THE PRESIDENCY
REPUBLIC OF SOUTH AFRICA
DEPARTMENT: PERFORMANCE MONITORING AND EVALUATION

Management Performance Assessment Tool (MPAT)

23 September 2011
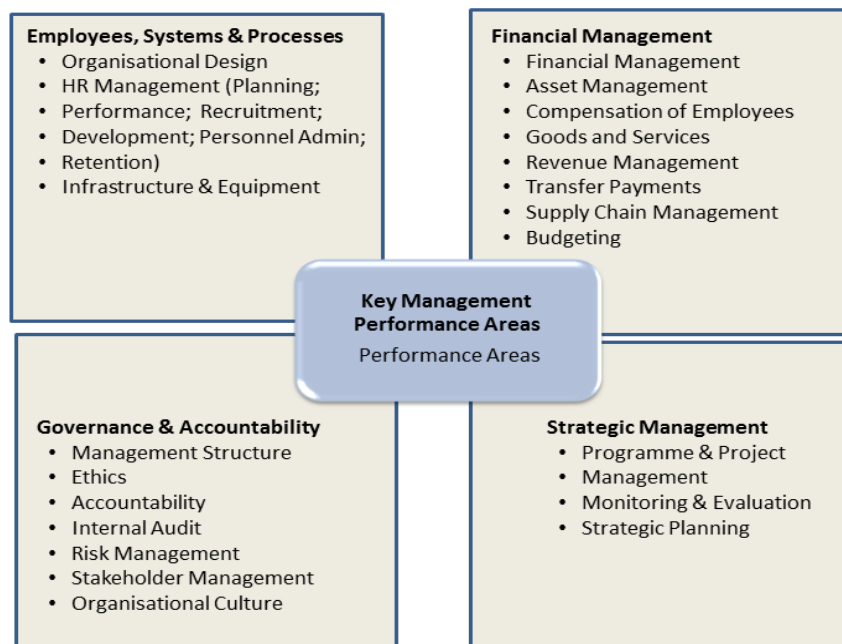
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1. Introduction

1.1   Background

Government has identified 'efficient, effective and development-orientated public service' (Outcome 12) and 'efficient and effective local government' (Outcome 9) as fundamental to the achievement of its Priority Outcomes expressed in the Programme of Action. On 22 June 2011, Cabinet approved the roll-out of a Management Performance Assessment Tool (MPAT) to national and provincial departments. The objectives of the MPAT are to establish a baseline of the management performance of departments and to provide the leadership of departments with useful information to inform improvements in the quality of management practices.

The MPAT focuses on management aspects of performance and not on policy or programmes of departments. The framework for the MPAT approved by Cabinet covers four management Key Performance Areas, each with a set of performance areas as shown in Figure 1.

Figure 1: Key Performance Areas

The MPAT assessment will draw on existing data from transversal departments such as the National Treasury and the DPSA, as well as self-assessments to be completed by departments. The MPAT tool has been piloted in selected transversal departments and one province and the Department of Performance Monitoring and Evaluation (DPME) has held a workshop with departments to identify indicators to be used. Following these consultations, it was agreed that further work was required to refine the indicators and the self-assessment tool. A two-day workshop was held on 30-31 August to refine the self-assessment tool and confirm the indicators to be used.

1.2 Structure of the report

The report constitutes a summary of the proceedings of the Self-Assessment Tool workshop and is structured as follows:

- Section 2 provides an overview of the workshop held on 30-31 August 2011.

- Sections 3 to 6 present reports on the workshop commissions for each of the Key Performance Areas.

- Section 7 presents feedback from participants in the plenary sessions and the workshop evaluation.

- Section 8 makes concluding remarks and proposals on the way forward.

2. Overview of workshop

2.1 Workshop purpose and objectives

The purpose of the workshop was to refine the Self-Assessment Tool component of the MPAT. The specific objectives of the workshop were:

a) To refine the definitions of each performance area within the four Key Performance Areas.

b) To develop specific questions for each performance that could be used in the Self-Assessment Tool, for rating the performance of the department.

c) To refine, if necessary, the relevant indicators associated with performance areas.

d) To identify the policies and legislation relevant to each performance area.

e) To identify evidence and sources of evidence required for assessing each performance area.

The workshop was attended by officials from the following departments:

- Department of Public Service & Administration
- Office of the Accountant-General (National Treasury)
- Department of Performance Monitoring & Evaluation
- Department of Cooperative Governance (National)
- PALAMA
- Ministry of Women, Children and Persons with Disabilities
- Office of the Premier, Gauteng
- Office of the Premier, Mpumalanga
- KZN Department of Cooperative Governance & Traditional Affairs

[get final list from DPME]

The list of officials who attended is shown in Annex A. The workshop programme is shown in Annex B.

2.2 Presentation by DPME

The workshop began with a presentation by DPME on the MPAT, the Cabinet decision, the progress made to date and what was envisaged going forward. It was necessary to provide a detailed overview of MPAT as a number of workshop participants had not had prior involvement in the process. Key points made in the presentation:
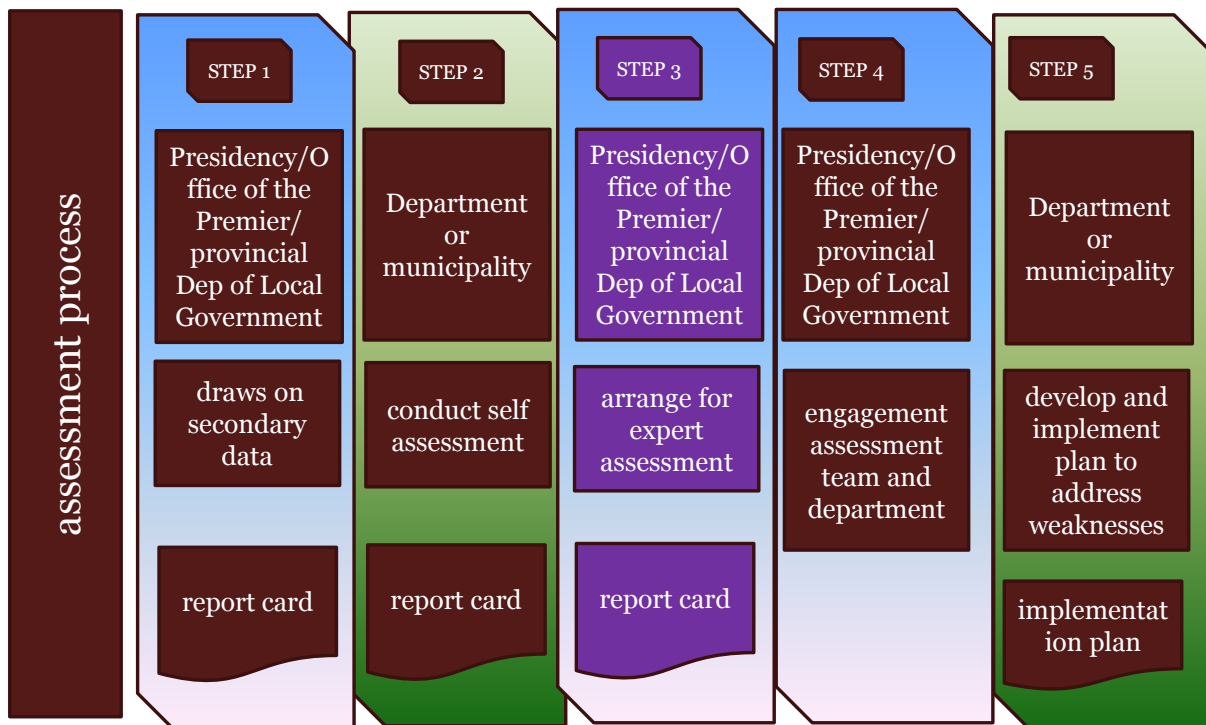
Background

- Cabinet mandated DPME in October 2010 to pilot and make recommendations for roll-out of MPAT.

- DPME convened a national review workshop 18 to 20 April 2011. The workshop reviewed the framework, key performance areas and indicators of MPAT.

- Cabinet mandated the roll-out of MPAT, on 22 June, to national and provincial departments and pilot municipalities.

Objectives of MPAT

- Establish the baseline management performance of institutions against management benchmarks

- Provide leadership with useful information to inform improvement

- Catalyse improvements in management

- For the worst performers, develop an agreed improvement plan and provide support where necessary

- Track improvements against the baseline performance

Five step assessment process

assessment process	STEP 1	STEP 2	STEP 3	STEP 4	STEP 5
	Presidency/Office of the Premier/ provincial Dep of Local Government	Department or municipality	Presidency/Office of the Premier/ provincial Dep of Local Government	Presidency/Office of the Premier/ provincial Dep of Local Government	Department or municipality
	draws on secondary data	conduct self assessment	arrange for expert assessment	engagement assessment team and department	develop and implement plan to address weaknesses
	report card	report card	report card		implementation plan

2.3 Workshop process

With the objective of working on the details of the Self-Assessment Tool, the workshop process entailed having most of the work done in commissions (one for each Key

Performance Area). Plenary sessions were held at the end of each day to share progress and to discuss issues emerging from the commissions.

