

BUDGETARY REVIEW AND | PFMA RECOMMENDATIONS REPORT | 2018-19

Briefing to portfolio committee on justice and correctional services on the Department of Correctional Services



AUDITOR-GENERAL SOUTH AFRICA

Reputation promise

The Auditor-General of South Africa (AGSA) has a constitutional mandate and, as the supreme audit institution (SAI) of South Africa, exists to strengthen our country's democracy by enabling oversight, accountability and governance in the public sector through auditing, thereby building public confidence.







Role of the AGSA in the reporting process

Our role as the AGSA is to reflect on the audit work performed to assist the portfolio committee in its oversight role of assessing the performance of the entities taking into consideration the objective of the committee to produce a budgetary review and recommendations report (BRRR).





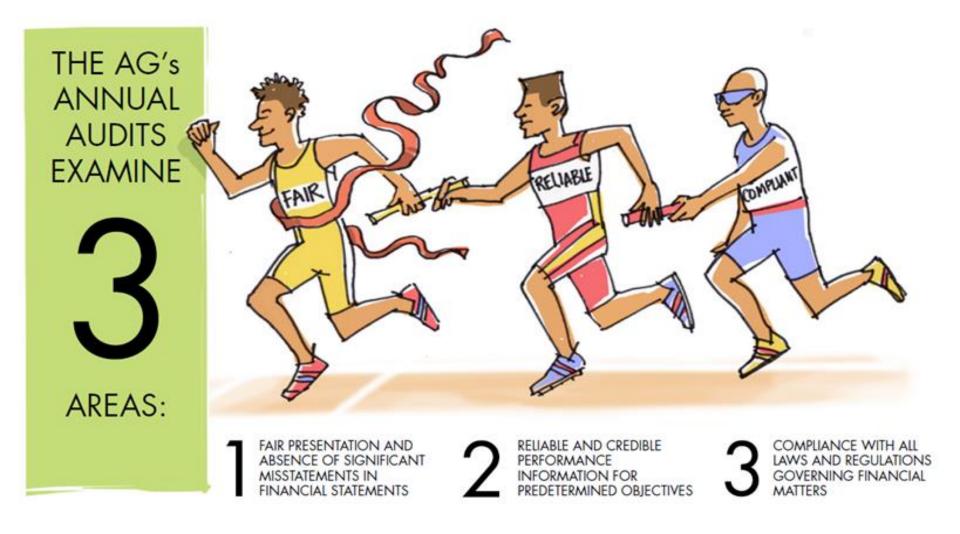


The 2018-19 audit outcomes





Our annual audit examines three areas







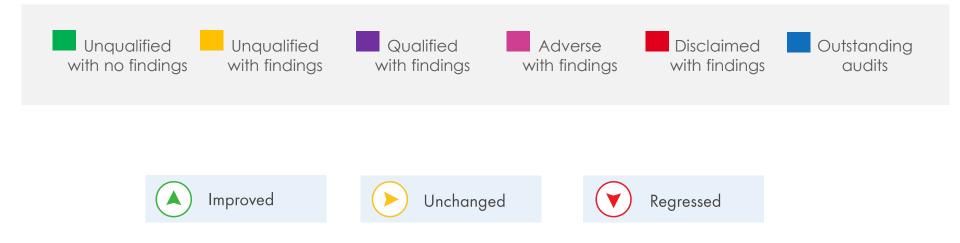
The AGSA expresses the following different audit opinions

Unqualified opinion **Financially unqualified** with no findings **Qualified** opinion Adverse opinion **Disclaimed opinion** opinion with findings (clean audit) Auditee: Auditee: Auditee: Auditee: Auditee produced financial statements had the same had the same had the same produced credible and without material challenges as those with challenges as those with challenges as those reliable financial misstatements or could unqualified opinions qualified opinions but, in with qualified opinions statements that are free correct the material with findings but, in addition, they had so but, in addition, they of material misstatements, but could not provide us addition, they could not many material misstatements struggled in one or more produce credible and misstatements in their with evidence for most reported in a useful and area to: reliable financial financial statements that of the amounts and reliable manner on statements we disagreed with disclosures reported in align performance reports performance as almost all the amounts the financial had material to the predetermined measured against and disclosures in the statements, and we objectives they committed misstatements on predetermined financial statements were unable to to in APPs specific areas in their objectives in the annual conclude or express an financial statements, set clear performance . performance plan (APP) opinion on the which could not be indicators and taraets to credibility of their measure their corrected before the complied with key financial statements performance against their financial statements legislation in conducting predetermined objectives were published. their day-to-day operations to achieve . report reliably on whether their mandate they achieved their performance targets determine the legislation that they should comply with and implement the required policies, procedures and controls to ensure compliance **PFMA**

