statement</b>  | <b>Evidence</b>  | <b>Performance level</b> |
| Department does not have an approved Performance Management and Development System in place.  | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1                  |
| Department has an approved PMDS in place which is inconsistently implemented.   | <ul style="list-style-type: none"> <li>• Approved policy with timelines and structures including roles and responsibilities</li> </ul>   | Level 2                  |
| Full implementation and adherence to the approved departmental PMDS.  | <ul style="list-style-type: none"> <li>• Submission of the outcome of the annual and midterm performance reviews</li> <li>• Approved policy</li> </ul>   | Level 3                  |
| <p>All above in Level 3 plus:</p> <p>Department is showing evidence of actively managing the performance outcomes in relation to the development of employees, managing poor performance and rewarding outstanding performance.</p> | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Proof of development or poor performance has been identified after formal performance reviews have been conducted.</li> <li>• Evidence that outstanding performance has been identified and rewarded</li> </ul> | Level 4                  |

**3.3 Performance Area: Human Resource Utilisation and Capacity Development**

**3.3.2. Indicator name: Implementation of SMS Performance Management System (excluding HODs)**

**Indicator definition:** Department implements the SMS PMDS in terms of all SMS Members within the requisite policy provisions.

**Question:** Which set of statements best reflects the implementation of SMS performance management in the department?

| Statement  | Evidence  | Performance level |
|--|---|-------------------|
| Signed performance agreements are not in place for all SMS members.  | <ul style="list-style-type: none"> <li>• None required</li> </ul>   | Level 1           |
| All SMS members have signed performance agreements in place but regular assessments and feedback sessions are not performed throughout the year.   | <ul style="list-style-type: none"> <li>• Report on the signing of performance agreements</li> </ul>   | Level 2           |
| All SMS members have signed performance agreements in place and regular assessments and feedback sessions are performed throughout the year.   | <ul style="list-style-type: none"> <li>• Report on the signing of PA's</li> <li>• Submission of the outcome of the annual assessment process</li> </ul>   | Level 3           |
| <p>All above in level 3: Plus the following:</p> <p>Evidence is shown of actively managing the performance outcomes in relation to development, managing poor performance and rewarding outstanding performance.</p> | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Proof that areas of development or poor performance have been identified and addressed after formal performance reviews have been conducted.</li> <li>• Evidence that outstanding performance has been identified and rewarded.</li> </ul> | Level 4           |

| <b>3.3 Performance Area: Human Resource Utilisation and Capacity Development</b>   |   |                          |
|--|---|--------------------------|
| <b>3.3.3 Indicator name: Implementation of Performance Management System for HOD</b>   |   |                          |
| <b>Indicator definition:</b> Performance of the Head of Department is managed.   |   |                          |
| <b>Secondary Data:</b> PSC Annual – HOD PA Filled or not   |   |                          |
| <b>Question:</b> Which set of statements best reflects the how the performance of the HOD is managed?  |   |                          |
| <b>Statement</b>   | <b>Evidence</b>   | <b>Performance level</b> |
| The HOD did not submit a signed performance agreement to the Executive Authority.  | <ul style="list-style-type: none"> <li>• None required</li> </ul>   | Level 1                  |
| The HOD submitted a signed performance agreement to the Executive Authority but EA did not file it with the Public Service Commission.   | <ul style="list-style-type: none"> <li>• Proof of submission of signed performance agreement to EA</li> </ul>   | Level 2                  |
| The HOD performance agreement was filed at the Public Service Commission on time. Formal mid-year and annual performance reviews conducted.  | <ul style="list-style-type: none"> <li>• Acknowledgement and comments received from PSC.</li> <li>• Copy of formal reviews.</li> </ul>  | Level 3                  |
| All above in Level 3 plus:<br>Evidence is shown of actively managing the performance outcomes in relation to development, managing poor performance and rewarding outstanding performance. | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Proof that areas of development or poor performance have been identified and addressed after formal performance reviews have been conducted.</li> <li>• Evidence that outstanding performance has been identified and rewarded.</li> </ul> | Level 4                  |

**3.4. Performance Area: Employee Relations**

**3.4.1 Indicator name : Employee Relations -Functional departmental chamber**

**Indicator definition:** The departmental chamber is meeting regularly, unions are consulted on mutual interests and have joint implementation programmes.