The process was structured and templates were provided to assist in obtaining a good degree of consistency across the four Key Performance Areas. The facilitators were also given detailed guidance to ensure consistency in approach. Each commission had a resource person who could provide subject matter expertise. The commissions were provided with the draft qualitative assessment levels and statements for performance areas that had been developed in previous workshops and consultations. These were to be used a a reference to assist the commissions in their discussions.

The commissions began with providing a comprehensive statement of their respective Key Performance Areas. The aim was to ensure that the appropriate performance areas had been captured within each Key Performance Area. This was followed by defining each performance area. The intention was to obtain, as far as possible, the official definitions used in policy and legislation.

The commissions then proceeded to identify relevant policy and legislation for each of the performance areas and documents that could serve as sources of evidence for the assessment. The commissions were required to confirm or refine the indicators that fell within each performance area. The overall methodology for the workshop is shown in Annex C.

A significant proportion of time in the commissions was allocated to framing the self-assessment questions for each of four levels of performance, as reflected in the MPAT Framework approved by Cabinet (Figure 2). Questions were framed for each performance indicator that had been identified with a particular performance area.

Figure 2: Description of levels of performance

Description	Level
A department that has insufficient capability, is largely non-compliant and is performing poorly in terms of its management practices. It is not well placed to address these weaknesses in the short to medium term and needs additional action and support to improve performance for effective delivery.	Level 1
A department that has improving capability, is partially compliant or improving its compliance, but is performing below expectations in terms of its management practices. There are no clear plans to improve its performance and support action is required. Support similar to level one, but less intense.	Level 2
A department that has sufficient capability, is fully compliant and its performance is adequate in terms of management practices. It has identified its capability gaps and is well placed to address them.	Level 3
A department that has excellent capability, is fully compliant and is performing above expectations. There is evidence of learning and benchmarking against global good practice which confirms progress towards world class.	Level 4

3. Commission report for Key Performance Area: Employees, Systems and Processes

3.1 Review of Key Performance Area and Performance Areas

This commission made substantial revisions to work that had been done previously in this Key Performance Area. The following changes were proposed to performance areas:

- HR Strategy and Planning: to replace Organisational Design and HR Planning
- HR Practices and Administration: to replace HR Management
- HR utilisation and capacity development: to replace HR Development and HR Performance
- Employee Relations: a new performance area
- Health and Wellness: a new performance area
- Infrastructure and Equipment: remains unchanged

The table that follows provides the statements or definitions proposed by the commission.

Table 1: Statements for Key Performance Area: Employees, Systems and Processes

Key Performance Area:	Comprehensive statement:
Employees, Systems and Processes	Practices whereby human resources are strategically managed to optimise service delivery
Performance Area	**Broad statement or definition**
HR Strategy and Planning	Human resource allocation and organisational configuration to support organisational strategic objectives
HR Practices and Administration	Human resource practices and systems to manage the employee life cycle
HR utilisation and capacity development	Manage the gap between the employee skills and performance and organisational expectation
Employee Relations	Management of the relationship between the employee, the organisation and organised labour
Infrastructure and Equipment	The provisioning of reasonable accommodation and tools of trade to enable optimal performance
Health and Wellness	Manage Employee Assistance and wellness programmes to promote a healthy, safe and productive workforce

3.2 Policy, legislation and documentary sources of evidence

The table that follows provide the list of policy and legislation documents for each of the six performance areas.

Table 2: Policy and legislation relevant to performance areas

	HR Strategy and Planning	HR Practices & Administration	HR utilisation and capacity development	Employee Relations	Infrastructure & Equipment	Employee Health & Wellness
Directive on HR Self-assessments	✔	✔	✔	✔	✔	✔
Employment Equity Act	✔	✔				
Human resource Strategy for Public Service	✔					
Guideline effective HR management and employment equity implementation	✔	✔	✔			
Directive on Organisational Design	✔					
Guide and ToolKit on Organisational Design	✔					
Public Service internship programme 2009	✔	✔				
Directive on HR planning	✔	✔	✔			
Gender Equality Strategic Framework	✔	✔				✔
COIDA in workplace		✔				✔
Guide on disciplinary and incapacity matters		✔		✔		
Human Resource Development for the Public Service		✔	✔			
Code of Conduct for the Public Service		✔	✔	✔		
Labour relations policy framework and collective agreements		✔		✔		
Leadership development strategic framework		✔	✔			
Policy and procedures on incapacity and ill-health		✔				✔
Managing staff retention: Information Guide to Departments		✔				
Incentive policy framework linked to performance management systems for employees			✔			
Senior Management Service handbook and directives		✔	✔			
Skills Development Act			✔			
Public Service Mentorship programme			✔			
Public Service Middle Management Competency Framework			✔			

Handbook of reasonable accommodation of persons with disabilities in public service					✔	✔
Occupational Health & Safety Act					✔	✔
Strategic Framework for Employee Health and Wellness						✔
Managing HIV/AIDS in the work place						✔

Table 3: Documentary sources of evidence for performance areas

	HR Strategy and Planning	HR Practices & Administration	HR utilisation and capacity development	Employee Relations	Infrastructure & Equipment	Employee Health & Wellness*
Annual Report	✔	✔	✔	✔	✔	
Annual Performance Plan	✔	✔	✔	✔	✔	
Auditor-General's Report	✔	✔	✔	✔	✔	
Organisational structure	✔					
HR Plan	✔	✔				
Service Delivery Model	✔					
'Equate System'	✔					
Strategic Plan	✔					
HR Delegations		✔	✔	✔		
Policies on recruitment, selection and employment		✔				
Financial Disclosure		✔				
Employment Equity Forum		✔				
Signed performance agreements			✔			
PMDS (levels 1-12)			✔			
Workplace Skills Plan			✔			
Formal Performance Reviews			✔			
Submission on performance assessments for cycle			✔			
HRD Plan			✔			
Internship programme			✔			
Bursary policies			✔			
Bursary Committee minutes			✔			
Departmental Bargaining Chamber Agreements				✔		
ICT Policies					✔	
COIDA reports					✔	
Gender, Equality, Youth, Older Persons and Persons with Disabilities reports	✔	✔	✔	✔	✔	

*Information not provided for this performance area

3.3 Self-Assessment questions and statements

The following section sets out the self-assessment questions and qualitative statements for the following three performance areas: HR Strategy and Planning; HR Practices and Administration; and HR Utilisation and Capacity Development The commission did not develop questions and qualitative statements for the following performance areas: Employee Relations; Infrastructure and Equipment; and Employee Health & Wellness.

Box 1: HR Planning compliance

Performance Area: HR Strategy and Planning		
Indicator name and number: HR Planning compliance (925)		
Indicator definition: The department complies with and implements the HR planning requirements. A MTEF HR plan has been developed and approved by the relevant authority.		
Question: Which of the following statements best reflects the state of HR planning in your department?		
Statement	**Evidence**	**Performance level**
My department did not submit an HR Plan to DPSA since there is no draft.	• Evidence not required	Level 1
My department has a draft plan submitted internally for approval.	• Proof of draft plan and submission	Level 2
My department has submitted a signed HR Plan and implementation progress reports to DPSA.	• Proof of signed plan and progress reports	Level 3
My department has submitted a signed HR Plan and implementation progress reports to DPSA displaying implementation progress.	• Proof of signed plan and progress reports	Level 4

Box 2: Assessment of Human Resources Development

Performance Area: HR Strategy and Planning		
Indicator name and number: Assessment of Human Resources Development (1068)		
Indicator definition: TBC		
Question: Which of the following statements best reflects the state of Human Resources Development in your department?		
Statement	**Evidence**	**Performance level**
My department did not submit an HRD Plan to DPSA and does not have a draft plan that is under consideration.	• Evidence not required	Level 1
My department did not submit an HRD Plan to DPSA but has a draft HRD plan that has been submitted internally for approval.	• Proof of draft plan and submission	Level 2
My department has submitted a signed-off HRD Implementation Plan and HRD progress reports on time.	• Proof of signed plan and progress reports	Level 3
My department has submitted a signed HRD Plan and Annual Implementation progress reports displaying implementation progress.	• Proof of signed plan and progress reports	Level 4

Box 3: Organisational Design

Performance Area: HR Strategy and Planning		
Indicator name and number: Organisational Design (revised indicator)		
Indicator definition: Organisational structure submitted for consultation by competent authority, meeting requirements of the Directive on Organisational Structuring		
Question: Which of the following statements best reflects how your department responds to the Directive on Organisational Structuring		
Statement	**Evidence**	**Performance level**
No proof that organisational structure was submitted for consultation in terms of the Directive and/or cannot be funded within the Medium Term Expenditure Framework (MTEF)	• No evidence	Level 1
The organisational structure was submitted for consultation but has fundamental flaws with information inadequacies, for example, lack of information to support the assessment that it is aligned to the strategic plan, that it is affordable and that the positions are correctly graded, etc.	• Approved organogram • Proof organogram submitted for consultation • Strategic Plan and the Directive • Job grading reports	Level 2
The organisational structure was submitted for consultation, included adequate information that conforms with the Directive and was supported by the Minister for Public Service Administration and approved by the Executive Authority. The approved organogram was implemented without change and contributes to the implementation of the Departmental strategic objectives over the MTEF.	• Approved organogram • Proof organogram submitted for consultation • Strategic Plan and the Directive • Job grading reports	Level 3
The organisational structure was submitted for consultation, included adequate information that conforms with the Directive, was supported by the Minister for Public Service Administration and approved by the Executive Authority. The approved organogram was implemented without change and contributes to the implementation of the Departmental strategic objectives over the MTEF. There were no major revisions required around the MTEF period or the revision period that could have been addressed as part of the original development.	• Newly approved organogram and PERSAL Management report to verify implementation • Proposed organogram submitted for consultation • Strategic Plan and the Directive • Job grading reports	Level 4