2018-19

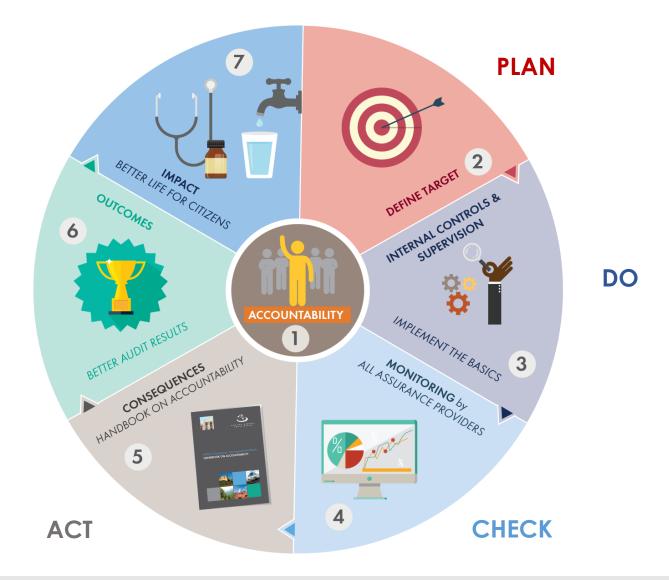
Important to note

Audit outcomes are indicated as follows:





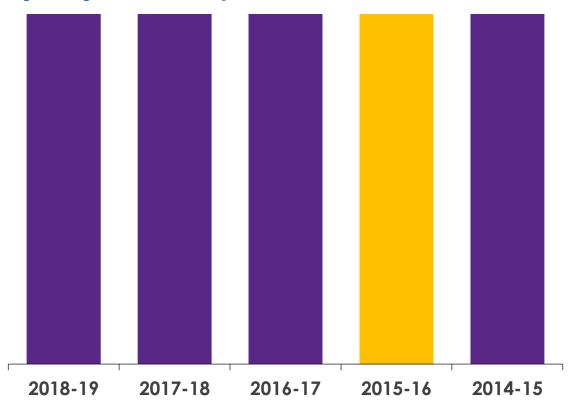
ACCOUNTABILITY = PLAN + DO + CHECK + ACT







Audit outcomes of the Department of Correctional Services (DCS) over five years



- The audit opinion for 2018-19 was qualified on commitments and irregular expenditure. Commitments were also a qualification area in 2017-18.
- Annual financial statements preparation remains a concerns as <u>material adjustments</u> had to be effected to the annual financial statements submitted for audit purposes.



Credible financial reporting

Financial statements	Movement	2018-19	2017-18
Submission of financial statements by legislated date (all auditees)	\triangleright	Yes	Yes
Financial statements submitted without errors	\triangleright	No	No
Quality of final submission after audit	\bigcirc	No	No

Qualification areas

DO

• Commitments:

The department did not maintain accurate and complete records of the contractual information used to determine commitments.

• Irregular expenditure:

Completeness of irregular expenditure. The department did not have an adequate system for identifying all irregular expenditure.





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Credible performance reporting

Performance report

PLAN

CHEC

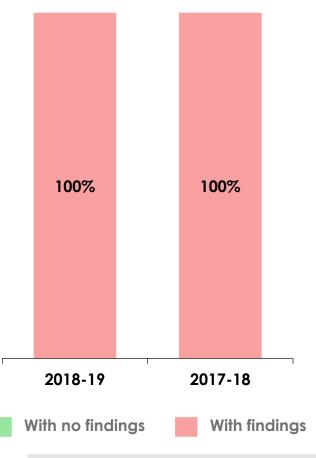
DO

	Movement	2018-19	2017-18
Performance report submitted without errors		No	No
Quality of final submission after audit		No	No
Reliable reporting of achievements		No	No
Usefulness of performance indicators and targets	\bigcirc	No	No

Disregard for compliance with legislation

Findings on compliance with key legislation

DO



Top five non-compliance areas

- Management of procurement and contracts
- Quality of financial statements
- Prevention of unauthorised, irregular and fruitless and wasteful expenditure
- Implementation of a system to monitor progress with the annual performance plan and performance management
- Consequence management Against officials who had incurred irregular or fruitless and wasteful expenditure