**Secondary Data:** AGSA – Score management of labour Relations

**Question:** Which set of statements best reflects the relationship between the unions and the employer?

| Statement  | Evidence  | Performance level |
|--|---|-------------------|
| Department does not have a departmental chamber or consultative forum.   | <ul style="list-style-type: none"> <li>• None required</li> </ul>   | Level 1           |
| Department has a departmental chamber or consultative forum but it does not consult on all matters of mutual interest prior to implementation.           | <ul style="list-style-type: none"> <li>• Agenda and minutes of meetings</li> </ul>  | Level 2           |
| Department has a departmental chamber or consultative forum and it does consult on all matters of mutual interest are consulted prior to implementation. | <ul style="list-style-type: none"> <li>• Agenda and minutes of meetings</li> <li>• Attendance register of union representatives</li> </ul>                              | Level 3           |
| All above in Level 3 plus:<br>Unions' are supporting the implementation of chamber or forum decisions.   | <ul style="list-style-type: none"> <li>• Agenda and minutes of meetings</li> <li>• Evidence of joint projects or projects actively being supported by unions</li> </ul> | Level 4           |

**3.4 Performance Area: Employee Relations**

**3.4.2 Indicator name: Management of disciplinary cases**

**Indicator definition:** Whether the department manages disciplinary cases within the prescribed policies and ensures implementation of recommendations.

**Secondary Data:** DPSA – Number and % disciplinary cases

DPSA – Number and % Grievances

DPSA – number and % of Disputes

DPSA – Number and % Collective agreements

DPSA – Days lost due to strikes as % of total days

DPSA – % of disciplinary cases not complete within 90 days

PSC M&E – Management of cases of misconduct of hearing

PSC M&E – Compliance with disciplinary Code and Procedures for Public Service

PSC Annual - Management of appeals to PSC on grievances

**Question:** Which set of statements best reflects the department’s approach to management of disciplinary cases?

| Statement   | Evidence   | Performance level |
|---|--|-------------------|
| Department does not finalise disciplinary cases within the policy requirements; the necessary documentation is not kept; and reports are not submitted on time.   | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1           |
| Department finalises disciplinary cases within the policy requirements but the necessary documentation is not kept and reports are not submitted on time.   | <ul style="list-style-type: none"> <li>• Available information on disciplinary case management</li> </ul>  | Level 2           |
| Department finalises disciplinary cases within the required process and timeframes and necessary documentation is kept and reports are submitted on time.   | <ul style="list-style-type: none"> <li>• Available information on disciplinary case management</li> <li>• Copies of reports submitted</li> </ul>   | Level 3           |
| <p>All above in Level 3 plus:</p> <p>Department conducts analysis on nature of misconduct and implements preventive measures.</p> <p>Department has a labour relations capacity development programme in place to equip line management with skills to manage discipline.</p> | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Analysis misconduct</li> <li>• Implementation of recommendations and corrective measures</li> <li>• Capacity development programme for Line Managers</li> </ul> | Level 4           |