Box 4: Assessment of Personnel Administration Systems

Performance Area: HR Practices and Administration		
Indicator name and number: Assessment of Personnel Administration Systems (revised)		
Indicator definition: Department must have a procedure in place and dedicated officials to manage payroll certification, with a process for quality control		
Question: Which of the following statements best reflects the procedures in place to manage the payroll?		
Statement	**Evidence**	**Performance level**
No process in place to manage monthly payroll certification.	• No evidence	Level 1
A process is in place but is not or only partially being implemented.	• Copy of procedure for payroll management	Level 2
A process is in place and is fully implemented on a monthly basis and discrepancies are corrected in the system.	• Copy of procedure for payroll management • Proof of amendments/ updates made to payroll	Level 3

| A process is in place, fully implemented on a monthly basis and the information gathered in applying this process is used to rectify discrepancies. In addition, a trend analysis is conducted to identify risks and development and implementation of mitigation and implementation plans. | • Copy of procedure for payroll management
• Proof of amendments/ updates made to payroll
• Proof of trends analysis with risk assessment and mitigation plans | Level 4 |

Box 5: Application of recruitment practices

Performance Area: HR Practices and Administration		
Indicator name and number: Application of recruitment practices (1071)		
Indicator definition: Recruitment practices adhere to regulatory requirements and are strategic in nature, supporting the continuing resourcing of the department		
Question: Which of the following statements best reflects your department's approach to recruitment?		
Statement	**Evidence**	**Performance level**
Not complying with public service regulations for recruitment processes, with no recruitment process defined.	• No evidence	Level 1
A process has been approved for recruitment which is compliant to the public service regulations but is not fully or consistently implemented.	• Proof of standard operating procedure or policy for recruitment	Level 2
A process with clear roles and responsibilities has been approved and is fully and consistently implemented for recruitment…..AND… All vacant posts are filled within twelve months.	• Proof of standard operating procedure or policy for recruitment • Proof of implementation of process • Proof of delegations clarifying roles and responsibilities	Level 3
A process with clear roles and responsibilities has been approved and is fully and consistently implemented for recruitment…..AND… All vacant posts are filled within six months.	• Proof of standard operating procedure or policy for recruitment • Proof of implementation of process • Proof of delegations clarifying roles and responsibilities • Priorities in HR Plan are evident and addressed in recruitment practices	Level 4

Indicator: Assessment of Retention Strategy was change to Staff Retention. Comments from the commission when debating and refining this indicator are:

- There is not a requirement to have a retention strategy so the indicator is incorrectly worded. Retention strategy should talk to a broader aspect such as around having something in place to create an environment in which to develop and retain new people. This goes back to the HRD question asked.

- As part of HR planning one will also look at scarce and critical skills – how to retain people. One would need to have a good understanding of contextual global realities influencing scarce and critical skills.

- The provisions that exist to deal with retention are development of staff, recognising performance, promotion – we don't promote, we recruit based on advertised posts. One can advertise internally if internal candidates are well qualified. The idea is to retain the middle-management and create continuity over time.

Box 6: Staff retention

Performance Area: HR Practices and Administration		
Indicator name and number: Staff retention (new)		
Indicator definition: Efforts to develop and retain staff, especially retaining scarce and critical skills		
Question: Which of the following statements best reflects your 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.	• No evidence available	Level 1
Inconsistent application of an approved standardised approach or procedure to deal with retention of scarce and critical skills.	• Approved procedure with an indication of the occupational classes to be prioritised for retention	Level 2
The department consistently applies an approved standardised approach or procedure to deal with staff retention and the development of staff. Systems are in place to inform decision making on retention. A conducive environment exists that satisfies the needs and expectations of employees aligned to the needs of the organisation.	• Approved procedure with an indication of the occupational classes to be prioritised for retention • Employee satisfaction survey	Level 3
A consistent approach to deal with staff retention which provides for the development of talent to ensure an internal supply around scarce and critical skills, as well as creating retention and stability around staff turnover. The revision of scarce and critical skills is informed by trend analysis of internal and external supply and demand factors.	• Approved procedure with an indication of the occupational classes to be prioritised for retention • Employee satisfaction survey • Trends captured in HR plan and evidence of utilisation to inform decisions	Level 4

Box 7: Non-SMS Performance Management System

Performance Area: HR Utilisation and Capacity Development
Indicator name and number: Implementation of non-SMS Performance Management System (split indicator 1069)
Indicator definition: Department implements its PMDS in terms of all employees within the requisite policy

provisions		

Question: Which of the following statements best reflects the state of performance management in your department?

Statement	Evidence	Performance level
My department does not have a Performance Management and Development policy in place	• No evidence available	Level 1
My department has an approved policy in place which is partially implemented.	• There is a copy of the policy with timelines and structures in roles and responsibilities	Level 2
Full implementation and adherence to the approved Departmental PMDS policy.	• Proof of submission of the outcome of the performance reviews and a copy of approved policy	Level 3
My Department has implemented the approved PMDS and is showing evidence of actively managing the performance outcomes in relation to the development of employees, managing poor performance and rewarding outstanding performance.	• Proof that areas of development or poor performance have been identified after formal performance reviews have been conducted. • Evidence that outstanding performance has been identified and rewarded	Level 4

Box 8: HoD Performance Management

Performance Area: HR Utilisation and Capacity Development		

Indicator name and number: Implementation of SMS Performance Management System (split indicator 1069)		

Indicator definition: Performance of the Head of Department is managed		

Question: Which of the following statements best reflects the how the performance of the HOD is managed?

Statement	Evidence	Performance level
The HOD did not submit a signed performance agreement to the Executive Authority.	• No evidence available	Level 1
The HOD submitted a signed performance agreement to the Executive Authority but did not file it with the Office of the Public Service Commission.	• Proof of submission of signed performance agreement to EA	Level 2
The HOD performance agreement was filed at the Office of the Public Service Commission on time. Minor refinement was required from the PSC and formal reviews undertaken.	• Acknowledgement and comments received from PSC	Level 3
The HOD performance agreement was filed at the Office of the Public Service Commission on time and no refinement was required from the PSC. Evidence is shown of actively managing the performance outcomes in relation to development, managing poor performance and rewarding outstanding performance.	• Acknowledgement and comments received from PSC • Proof that areas of development or poor performance have been identified and addressed after formal performance reviews have been conducted. • Evidence that outstanding performance has been identified and rewarded.	Level 4

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3.4   Areas requiring further attention

The following issues require further attention and action:

Table 4: Employees, Systems and Processes: Issues for further action

Issue	Action required
Performance Area: Infrastructure and Equipment	The indicator (1073) should be refined and the relevant question and qualitative statements developed.
Performance Area: Employee Relations	This is a new performance area. A decision is needed on whether or not to proceed with this in the current phase of MPAT. The indicator(s), questions and statements should be developed if the decision is made to proceed.
Performance Area: Employee Health and Wellness	This is a new performance area. A decision is needed on whether or not to proceed with this in the current phase of MPAT. The indicator(s), questions and statements should be developed if the decision is made to proceed.
Performance Area: Organisational Culture	This was not addressed in the commission. Existing indicator (1079) needs to be refined and questions and statements developed. This performance area should be moved from the Governance & Accountability Key Performance Area.
Performance Area: Business Process Mapping	This was not addressed in the commission and does not appear in the set of performance areas in the MPAT Framework document. A decision needs to be made if it should be included. The indicator needs to be refined and questions and statements developed.
Indicator definitions	These should be confirmed and missing definitions completed.

4. Commission report on Key Performance Area: Governance & Accountability

4.1 Review of Key Performance Area and Performance Areas

The commission adopted the approach of building on the work done in previous workshops and focused on refining what already existed. There was extensive discussion around what constituted governance and what was understood by the term 'accountability'. The commission also considered aspects from the perspective of local government, but did not embellish these as there should be a separate process for MPAT for local government.

The table that follows provides the statements or definitions proposed by the commission.