Status of internal control

DO





Assurance provided

Assurance



Financial health and financial management



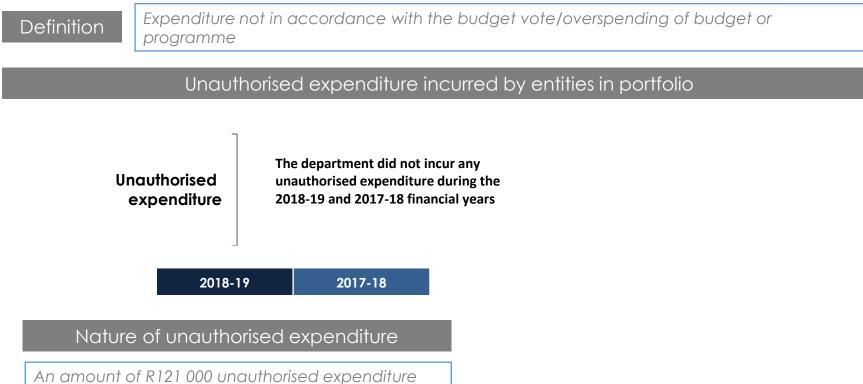


Financial health





Unauthorised expenditure



originating in 2015-16 is awaiting approval by Parliament.

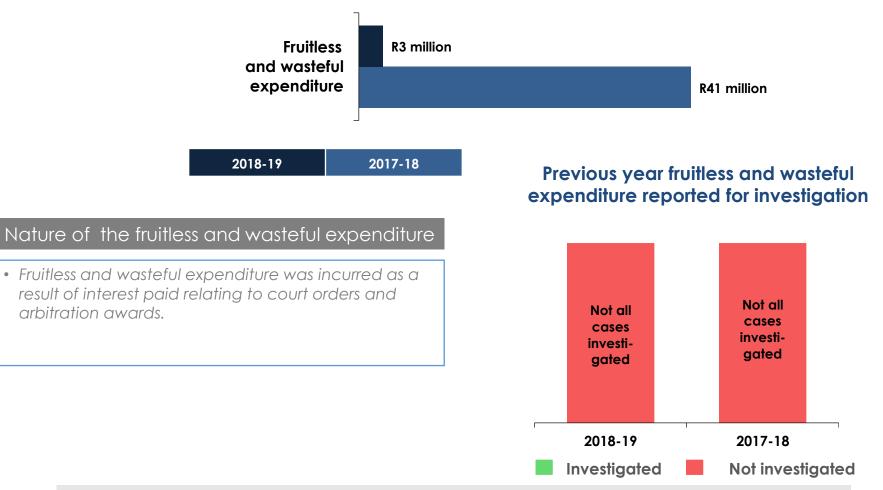


Fruitless and wasteful expenditure decrease over two years

Definition

Expenditure incurred in vain that could have been avoided had reasonable steps been taken. No value for money!

Fruitless and wasteful expenditure incurred by the Department of Correctional Services





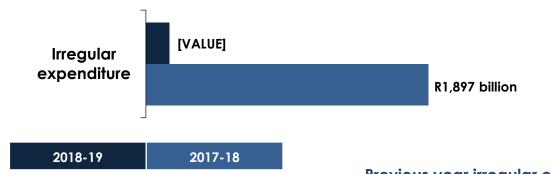
PFMA 2018-19

Irregular expenditure expenditure decrease over two years

Definition

Expenditure incurred in contravention of key legislation; goods delivered but prescribed processes not followed

Irregular expenditure incurred by the DCS



The current year amount is not complete due to the qualification on completeness of irregular expenditure.

Nature of irregular expenditure Competitive bidding process not followed Non-compliance with SITA Act Three price quotations not obtained Contract variation in excess of 20%

• Splitting of orders

Previous year irregular expenditure reported for investigation



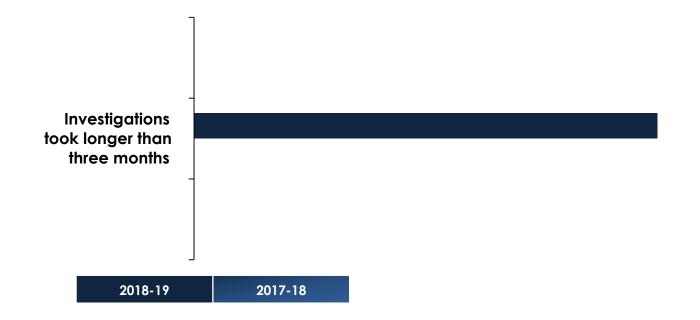


PFMA 2018-19



Fraud and lack of consequences

Allegations of financial and/or fraud and SCM misconduct



- 2017-18 no fraud-related cases were identified in the department.
- 2018-19 36 possible fraudulent cases were identified by the department, these cases are in the process of being investigated.