**3.5 Performance Area: IT Systems and equipment**

**3.5.1 Indicator name: IT Governance Framework**

**Indicator definition:** Whether the department has an approved IT governance framework that is integrated in the APP.

**Secondary Data:** AGSA – Score on the IT governance  
**AGSA -** Score on the data quality

**Question:** Which set of statements best reflects the department’s approach to governance of IT?

| Statement  | Evidence  | Performance level |
|--|---|-------------------|
| Department does not have an IT Governance Framework and Master Systems Plan.   | <ul style="list-style-type: none"> <li>No evidence</li> </ul>   | Level 1           |
| Department has an IT Governance Framework and MSP but does not provide regular reports to the DPSA.  | <ul style="list-style-type: none"> <li>Approved IT Governance Framework</li> <li>Approved MSP</li> </ul>                                    | Level 2           |
| Department has an approved IT Governance Framework and, MSP and provides regular reports to DPSA on time.  | <ul style="list-style-type: none"> <li>Approved IT Governance Framework</li> <li>Approved MSP</li> <li>Reports submitted to DPSA</li> </ul> | Level 3           |
| <p>All above in Level 3 plus:</p> <p>Information technology is supporting the achievement of the objectives in the Strategic Plan and APP. That the APP is enabling the implementation of the MSP.</p> <p>Department’s IT requirements are integrated into the Department’s APP.</p> | <ul style="list-style-type: none"> <li>All above in Level 3 plus:</li> <li>APP funding for implementation of MSP</li> </ul>                 | Level 4           |

#### 4. FINANCIAL MANAGEMENT

The approach to self-assessment for the Key Performance Area of Financial Management deviates slightly from the approach used in the three other Key Performance Areas. The Financial Management Capability Maturity Model (FMCMM) of the National Treasury is a self-assessment tool that is already in use. Once departments complete the FMCMM questionnaire on the web it generates a score for the department, covering the following areas:

- Supply Chain Management
- Asset Management
- Revenue Management
- Compensation of Employees
- General
- Goods and Services
- Transfer Payments
- Liability Management

Treasury will develop support plans for each department based on the scoring results. Treasury also provides capacity building teams to assist departments to implement the support plans.

***MPAT will use the scoring results generated by Treasury in its FMCMM Model on financial management to calculate the results for the Key Performance Area Financial Management in MPAT.***

Additional self-assessment questions have been developed for Supply Chain Management.

The following is a list of relevant regulatory documents guiding Financial Management in the public service:

| Policy and legislation  |
|---|
| <ul style="list-style-type: none"><li>• Constitution (Section 217)</li><li>• Public Finance Management Act</li><li>• Treasury Regulations</li><li>• Preferential Procurement Policy Framework Act (PPPFA)</li><li>• Preferential Procurement Policy Framework Regulations</li><li>• Guide to Accounting Officers on Supply Chain Management (National Treasury)</li><li>• Broad Based Black Economic Empowerment Act</li><li>• Treasury Circulars and Instruction Notes</li><li>• New Economic Reporting Format (National Treasury)</li></ul> |

## Additional Self-Assessment Statements for Supply Chain Management

| <b>4.1 Performance Area: Supply Chain Management</b>  |   |                          |
|---|---|--------------------------|
| <b>4.1.1 Indicator name: Demand management</b>  |   |                          |
| <b>Indicator definition:</b> Needs assessment and specifications of goods and services required by the department linked to departmental budget.  |   |                          |
| <b>Question:</b> Which set of statements best reflects the department’s approach to demand management?  |   |                          |
| <b>Statement</b>  | <b>Evidence</b>   | <b>Performance level</b> |
| Department does not have a demand management plan.  | <ul style="list-style-type: none"> <li>• None required</li> </ul>   | Level 1                  |
| Department has a demand management plan in place but is not implemented.  | <ul style="list-style-type: none"> <li>• Copy of procurement plan</li> </ul>  | Level 2                  |
| Department has demand management plan in place, the plan has been implemented and reports submitted to Treasury on time.  | <ul style="list-style-type: none"> <li>• Copy of procurement plan</li> <li>• Copy of implementation plan</li> <li>• Copies of reports submitted to Treasury</li> </ul>                                | Level 3                  |
| All above in Level 3 plus:<br>The demand management reflects measures to achieve cost savings such as non-procurement solutions, transfer of redundant stock and efficiency in usage of assets. | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Business plan/Operational Plan</li> <li>• Performance Review report</li> <li>• Reports on Procurement Spend</li> </ul> | Level 4                  |