Table 5: Statements for Key Performance Area: Governance and Accountability

Key Performance Area:	Comprehensive statement:
Governance and Accountability	The department conducts its affairs according to the basic values and principles of public administration set out in Chapter 10 (section 196) of the Constitution. This means being ethical, accountable, transparent, providing fair and equitable service, being responsive to people's needs, promoting public participation and ensuring the effective, efficient and economical use of state resources. It also means having the systems, processes and decision-making in place for governing the department.
Performance Area	**Broad statement or definition**
Service Delivery Improvement	*Systems and processes to ensure that* service delivery is continuously improved, the service delivery model is relevant or appropriate for the mandate of the department, the department is transparent about the standards of service that citizens can expect.
Management Structure	Structures in the organisation that ensure that the organisation is aligned with the strategic direction of set by Government and that the strategic objectives of the organisation are being met. EXCO is an example.
Accountability	Being accountable to others (internally and externally) for decisions made and resources used. The accountability framework includes reports (annual, quarterly) to the legislature and other oversight bodies (PSC, Auditor-General); monitoring implementation of recommendations and decisions; structures (Audit Committees). A clear definition of respective roles and responsibilities between the political leadership and administrative leadership is an essential component of the accountability framework. Includes developing a culture of accountability in the department.
Ethics	Systems and policies in place to promote ethical behaviour and discourage unethical behaviour and corruption. These include the Code of Conduct for Public Service, Municipal Code of Conduct, Minimum Anti-Corruption Capacity Requirements, Anti-Corruption strategies and frameworks. There should also be

	disciplinary processes for transgression.
Internal Audit	An independent, objective assurance designed to add value and improve the department's operations and achieve its objectives. It is a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, controls, and governance processes. It operates under control of the Audit Committee, and is prescribed in s38(ii) of the PFMA.
Risk Management	Systems and processes in place to reduce the risk of fraud, disruption to services, loss of information, etc. Risk assessments and risk management strategies are required by the PFMA and National Treasury Regulations.
Public Administration Delegations	Aimed at making decisions on public administration at the appropriate level of the organisation and holding decision-makers accountable. Delegations framework as set out in PSR. Directives issued by the Minister of PSA and Minister of COGTA.
Financial Delegations	Aimed at making decisions on finances at the appropriate level of the organisation and holding decision-makers accountable. Delegations made from the Accounting Officer to other officials. Clear definitions of levels of authority who may exercise the delegation. Requirements are set out in PFMA
Stakeholder management	Structured processes and systems in place to interact with range of stakeholders that include citizen users, general public, other spheres of government, other departments, the legislature, civil society, organised labour, organised business, the legislature and its committees, other oversight bodies, donors (list is not exhaustive). Used for consultation and feedback. Formal structures, e.g. IGR structures, ward committees. Underpinned by Batho Pele principles.

4.2 Policy, legislation and documentary sources of evidence

The tables that follow provides the list of policy and legislation documents identified for each of the six performance areas.

Table 6: Policy and legislation for Governance & Accountability

Policy and Legislation
• Constitution (Chapters 3, 5, 6, 7 and 10) • Public Service Act and Regulations • Public Finance Management Act and Regulations • Inter-Governmental Relations Framework • Code of Conduct for Public Service • White Papers on Public Service • Minimum Requirements for Anti-Corruption Capacity • Promotion of Access to Information Act • Promotion of Administrative Justice Act • Prevention and Combating of Corrupt Activities Act

Table 7: Documents - evidence for Governance & Accountability

List of documents for evidence
• Annual reports • Auditor-General reports • Departmental internal and external quarterly reports • Departmental reports to oversight bodies (legislature, PSC) • PSC reports (departmental monitoring, State of Public Service, specific evaluations) • Departmental internal audit plans and reports • Departmental risk management plans and reports • Departmental monitoring and evaluation reports • Service Delivery Improvement Plans • Service standards and Charters • Departmental Code of Conduct • Departmental organogram • Surveys, citizen feedback • Minutes of meetings (EXCO, Audit Committee, other committees) • Delegations register • Risk register

4.3   Self-Assessment questions and statements

This section captures the questions and statements developed in the commission.

Box 9 : Approved service delivery improvement plan

Performance Area: Service Delivery Improvement		
Indicator name and number: Approved service delivery improvement plan (888)		
Indicator definition: Indicates whether the department has an approved service delivery improvement plan and is implementing it.		
Question: Which of the following statements best reflects the state of service delivery improvement in your department?		
Statement	**Evidence**	**Performance level**
My department does not have a Service Delivery Improvement Plan.	• No SDIP available	Level 1
My department has developed a Service Delivery Improvement Plan and it has been approved	• Copy of approved SDIP	Level 2
My department has an approved Service Delivery Improvement Plan and is implementing it.	• Copy of approved SDIP • Cases to demonstrate implementation (where, who, how)	Level 3
My department has an approved SDIP and is implementing it. Our services have improved over the baseline /previous year	• Copy of approved SDIP • Cases to demonstrate implementation (where, who, how) • Trends in service delivery improvement from M&E reports • Citizen feedback surveys or studies	Level 4

Box 10: Approved and implemented service delivery model

Performance Area: Service Delivery Improvement		
Indicator name and number: Approved and implemented service delivery model		
Indicator definition: Whether the department has an approved service delivery model and is implementing it.		
Question: Which of the following statements best reflects the state of your department's service delivery model?		
Statement	**Evidence**	**Performance level**
My department does not have a Service Delivery Model.	• No SDM available	Level 1
My department has developed a Service Delivery Model and it has been approved by the DPSA.	• Copy of approved SDM	Level 2
My department has an approved Service Delivery Model and submits it annually to the DPSA for approval. We have been implementing the approved Service Delivery Model.	• Copy of approved SDM • Cases to demonstrate implementation (where, who, how)	Level 3
My department has an approved SDM and is implementing it. Our services have improved over the baseline /previous year	• Copy of approved SDM • Cases to demonstrate implementation (where,	Level 4

	who, how) • Trends in service delivery improvement from M&E reports • Citizen feedback surveys or studies	

Box 11: Approved service standards

Performance Area: Service Delivery Improvement		
Indicator name and number: Approved service standards issued and implemented by departments		
Indicator definition: Whether the department has approved service standards and is implementing these.		
Question: Which of the following statements best reflects the state of your department's service standards?		
Statement	**Evidence**	**Performance level**
My department does not have service standards.	• No service standards available	Level 1
My department has developed service standards and these have been approved by the DPSA.	• Copy of approved service standards	Level 2
My department has service standards approved by the DPSA. We have issued these service standards to staff and users/citizens. We monitor, review and update our service standards annually and submit these to the DPSA for approval. We have achieved the service standards this year.	• Copy of latest approved service standards • Cases to demonstrate implementation (where, who, how) • Monitoring reports on service standards	Level 3
My department has service standards approved by the DPSA. We have issued these service standards to staff and users/citizens. We monitor, review and update our service standards annually and submit these to the DPSA for approval. We have exceeded our service standards this year.	• Copy of latest approved service standards • Cases to demonstrate implementation (where, who, how) • Monitoring reports on service standards • Trends in service standards achievements • Evidence of 'raising the bar' over previous year • Citizen feedback surveys	Level 4

Box 12: Approved and published service charter

Performance Area: Service Delivery Improvement		
Indicator name and number: Approved and published service charter		
Indicator definition: Whether the department has an approved service delivery charter and adheres to it to improve services.		
Question: Which of the following statements best reflects the state of your department's service charter?		
Statement	**Evidence**	**Performance level**
My department does not have a service charter.	• No service charter available	Level 1
My department has developed a service charter and it is based	• Copy of service charter and SDIP	Level 2

on our Service Delivery Improvement Plan.		(orange)
My department has developed a service charter and it is based on our Service Delivery Improvement Plan. Our service charter is displayed in areas where staff and citizen/users can see it. We deliver our services in accordance with the service charter.	• Copy of service charter and SDIP • Display of service charter • Cases to demonstrate implementation (where, how, who)	Level 3
My department has a service charter based on our Service Delivery Improvement Plan. Our service charter is displayed in areas where staff and citizen/users can see it. We deliver our services in accordance with the service charter. Our service delivery has improved over the baseline or previous year	• Copy of service charter and SDIP • Display of service charter • Cases to demonstrate implementation (where, how, who) • Trends in service delivery • Citizen feedback surveys	Level 4

Box 13: Functionality of EXCO and MANCO structures

Performance Area: Management structure		
Indicator name and number: Functionality of EXCO and MANCO structures (903)		
Indicator definition: How well EXCO or MANCO structures function in the department.		
Question: Which of the following statements best reflects the functionality of your department's management structures?		
Statement	**Evidence**	**Performance level**
My department has an EXCO or MANCO with formal terms of reference	• EXCO/MANCO terms of reference	Level 1
My department has an EXCO or MANCO with formal terms of reference. EXCO/MANCO meetings are scheduled and meetings take place monthly.	• EXCO/MANCO terms of reference • Minutes of meetings and attendance register	Level 2
My department has an EXCO or MANCO with formal terms of reference. EXCO/MANCO meetings are scheduled and meetings take place monthly. EXCO/MANCO agenda focuses on strategic objectives and priorities of my department. EXCO/MANCO decisions are documented, clear, responsibility allocated and followed through. EXCO/MANCO meets at least twice a year with the Minister.	• EXCO/MANCO terms of reference • Minutes of meetings and attendance register • Action lists or matrix for follow up on decisions	Level 3
My department has an EXCO or MANCO with formal terms of reference. EXCO/MANCO meetings are scheduled and meetings take place monthly. EXCO/MANCO agenda focuses on strategic objectives and priorities of my department. EXCO/MANCO decisions are documented, clear, responsibility allocated and followed through. EXCO/MANCO meets at least twice a year with the Minister. EXCO/MANCO uses MPAT results to drive improvements.	• EXCO/MANCO terms of reference • Minutes of meetings and attendance register • Action lists or matrix for follow up on decisions • Evidence of use of MPAT results	Level 4

Box 14: Timely tabling of compulsory reports

Performance Area: Accountability	
Indicator name and number: Timely tabling of all compulsory reports (898)	
Indicator definition: Compliance with reporting requirements	
Question: Which of the following statements best reflects your department's tabling of compulsory reports?	