Portfolio snapshot (2018-19)







Financially unqualified financial statements: 0% (2017-18: 0%)



No findings on performance reports: 0% (2017-18: 0%)



No findings on compliance with legislation: 0% (2017-18: 0%)

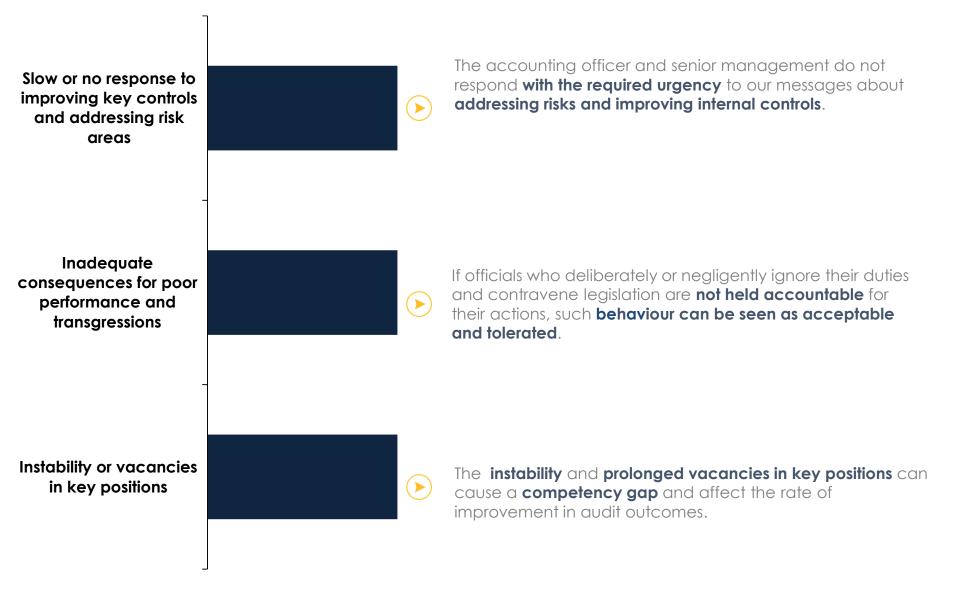




Irregular expenditure: R159 million (2017-18: R1,879 billion)



Root causes





Recommendations

To department

- Design and implement an action plan to resolve audit findings.
- Management should follow up on progress with implementation of the action plan.
- Fill key vacant positions.
- Implement consequence management for incurring fruitless and wasteful expenditure and irregular expenditure and other cases of financial misconduct.

To the portfolio committee

- Provide oversight into the implementation of action plans to address audit matters.
- Monitor implementation of consequence management.

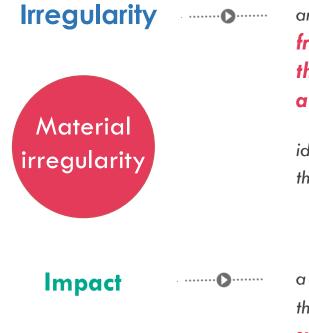


Key expansion of our mandate





What is a material irregularity?



any non-compliance with, or contravention of, legislation, fraud, theft or a breach of a fiduciary duty

identified during an audit performed under this Act that **resulted in or is likely** to result in ...

a material financial loss, the misuse or loss of a material public resource or substantial harm to a public sector institution or the general public.



Key expansion of our mandate



Refer material irregularities to relevant public bodies for further investigations



Take binding remedial action for failure to implement the AG's recommendations

for material irregularities



Issue a certificate of debt for failure to implement the remedial action if financial loss was involved





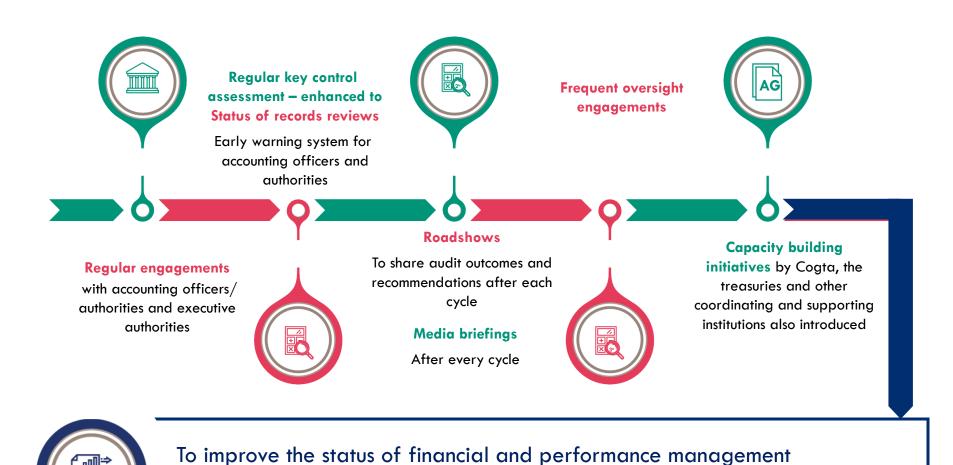
Material irregularity identified

Material irregularity identified at department in the portfolio

• No material irregularities were identified at the department



Additional efforts were introduced





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