| <b>4.1 Performance Area: Supply Chain Management</b>   |  |                          |
|--|--|--------------------------|
| <b>4.1.2 Indicator name: Acquisition management</b>  |  |                          |
| <b>Indicator definition:</b> Effective and efficient management of entire acquisitions process from initial decision on how to approach the market, to evaluating supplier performance of the contract.  |  |                          |
| <b>Question:</b> Which set of statements best reflects the department’s approach to acquisition management?  |  |                          |
| <b>Statement</b>   | <b>Evidence</b>  | <b>Performance level</b> |
| Department does not have sourcing strategy.  | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1                  |
| Department has sourcing strategy, but no implementation plan.<br>Department has a supplier database in place.  | <ul style="list-style-type: none"> <li>• Sourcing strategy</li> <li>• Supplier database</li> </ul>   | Level 2                  |
| Department has sourcing strategy, and implementation plan.<br>Department has a supplier database in place and periodically updates it.<br>Department pays suppliers within 30 days.<br>Suppliers’ performances are updated and information used in future acquisitions.  | <ul style="list-style-type: none"> <li>• Sourcing strategy</li> <li>• Implementation plan</li> <li>• Supplier database</li> <li>• Percentage of Suppliers paid within 30 days</li> <li>• BAS report</li> <li>• Professional service provider(PSP) database</li> </ul>  | Level 3                  |
| All above in Level 3 plus:<br>Management monitors payment times and addresses non-compliance with requirement to pay within 30 days.<br>Proper Bid Committee Administration in place.<br>Sourcing strategy reflects assessment of the different procurement methodology options for various categories of spend of the department with a view to choosing the most effective and efficient option for each category.<br>Managers monitor performance of suppliers against the contracts and take remedial actions where necessary. | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Updated supplier database</li> <li>• Supplier usage report</li> <li>• Procurement spend reports</li> <li>• Supplier performance review report</li> <li>• Bid Committee appointment letters, signed Codes of Conduct, Bid administration document</li> <li>• Contract management meetings</li> <li>• Correspondence with suppliers during contracts</li> </ul> | Level 4                  |

| <b>4.1 Performance Area: Supply Chain Management</b>  |   |                          |
|---|---|--------------------------|
| <b>4.1.3 Indicator name: Logistics management</b>   |   |                          |
| <b>Indicator definition:</b> Managing the entire process of logistics, from setting inventory levels, to receiving, managing and issuing goods.   |   |                          |
| <b>Question:</b> Which set of statements best reflects the department’s approach to logistics management?   |   |                          |
| <b>Statement</b>  | <b>Evidence</b>   | <b>Performance level</b> |
| Department does not have documented processes for receiving, managing and issuing goods.  | <ul style="list-style-type: none"> <li>• None required</li> </ul>   | Level 1                  |
| Department has documented processes for receiving, managing and issuing goods.  | <ul style="list-style-type: none"> <li>• Process flow</li> </ul>  | Level 2                  |
| Department implements processes for receiving, managing and issuing goods.  | <ul style="list-style-type: none"> <li>• LOGIS report</li> <li>• BAS report</li> </ul>  | Level 3                  |
| <p>All above in Level 3 plus:</p> <p>Stock holdings and distribution processes optimised to minimise cost.</p> <p>High level of internal customer satisfaction.</p> <p>End users are being trained and informed of processes.</p> | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Purchase order process from creating order to invoicing, receiving and paying goods and services</li> <li>• Reports on how long stock are held before used</li> <li>• Customer survey reports</li> <li>• Training programme and attendance register</li> </ul> | Level 4                  |