Statement	Evidence	Performance level
My department did not table the majority of compulsory reports on time and in the prescribed manner	• Reports tabled and dates tabled	Level 1
My department tabled some compulsory reports on time and in the prescribed manner.	• Reports tabled and dates tabled	Level 2
My department tabled most compulsory reports on time and in the prescribed manner	• Reports tabled and dates tabled • Must include Annual Report, Annual Financial Statements, Quarterly Reports to National Treasury	Level 3
My department tabled the all compulsory reports on time and in the prescribed manner.	• Reports tabled and dates tabled • Must include all compulsory reports	Level 4

Box 15: Assessment of accountability mechanisms

Performance Area: Accountability	
Indicator name and number: Assessment of accountability mechanisms (1075)	
Indicator definition: Whether the department has the main accountability mechanisms in place and their level of functioning.	
Question: Which of the following statements best reflects the state of your department's accountability mechanisms?	

Statement	Evidence	Performance level
My department has some accountability mechanisms in place.	• Documents identifying accountability mechanisms	Level 1
My department has all major accountability mechanisms in place.	• Audit Committee details of members • Internal audit structure and staffing • Monitoring & Evaluation unit structure and staffing • Organisational performance monitoring and reporting system	Level 2
My department has all major accountability mechanisms in place and these are functioning effectively.	• Audit Committee details of members, meetings and minutes • Internal audit structure and staffing, internal audit plan and reports • Monitoring & Evaluation	Level 3

	• unit structure and staffing, M&E plan and reports • Organisational performance monitoring reports	
My department has all major accountability mechanisms in place and these are functioning. Management acts on information from the M&E system, external audits and internal audits. Accountability in my department has improved progressively.	• Audit Committee details of members, meetings and minutes • Internal audit structure and staffing, internal audit plan and reports • Monitoring & Evaluation unit structure and staffing, M&E plan and reports • Organisational performance monitoring reports • Auditor-General reports show no repeat or backlog in audit findings • Action on PSC recommendations • M&E and Internal Audit tracking of management responses and implementation of recommendations	Level 4

Box 16: Assessment of policies and systems to ensure professional ethics

Performance Area: Ethics		
Indicator name and number: Assessment of policies and systems to ensure professional ethics (1076)		
Indicator definition: Systems and policies in place to promote ethical behaviour and discourage unethical behaviour and corruption.		
Question: Which of the following statements best reflects your department's efforts to ensure professional ethics in the work place?		
Statement	**Evidence**	**Performance level**
My department has a code of conduct or uses the Code of Conduct for the Public Service.	• Copy of departmental code of conduct	Level 1
My department ensures that all staff have access to the Code of Conduct.	• Code of conduct displayed visibly • Code of conduct included in induction programme	Level 2
My department supports staff in understanding and applying the Code of Conduct. SMS officials submit financial disclosures duly completed and on time.	• Code of conduct displayed visibly • Special training in application of Code of Conduct • Proof of submission of financial disclosures to PSC	Level 3
My department provides additional training in ethics (beyond Code of Conduct). We have surveyed staff to test their understanding of ethical behaviour and application of Code of Conduct. Our Departmental Bargaining Chamber and Local Labour Forum are actively involved in promoting ethical	• Code of conduct displayed visibly • Special training in application of Code of Conduct	Level 4

behaviour and anti-corruption campaigns. SMS officials submit financial disclosures duly completed and on time.	• Proof of submission of financial disclosures to PSC • Reports on anti-corruption campaigns	

Box 17: Adherence to minimum anti-corruption capacity requirements

Performance Area: Ethics
Indicator name and number: Adherence to minimum anti-corruption capacity requirements (896)
Indicator definition: Extent to which the department meets minimum anti-corruption capacity requirements
Question: Which of the following statements best reflects the extent to which your department meets minimum anti-corruption capacity requirements?

Statement	Evidence	Performance level
My department meets one or two of the minimum capacity requirements for anti-corruption.	• Evidence of these	Level 1
My department meets some of the minimum capacity requirements for anti-corruption.	• Structure and staffing to detect, investigate and take action • Responsible staff have security clearance • Record of allegations and tracking of progress	Level 2
My department meets many of the minimum capacity requirements for anti-corruption.	• Structure and staffing to detect, investigate and take action • Responsible staff have security clearance • Responsible staff submit financial disclosures • Record of allegations and tracking of progress • Information submitted to designated national entities (e.g. PSC)	Level 3
My department meets most/all of the minimum capacity requirements for anti-corruption.	• Structure and staffing to detect, investigate and take action • Responsible staff have security clearance • Responsible staff submit financial disclosures • Record of allegations and tracking of progress • Information submitted to designated national entities (e.g. PSC) • Copy of programmes to educate staff about corruption • Copy of whistle-blowing policy and procedures	Level 4

Box 18: Assessment of internal audit arrangements

Performance Area: Internal Audit		
Indicator name and number: Assessment of internal audit arrangements (1077)		
Indicator definition: The capacity and level of functioning of the department's internal audit unit		
Question: Which of the following statements best reflects the state of internal audit in your department?		
Statement	**Evidence**	**Performance level**
My department is establishing an internal audit unit or my department does not have an internal audit unit.	• Evidence of this	Level 1
My department has a functioning internal audit unit, with suitably qualified staff and an internal audit plan based on a risk assessment. It reports directly to the Accounting Officer and the Audit Committee.	• Structure and staff profile of internal audit unit • Copy of internal audit plan • Participation in Audit Committee	Level 2
My department has a functioning internal audit, with suitably qualified staff and an internal audit plan based on a risk assessment. It reports directly to the Accounting Officer. It does performance audits as well as compliance audits.	• Structure and staff profile of internal audit unit • Copy of internal audit plan • Participation in Audit Committee • Auditor-General's report	Level 3
My department has a functioning internal audit. It reports directly to the Accounting Officer and the Audit Committee. We update our internal audit plan annually. Our staff are suitably qualified and some are registered with the Institute of Internal Auditors. It does performance audits as well as compliance audits. Management acts on internal audit reports."	• Structure and staff profile of internal audit unit • Copy of internal audit plan • Participation in Audit Committee • Auditor-General's report • Internal audit reports • Management responses to findings and recommendations • Staff professional qualifications	Level 4

Box 19: Assessment of risk management arrangements

Performance Area: Risk Management		
Indicator name and number: Assessment of risk management arrangements (1078)		
Indicator definition: Whether the department has basic risk management elements in place and how well these function.		
Question: Which of the following statements best reflects the state of risk management in your department?		
Statement	**Evidence**	**Performance level**
My department is in the process of conducting a risk assessment.	• Evidence of action	Level 1
My department has completed a risk assessment. We have developed a risk management plan and are awaiting approval.	• Copy of risk assessment • Copy of risk management plan	Level 2
My department has an approved risk management plan and we are implementing the plan.	• Copy of risk assessment • Copy of approved risk management plan	Level 3

	• Scope of risk management covers functional and financial risk • Risk Committee meetings and minutes • Updated risk register	
My department has an approved risk management plan and we are implementing the plan. We update our risk management plan annually based on changes in our risk profile. Our managers take responsibility for managing risks in their areas.	• Copy of risk assessment • Copy of approved risk management plan and evidence of updating • Scope of risk management covers functional and financial risk • Risk Committee meetings and minutes • Updated risk register • Risk management is standing item on EXCO agenda	Level 4

Box 20: Stakeholder management

Performance Area: Stakeholder management		
Indicator name and number: New indicator		
Indicator definition: How the department manages stakeholders		
Question: Which of the following statements best reflects stakeholder management in your department?		
Statement	**Evidence**	**Performance level**
My department does not have formal stakeholder management arrangements	• No evidence of formal stakeholder management	Level 1
My department has formal stakeholder management arrangements in place.	• Stakeholder management strategy	Level 2
My department has formal stakeholder management arrangements in place. We communicate and interact regularly with key stakeholders.	• Stakeholder management strategy • Participation in IGR forums • Copies of stakeholder communication • Reports on stakeholder engagements	Level 3
My department has formal stakeholder management arrangements in place. We communicate and interact regularly with key stakeholders. We consult stakeholders on key issues.	• Stakeholder management strategy • Participation in IGR forums • Copies of stakeholder communication • Reports on stakeholder engagements • Proof that stakeholder concerns are taken into account or addressed • Proof of feedback to stakeholders	Level 4

Box 21: Approved public administration delegations

Performance Area: Public Administration delegations	
Indicator name and number: Approved EA and HOD delegations for public administration in terms of the Public Service Act, available in prescribed format and audited (1145)	
Indicator definition: Whether the EA and HOD have implemented the delegations framework set out in PSR and directed by the Minister for Public Service and Administration.	
Question: Which of the following statements best reflects the state of public administration delegations in your department?	

Statement	Evidence	Performance level
My department is in the process of formalising delegations.	• Documents to show actions taken thus far	Level 1
My department is in the process of approving and aligning delegations to the prescribed format and principles.	• Documents to show actions taken thus far	Level 2
My department's delegations are approved and signed by current office bearers, aligned to the organisational structure, prescribed format and delegation principles.	• Approved delegations document • Delegations register updated • Delegations aligned to organisational structure • Audit of delegations by Auditor-General	Level 3
My department's delegations are fully compliant and reflect appropriate delegations from the Executive Authority and HoD, and to all relevant performer levels at all tiers (head office, region, district, institution within the Department).	• Approved delegations document • Delegations register updated • Delegations aligned to organisational structure • Audit of delegations by Auditor-General	Level 4

Box 22: Approved financial administration delegations

Performance Area: Financial administration delegations	
Indicator name and number: Approved EA and HOD delegations for public administration in terms of the Public Finance Management Act, available in prescribed format and audited (1146)	
Indicator definition: Whether the EA and HOD have implemented the delegations framework set out in PSR and directed by the Minister for Public Service and Administration.	
Question: Which of the following statements best reflects the state of public administration delegations in your department?	

Statement	Evidence	Performance level
My department is in the process of formalising delegations.	• Documents to show actions taken thus far	Level 1
My department is in the process of approving and aligning delegations to the prescribed format and principles.	• Documents to show actions taken thus far	Level 2
My department's delegations are approved and signed by current office bearers, aligned to the organisational structure, prescribed format and delegation principles.	• Approved delegations document • Delegations register updated • Delegations aligned to	Level 3

	organisational structure • Audit of delegations by Auditor-General	
My department's delegations are fully compliant and reflect appropriate delegations from the Executive Authority and HoD, and to all relevant performer levels at all tiers (head office, region, district, institution within the Department).	• Approved delegations document • Delegations register updated • Delegations aligned to organisational structure • Audit of delegations by Auditor-General	Level 4

4.4   Areas requiring further attention

A general comment from the commission was that the Public Service increasingly should take guidance from King III when considering governance and accountability issues. The commission also felt that governance was a critical area for the Public Service and the bar for good governance should not be set too low.

The following issues require further attention and action.

Table 8: Governance & Accountability: Issues for further action

Issue	Action required
Performance Area: Service Delivery Improvement	A decision should be made if Service Delivery Improvement should be a stand-alone performance area or whether it should be part of the Performance Area: Management structure.
	The four performance indicators for Service Delivery Improvement could be consolidated into a one or two indicators.
Performance Area: Stakeholder management	More work is required on stakeholder management. There is no information in the indicator library on this.
Performance Areas: Delegations (Public administration and Financial administration)	Delegations should not be a separate performance area and could be accommodated under Management structures as it relates to management decision-making. It would be advisable to check if these indicators are not dealt with under other Key Performance Areas. The two indicators should preferably be consolidated.
Green governance	The commission identified a gap in performance areas, namely, responsible behaviour of government departments in reducing their carbon footprint. This is relevant given South Africa's commitment to climate change and challenges in electricity supply. Examples include energy conservation, reducing unnecessary printing, recycling. It would be useful to include one question, for example, better management of electricity usage.
Policy and legislation	The inputs on policy and legislation were at a high level. The specific policies and legislation should be identified for each performance indicator.
All indicators	Questions should be checked against the Public Service Commission's monitoring and evaluation system to ensure that there is no unnecessary duplication. All definitions should be confirmed.

5. Commission report for Key Performance Area: Strategic Management

5.1   Review of Key Performance Area and Performance Areas

This commission developed comprehensive descriptions for the Key Performance Area of Strategic Management and the related performance areas. These are provided in the table that follows.

Key Performance Area:	Comprehensive statement:
Strategic Management	Strategic management goes beyond the development of a strategic plan, which includes the pre-planning (transformation priorities) and strategic planning processes. Strategic management is the deployment and implementation of the strategic plan and measurement and evaluation of the results. Deployment involves completing the plan and communicating it to all employees. Implementation involves resourcing the plan, putting it into action, and managing those actions. Measurement and evaluation consists not only of tracking implementation actions, but, more importantly, assessing how the organisation is changing as a result of those actions and using that information to update the plan. Strategic management processes should be informed by electoral mandates, environmental scans, government priorities and resource deployment.
Performance Area	**Broad statement or definition**
Strategic Planning	Strategic planning can be defined as the process by which senior management of a department envision its future and develop the necessary procedures and operations to achieve that future. The strategic plan should adequately cover the following: - Translate vision and priorities into objectives - Environmental scan to inform service delivery - Evidence based review to define targets - Relate to programme objectives - Timeframe (electoral cycle) - Resource allocation - Targeted groups - Inclusivity/equality - Stakeholder engagement and participatory approach - Services/transfers to NGO and public entities
Programme Management	Programme Management is the process of managing execution to meet the strategic objectives of a programme. Programme means a series of activities /outputs that have common characteristics, that are implemented to achieve specific desired outcomes or

	benefits.
Monitoring and Evaluation	Monitoring is the continuous and systematic collection, recording and reporting of information in order to track progress towards the achievement of the objectives of an intervention, and identify the need for corrective action. While monitoring asks whether things are being done right, evaluation is saying are we doing the right things, are we effective, efficient and providing value for money**.**

5.2 Policy, legislation and documentary sources of evidence

The table that follows shows the policies and legislation for Strategic Management in the public service. The list also includes guidelines developed by transversal departments.

Table 9: Policy and legislation for Strategic Management

	Strategic Planning	Programme Management	Monitoring & Evaluation
Programme and Budget Structures (Treasury)	✔	✔	✔
Strategic Planning and Annual Performance Plan Framework (Treasury)	✔	✔	
Framework for Managing Programme Performance Information	✔		✔
Medium Term Strategic Framework	✔		
Government-Wide Monitoring & Evaluation Framework			✔
Priority outcomes of Government and relevant Delivery Agreements	✔	✔	✔
Departmental legislation	✔		
Departmental monitoring and evaluation policy			✔
Annual report guideline of the Accountant General		✔	✔
Sector agreed performance measures (Treasury Circular)		✔	✔

Table 10: Documents for evidence of Strategic Management

List of documents for evidence
• Departmental Strategic Plan
• Annual Performance Plan
• Estimates of National and Provincial Expenditure
• Delivery Agreements
• Departmental monitoring and evaluation policy
• Departmental monitoring and evaluation plan
• Annual report
• Auditor-General reports
• Departmental internal and external quarterly reports
• Departmental reports to oversight bodies (legislature, PSC)
• PSC reports (departmental monitoring, State of Public Service, specific evaluations)
• Departmental monitoring and evaluation reports
• Departmental reports for Programme of Action/ Delivery Agreements
• Minutes of EXCO meetings
• Provincial and Local Government Expenditure Reviews

5.3   Self-Assessment questions and statements

The commission developed consolidated questions and statements. These have been disaggregated in this report, for consistency with the other Key Performance Areas.

Box 23: Quality of strategic planning

Performance Area: Strategic Planning		
Indicator name and number: New indicator		
Indicator definition: Strategic plan aligned with MTSF (Provincial Growth & Development Strategies), Delivery Agreements, and informs the Annual Performance Plan. Strategic plan is based on robust situational analysis and has strategies to mitigate risks.		
Question: Which of the following statements best reflects the quality of your department's strategic planning?		
Statement	**Evidence**	**Performance level**
My department's strategic plan does not have a clear link with the MTSF (PGDS for provinces) and/or any of the Delivery Agreements. There is little or no alignment between the strategic plan and annual performance plan.	• Strategic plan cannot demonstrate alignment	Level 1
My department's strategic plan is linked to the MTSF (PGDS for provinces) and the relevant Delivery Agreement(s). The strategic plan informs our Annual Performance Plan.	• Alignment between strategic plan, annual performance plan and MTSF and delivery agreements	Level 2
My department's strategic plan is based on robust situational analysis. My department's strategic plan is linked to the MTSF (PGDS for provinces) and the relevant Delivery Agreement(s). The strategic plan informs our Annual Performance Plan.	• Analytical work done for strategic planning • Alignment between strategic plan, annual performance plan and MTSF and delivery	Level 3

	agreements • Strategic plan -	
My department's strategic plan is based on robust situational analysis. My department's strategic plan has a 'line of sight' externally to government's medium term priorities and delivery agreements, and internally to our Annual Performance Plan. My department actively monitors the risks to achieving strategic outcomes of the Strategic Plan.	• Analytical work done for strategic planning • Alignment between strategic plan, annual performance plan and MTSF and delivery agreements • Implementation of risk mitigation strategies	Level 4