| <b>4.1 Performance Area: Supply Chain Management</b>   |  |                          |
|--|--|--------------------------|
| <b>4.1.4 Indicator name: Disposal management</b>   |  |                          |
| <b>Indicator definition:</b> Disposal strategy and policy to optimise use of assets, minimise losses and ensure correct execution of disposal process.   |  |                          |
| <b>Question:</b> Which of the following statements best reflects your department’s approach to disposal management?  |  |                          |
| <b>Statement</b>   | <b>Evidence</b>  | <b>Performance level</b> |
| Department does not have a disposal strategy and policy.   | <ul style="list-style-type: none"> <li>• None required</li> </ul>  | Level 1                  |
| Department has a disposal strategy and policy but not implemented.   | <ul style="list-style-type: none"> <li>• Disposal strategy and policy documents</li> </ul>   | Level 2                  |
| <p>Department has a disposal strategy disposal policy and it is implemented.</p> <p>Disposal committee appointed and disposal meetings are held.</p>   | <ul style="list-style-type: none"> <li>• Disposal strategy and policy documents</li> <li>• Implementation plan documents</li> <li>• Appointment letters of Disposal Committee</li> <li>• Minutes of Disposal Committee</li> <li>• Proof of communication to staff</li> <li>• AG Disposal requirement report</li> </ul> | Level 3                  |
| <p>All above in Level 3 plus:</p> <p>Department’s disposal strategy leads to optimal use, minimised losses and increased savings.</p> <p>Department considers social and environmental benefits in disposal processes.</p> <p>Obsolescence planning is done.</p> <p>Department maintains a database of redundant assets.</p> | <ul style="list-style-type: none"> <li>• All above in Level 3 plus:</li> <li>• Disposal committee meeting minutes showing where disposal issues are debated</li> <li>• Proof of increased savings or minimised losses</li> <li>• Obsolescence planning documents</li> <li>• Database of redundant assets</li> </ul>    | Level 4                  |

## Summary list of KPAs, Performance Areas and Indicators

| <b>SELF-ASSESSMENT KEY PERFORMANCE AREAS, PERFORMANCE AREAS AND INDICATORS</b>                        |  |  |  |
|---|--|--|--|
| <b>1. Strategic Management</b>  | <b>2. Governance and Accountability</b>  | <b>3. Human Resource and Systems Management</b>  | <b>4. Financial Management</b>   |
| <b>1.1 Strategic Planning</b><br>1.1.1 Strategic planning alignment<br>1.1.2 Annual Performance Plans | <b>2.1 Service Delivery Improvement</b><br>2.1.1 Service delivery charter, standards and SDIP  | <b>3.1 Human Resource Strategy and Planning</b><br>3.1.1 HR planning<br>3.1.2 Organisational design<br>3.1.3 Assessment of Human Resources Development   | <b>4.1 Supply Chain Management</b><br>4.1.1 Demand management<br>4.1.2 Acquisition management<br>4.1.3 Logistics management<br>4.1.4 Disposal management |
| <b>1.2 Programme Management</b><br>1.2.1 Programme Management Alignment                               | <b>2.2 Management Structures</b><br>2.2.1 Functionality of management structures   | <b>3.2 Human Resource Practices &amp; Administration</b><br>3.2.1 Assessment of personnel administration systems<br>3.2.2 Application of recruitment practices<br>3.2.3 Staff retention<br>3.2.4 Management of diversity | <b>4.2 Asset Management</b>  |
| <b>1.3 Monitoring and Evaluation</b><br>1.3.1 Use of monitoring and evaluation outputs                | <b>2.3 Accountability</b><br>2.3.1 Annual reporting<br>2.3.2 Functioning of Audit Committee  | <b>3.3 Management of Performance</b><br>3.3.1 Implementation of level 1-12 PMDS<br>3.3.2 Implementation of SMS PMDS (exc HOD)<br>3.3.3 Implementation of SMS PMDS for HOD  | <b>4.3 Revenue Management</b>  |
|   | <b>2.4 Ethics</b><br>2.4.1 Systems and policies to ensure professional ethics<br>2.4.2 Fraud prevention  | <b>3.4 Employee Relations</b><br>3.4.1 Functional departmental bargaining chamber<br>3.4.2 Management of disciplinary cases  | <b>4.4 Compensation of Employees</b>   |
|   | <b>2.5 Internal audit</b><br>2.5.1 Assessment of internal audit arrangements   | <b>3.5 IT Systems</b><br>3.5.1 IT Governance Framework   | <b>4.5 General</b>   |
|   | <b>2.6 Risk management</b><br>2.6.1 Assessment of risk management arrangements   |  | <b>4.6 Goods and Services</b>  |
|   | <b>2.7 Delegations</b><br>2.7.1 Delegations in terms of PSA (public administration)<br>2.7.2 Delegations in terms of PFMA (financial administration) |  | <b>4.7 Transfer Payments</b>   |
|   |  |  | <b>4.8 Liability Management</b>  |