Box 24: Quality of Annual Performance Plan

Performance Area: Strategic Planning		
Indicator name and number: Annual Performance Plan		
Indicator definition: Annual Performance Plan must be guided by the strategic plan. Annual performance targets for programmes are specified. Annual Performance Plan should guide individual performance agreements.		
Question: Which of the following statements best reflects the quality of the contents of your department's Annual Performance Plan?		
Statement	**Evidence**	**Performance level**
My department's Annual Performance Plan is not align with its strategic plan. Strategic objectives and targets are not quantified and not linked to a budget programme. No reference is made of other related plans to the sector such as infrastructure or delivery agreements.	• APP cannot demonstrate alignment and intended performance.	Level 1
My department's Annual Performance Plan is linked to the Strategic Plan, strategic objectives, budget programmes, delivery agreements and other cross cutting programmes where applicable but lack required quarterly targets and data to track implementation progress.	• Alignment between strategic plan, annual performance plan, delivery agreements, budget and all programmes are demonstrated.	Level 2
My department's Annual Performance Plan is linked to the Strategic Plan, strategic objectives, budget programmes and other cross cutting programmes where applicable and have measureable quarterly targets and indicators to track implementation progress.	• 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	Level 3
My department's Annual Performance Plan is linked to the Strategic Plan, strategic objectives, budget programmes and other cross cutting programmes where applicable and have measureable quarterly targets and indicators to track implementation progress, quarterly reports are submitted on time and demonstrate performance. Programmes are costed informed by service delivery targets,	• 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. Mechanisms is in place to report quarterly on progress made.	Level 4

Performance Area: Programme Management		
Indicator name and number:		
Indicator definition: Program Management is the process of providing execution to meet the strategic objectives of a programme. Programme means a series of activities/outputs/outcomes that have common characteristics that are implemented to achieve specific desired outcomes or benefits to a defined target group		
Question: Which of the following statements demonstrates best the logic layout of your programmes in terms of a programme performance and or log frame approach?		
Statement	**Evidence**	**Performance level**
My departmental programmes show no linkages between departmental goals, desired programme outcomes, outputs, inputs and activities	• Programmes cannot demonstrate alignment between goals, objectives, outcomes, outputs, inputs and activities in terms of value for money principles	Level 1
My departmental programmes show linkages between departmental goals, desired programme outcomes, outputs, inputs and activities	• Alignment between goals, objectives, outputs, inputs and activities are clear in terms of efficiency and effectiveness indicators	Level 2
My departmental programmes show 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 is achievable.	• Alignment between goals, objectives, outputs, inputs and activities are clear in terms of efficiency and effectiveness indicators. Programme performances are measureable	Level 3
My departmental programmes show 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 is achievable. Performance information is credible and available to conduct programme evaluations related to value for money principles,	• Alignment between goals, objectives, outputs, inputs and activities are clear in terms of efficiency and effectiveness indicators. Programme performances are measureable and trend evaluations is possible	Level 4

Performance Area: Monitoring and Evaluation		
Indicator name and number: Monitoring & Evaluation capacity		
Indicator definition:		
Question: Which of the following statements best reflects the state of your department's M&E capacity		
Statement	**Evidence**	**Performance level**
My department does not have a M&E function or unit.	• No evidence of M&E unit	Level 1
My department is establishing a M&E Unit.	• Evidence of actions taken thus far	Level 2
My department has a M&E Unit. The M&E Unit has staff who are skilled in M&E. The M&E Unit has an annual M&E Plan that is adequately funded. My department has a M&E policy.	• Unit structure, staffing profile, reporting lines and budget • Copy of M&E policy	Level 3

	• Copy of M&E Plan	
My department has a M&E Unit. The M&E Unit has staff who are skilled in M&E. The M&E Unit has an annual M&E Plan that is adequately funded. The M&E Unit is visible within our department and has authority to obtain information it requires to perform its functions. My department has a M&E policy.	• Unit structure, staffing profile, reporting lines and budget • Copy of M&E policy • Copy of M&E Plan • Sample of M&E products	Level 4

Performance Area: Monitoring and Evaluation		
Indicator name and number: Use of monitoring and evaluation outputs		
Indicator definition:		
Question: Which of the following statements best reflects use of M&E outputs by your department?		
Statement	**Evidence**	**Performance level**
My department does not have a M&E Unit or function.	•	Level 1
Our M&E Unit monitoring reports are used regularly by EXCO and programme managers to track progress and serve as early warning.	• Frequency of monitoring reports • Minutes of EXCO or programme meetings to determine use of reports	Level 2
Our M&E Unit monitoring reports are used regularly by EXCO and programme managers to track progress and serve as early warning. Occasionally evaluation reports are used to inform policy or programme improvements.	• Frequency of monitoring reports • Minutes of EXCO or programme meetings to determine use of reports	Level 3
Our M&E Unit monitoring reports are used regularly by EXCO and programme managers to track progress and serve as early warning. Our M&E Unit's evaluation reports are often used as evidence to inform policy or programme improvements. Our M&E Unit consults internal and external users and potential users for input to its M&E plan and how to improve usefulness of its M&E outputs. My department has a central repository of M&E outputs that is easily accessible via the internet.	• Frequency of monitoring reports • Minutes of EXCO or programme meetings to determine use of reports • Reports on consultation with users/ key players • List of M&E products in repository and data on access/ use if available	Level 4

6. Commission report for Key Performance Area: Financial Management

6.1 Review of Key Performance Area and Performance Areas

This commission focused on Supply Chain Management, using the model developed by the Scottish Government. The Scottish model utilises a four-point scale, namely, Non-conformance (level 0), Conformance (level 1), Improving conformance (level 2) and Best practice (level 3). A copy of the Scottish Procurement Capability questionnaire is shown in Annex D.

Using the Scottish model, the commission identified the following eight indicators within Supply Chain Management:

- Demand
- Acquisition
- Logistics
- Disposal
- Performance
- Risk
- Value for money
- People

6.2 Policy and legislation

Policy and legislation
- Constitution (Section 217)   - Public Finance Management Act (in particular, s38)   - Municipal Finance Management Act   - Treasury Regulations   - Preferential Procurement Policy Framework Act (PPPFA)   - Preferential Procurement Policy Framework Regulations   - Guide to Accounting Officers on Supply Chain Management (National Treasury)   - Broad Based Black Economic Empowerment Act   - Treasury Circulars and Instruction Notes   - New Economic Reporting Format (National Treasury)

6.3   Self-Assessment questions and statement

The commission decided to focus their statements on Level 4 performance as they believed that the three preceding levels were adequately dealt with in the Scottish model. The format of their responses therefore differs from the other commissions. The numbers contained in the questions are reference numbers to the questions used from the Scottish model.

Box 25: Demand

Performance Area: Supply Chain Management		
Indicator name and number: Demand		
Question	**Evidence**	**Performance level**
3.1 Is there sufficient and timely research to ensure necessary goods and services are properly specified?	• Process documentation • Minutes of supplier meetings • Market research documentation • Minutes of meetings with other organisations buying same commodities	Level 4
5.2 Are key suppliers fully integrated into the organisation's business processes?	• Process documentation • Supplier meeting minutes • Supplier conferences • Evidence showing suppliers' awareness of organisation's strategies	

Box 26: Acquisition

Performance Area: Supply Chain Management		
Indicator name and number: Acquisition		
Question	**Evidence**	**Performance level**
4.3 Are sourcing strategies being implemented successfully and in accordance with plans?	• Implementation plans for sourcing strategies • Procurement spend analysis	Level 4

Box 27: Logistics

Performance Area: Supply Chain Management		
Indicator name and number: Logistics		
Question	**Evidence**	**Performance level**
6.1 Are there efficient and effective processes and systems for ordering goods and services?	• Purchase order process from creating purchasing order to invoicing, receiving and paying goods and services	Level 4
6.3 Are stock holdings minimised consistent with efficient supply of goods?	• Reports on how long stock is held before being used (stock reports)	

Box 28: Disposal

Performance Area: Supply Chain Management		
Indicator name and number: Disposal		
Question	**Evidence**	**Performance level**
Does the disposal strategy lead to optimal use, minimised losses and increased savings? (Note: Level 3 will include: if the Disposal Strategy is aligned to the procurement plan/strategy that leads to ….Level 4)	• Process documentation • Minutes of meetings • Market where disposal is debated and considered • Documentation evidence showing that disposal is part of procurement and sourcing strategies	Level 4

Box 29: Performance

Performance Area: Supply Chain Management		
Indicator name and number: Performance		
Question	**Evidence**	**Performance level**
8.2 Do the available performance measures and reports suggest the organisation is achieving the best value and continuous improvement in procurement?	• Increase in results from Business Performance Indicators • Procurement spend against planned objectives (in Annual Performance Plan and PP targets • Satisfaction survey from beneficiary • Review/approved processes in procurement • Evidence that contract management is handled properly	Level 4

Box 30: Risk

Performance Area: Supply Chain Management		
Indicator name and number: Risk		
Question	**Evidence**	**Performance level**
Refer to Governance (internal control and risk management to deal with comprehensive/holistic risk management and internal control)	• Process must be geared to identify the risk areas in a department specifically also from a fraud and corruption angle in SCM	Level 4

Box 31: Value for money

Performance Area: Supply Chain Management		
Indicator name and number: Value for money		
Question	**Evidence**	**Performance level**
5.3 Does the organisation manage relationships with suppliers well, to support best value?	• Refer to "Performance" • Evidence that the dependency on external service provider is monitored and reduced	Level 4

Box 32: People

Performance Area: Supply Chain Management		
Indicator name and number: People (people and system link?)		
Question	**Evidence**	**Performance level**
5.3 Are there effective people management and development processes in place for the procurement function?	• Statistics on performance reviews being up to date • Training /development plan • Talent development strategy • Staff retention strategy • Decrease in number of audit findings	Level 4

6.4 Areas requiring further attention

The following issues require further attention and action:

Table 11: Financial Management: Issues for further action

Issue	Action required
Finalising the Supply Chain Management	This performance area needs to be revised to make it consistent with the Key Performance Areas. Levels 1-3 should be confirmed. Indicator names and definitions should be completed. Although risk management is dealt with under Governance & Accountability, there should be special measures in place to prevent and detect fraud and corruption in supply chain management.
Remaining performance areas	The Financial Capability Maturity Model measures compliance (Level 3). It is still necessary to identify selected indicators for performance areas in Financial Management for qualitative self-assessment.
Involvement of National Treasury	The relevant officials from National Treasury should be involved in addressing all outstanding issues.

7. Feedback from workshop participants

This section discusses the feedback from workshop participants gathered during the plenary sessions and the workshop evaluation questionnaire, a copy of which is shown in Annex C. The feedback should be taken into consideration by DPME as it proceeds with the MPAT.

7.1 Comments from plenary sessions

7.1.1 Need for consistency across the Key Performance Areas

- There should be consistency around the quality expected for a Level 4 rating. Ideally, Level 4 should be achievable by a small number of departments currently.

- All the rubrics (boxes) in the tool should be consistent in structure across the four Key Performance Areas to avoid confusion, so that anyone completing the self-assessment is not distracted.

7.1.2 Need for further refinement

- There were still gaps that the commissions could not address, either due to time constraints, or because of the absence of subject matter expertise. These gaps must be addressed and the instrument refined further.

- Further thought is needed on Strategic Management. This is a critical area for organisations and should be given a weighting commensurate with its importance.

- The final set of indicators should be confirmed and communicated to those involved in refinement of the self-assessment tool.

- MPAT will have to be modified for use in municipalities. The experience of KZN Department of COGTA could inform the modification and roll-out process for municipalities.

7.1.3 Simplicity, sustainability and timely feedback

- Timely feedback is considered critical and the credibility and usefulness of the tool will be undermined if feedback is not timely. There should be criteria or clarity on when departments can expect the results from the assessment. The timeframe should be agreed before the tool is launched.

- The tool should be kept as simple as possible, for ease of use as well as for ease of analysis. The system put in place to manage the data and provide feedback must be simple, effective and preferably electronic.

- There needs to be sufficient capacity to do the analysis, especially as the number of departments participating increases.

7.1.4 Need for pre-testing the tool

- Delegates emphasised the importance of pre-testing the tool before any significant roll-out takes place. It was suggested that pre-testing should include a department that is decentralised with operations in rural areas.

7.1.5 Risks

- MPAT can make or break a department and so people may be afraid or unwilling to participate or will try to manipulate the system.

7.2 High level feedback from evaluation

7.2.1 Experience of the workshop

Overall, comments were positive, with the following themes:

- *Engaging and interesting:* Some delegates experienced the workshop as lively and constructive.

- *Organisation and facilitation was good*: Some delegates indicated that the workshop was well managed.

- *Informative:* In general, delegates found the workshop to be worthwhile. Some delegates found it useful to understand the MPAT process going forward. Others indicated that the workshop managed to convey good information on the intended objectives, processes and content of MPAT. Delegates found the process to be fruitful – gaining valuable information. Some indicated the process to be developmental and felt that they learnt from the process.

- *Thought provoking*: Some found that the workshop made them think at a deeper level in terms of the intended stakeholders who will be completing MPAT.

7.2.2 Aspects of the workshop that were most useful

The following themes were identified through feedback received:

- *The process followed through break-away sessions*: Some delegates indicated the practical application process as being useful, as well as topics or questions to guide sessions being relevant for commissions to provide feedback. One useful outcome cited was common agreement by their commission on indicators.

- *Breaking down specific areas under each Performance Area*: Some delegates emphasised the value of defining performance areas, their relevancy and related policy and legal frameworks, as well as developing criteria for each level (rubrics) and providing evidence.

- *Interaction amongst delegates*: Some delegates indicated that the information obtained from other stakeholders was useful through open discussions that were facilitated. Delegates highlighted the openness of discussions and the participatory nature of the workshop, allowing for good debates. One useful outcome cited was receiving perspectives on provincial input.

- *Presentation of information*: One delegate indicated that the manner in which the integration of information was presented, was useful.

7.2.3 Aspects that delegates found least useful

Many delegates indicated that 'nothing' was least useful or left their answer blank. Of the delegates who shared their experiences, the following was cited by delegates:

- Anxiety that the assessment tool may be cumbersome for end users
- No information was provided on the future management of toolsets that may duplicate/overlap with MPAT
- Some delegates indicated that the time was too short to cover all aspects extensively
- Not having keen opinion leaders (provincial and national treasury) and colleagues who will be **directly** involved with implementation of MPAT, for example, SCM, Strategic Planning, Financial Management, Governance and Accountability specialists.

7.2.4   Is the MPAT ready to be used in the first pilot?

When asked this question, delegates responded as follows:

- *Further refinement and testing of questions*: Delegates indicated that questions still need more refining; they need to be tested practically and the response to this practical application should be analysed. A delegate further emphasized the importance of a common understanding for each rubric. One delegate specified that the SCM questions need some refining and contextualization to suit the public sector environment. Another raised the concern that there is too much variation and differing standards in terms of levels across all Management KPAs. Another emphasized the need for more workshops for clear understanding and effective implementation.

- *Readiness of Government for receiving the MPAT*: Some delegates cited the buy-in of Government that is required as well as the buy-in of those engaged with refining and implementing MPAT. One delegate emphasised that coordinators or officials involved should first internalise the tool before it can be sold to clients/customers.

- *Caution to start small*: One delegate suggested starting small and then adding and expanding the tool to others as the process unfolds.

- *Changes should be cleared with policy owners.*

- *Verification*: Although not a theme, it is relevant to note that one delegate stressed that caution should be taken with the 'verification' step as all departments have been audited externally (AG). Using existing tools before going to departments for verification is critical.

7.2.5   What must still be done to prepare for piloting MPAT?

When asked this question, delegates responded as follows:

- *Proper understanding of what implementation will entail*: Some indicated the importance of clarifying resource requirements and availability.

- *Further consultation*: Delegates emphasised the importance of further consultation and inputs into the final draft MPAT. A Finance Management delegate emphasised the importance of reviewing policies and evidence for levels defined.

- *Aligning questions across the tool and weighting indicators*: Three delegates cited this theme. One indicated that MPAT must take certain elements more seriously such as elevating strategic management above other Management KPAs. Two

delegates stated that synthesis across all commissions is important for consistency and alignment.

- *Informing and educating on basic concepts*: Stakeholders will need to be educated on basic concepts such as Management KPA, Performance Areas, Indicators, Key policy prescripts, etc.

- *Get buy-in from Departments.*

- *Sufficient capacity:* Some delegates emphasised the importance of ensuring that there is sufficient capacity to undertake the assessment and to process the information.

8. Conclusion and the way forward

The workshop made good progress on the refinement of the Self-Assessment Tool. Participants engaged very actively in the process and are keen for the MPAT to succeed. There are however a number of issues that require attention before the MPAT is rolled out.

Our proposals for the way forward are as follows:

1. The DPME project team should refine the Self-Assessment Tool. The issues and actions identified at the end of each commission report should serve as the basis for refinement. In the process they should engage their counterparts in the National Treasury and DPSA to assist with gaps and the overall refinement.

2. Further inputs should also be solicited from workshop delegates and the issues they raised in the workshop should be taken into consideration when refining the tool.

3. DPME should secure sign-off from the respective policy owners.

4. The relative weighting of each performance area should be developed. This however should be left for the second round of the tool. Starting all performance areas with equal weighting will establish a baseline against which the weightings can be adjusted in the future.

5. Although DPME is working under serious time constraints, it should try to do a pre-test of the Self-Assessment Tool on at least one national and one provincial department.

Annex A: List of workshop participants

(To be completed by DPME

Name	Department
Henk Serfontein	DPSA
Nalini Naicker	Gauteng Office of the Premier
Priscilla Shanmugon	COGTA, KZN
Rhulani Makhubela	DPSA
Leon Pretorius	DPSA
Johan Nel	DPSA
Etienne Gelderbloem	DPSA
Phulane	Office of the Premier, Mpumalanga
Mbuyi	Office of the Accountant General

Annex B: Workshop programme

(To be inserted)

Annex C: Workshop methodology

The overall methodology for the workshop is captured in the diagrams below.