

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

**PFMA** 2019-20

Nov 2020



# 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 department.

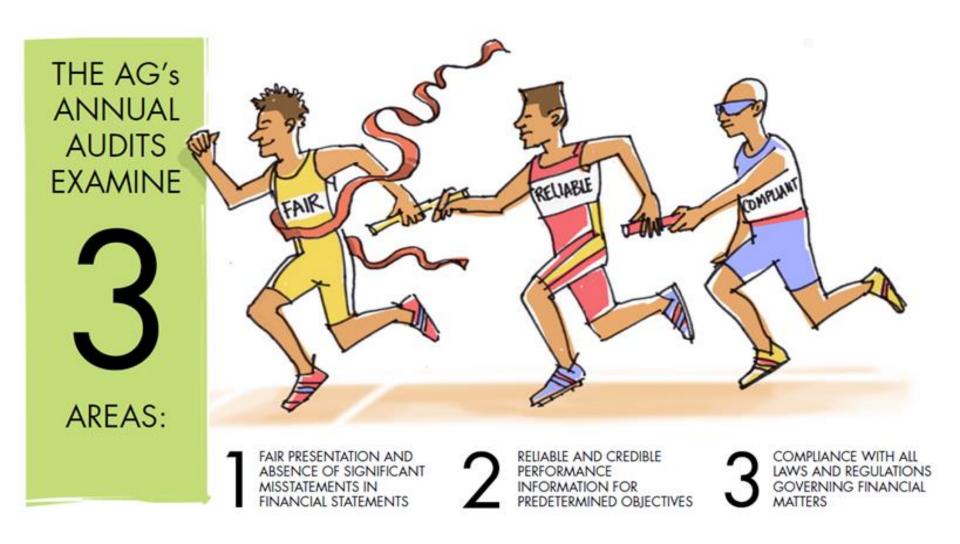




The 2019-20 audit outcomes



#### Our annual audit examines three areas





# The AGSA expresses the following different audit opinions

# Unqualified opinion with no findings (clean audit)



#### Auditee:

- produced credible and reliable financial statements that are free of material misstatements
- reported in a useful and reliable manner on performance as measured against predetermined objectives in the annual performance plan
- complied with key legislation in conducting their day-to-day operations to achieve their mandate

# Financially unqualified opinion with findings



Auditee produced financial statements without material misstatements or could correct the material misstatements, but struggled in one or more area to:

- align performance reports to the predetermined objectives they committed to in annual performance plans
- set clear performance indicators and targets to measure their performance against their predetermined objectives
- report reliably on whether they achieved their performance targets
- determine the legislation that they should comply with and implement the required policies, procedures and controls to ensure compliance

#### **Qualified** opinion



#### Auditee:

- had the same challenges as those with unqualified opinions with findings but, in addition, they could not produce credible and reliable financial statements
- had material misstatements on specific areas in their financial statements, which could not be corrected before the financial statements were published

#### Adverse opinion



#### Auditee:

 had the same challenges as those with qualified opinions but, in addition, they had so many material misstatements in their financial statements that we disagreed with almost all the amounts and disclosures in the financial statements

#### Disclaimed opinion



#### Auditee:

had the same challenges as those with qualified opinions but, in addition, they could not provide us with evidence for most of the amounts and disclosures reported in the financial statements, and we were unable to conclude or express an opinion on the credibility of their financial statements



### Important to note

The percentages in this presentation are calculated based on the **completed audit of**1 auditee, unless indicated otherwise.

Audit outcomes are indicated as follows:



Movement from the previous year is depicted as follows:



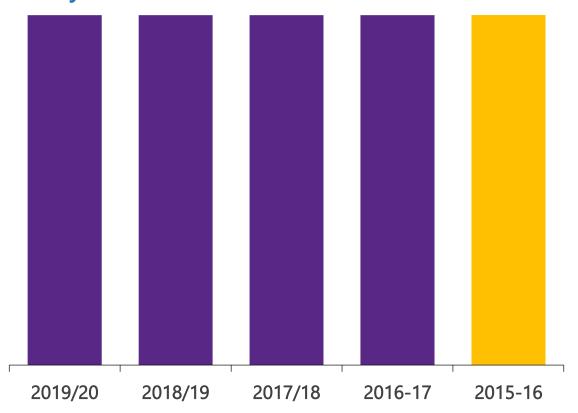


#### ACCOUNTABILITY = PLAN + DO + CHECK + ACT





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



- The audit opinion for remains qualified and the basis for the audit opinion is the completeness of irregular expenditure, the department was qualified on a similar issue in the prior year.
- The department also has findings reported on reliability and usefulness of performance information and compliance with key legislation.





# Credible financial reporting

Movement	2019-20	2018-19
<b>(</b>	Yes	Yes
	No	No
	No	No
		Yes No

#### The department was qualified on the following:

• Irregular expenditure:

The department did not have an adequate system for identifying and disclosing all irregular expenditure incurred, as a result we could not confirm completeness of irregular expenditure disclosed in the financial statements.





# Credible performance reporting



# Performance report

	Movement	2019-20	2018-19
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	<b>&gt;</b>	No	No

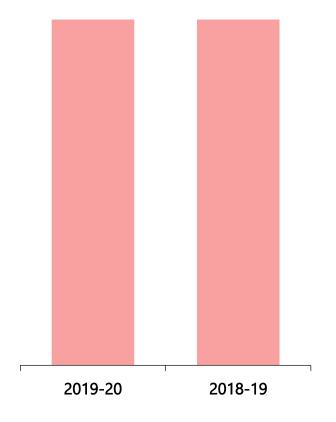
The submitted annual performance report had errors. Material findings were identified during the audit that were not corrected and these were reported in the audit report.





## Performance report findings

# Findings on programme 2: Incarceration



With no findings



#### Material audit findings

Material findings in respect of two indicators and targets were noted:

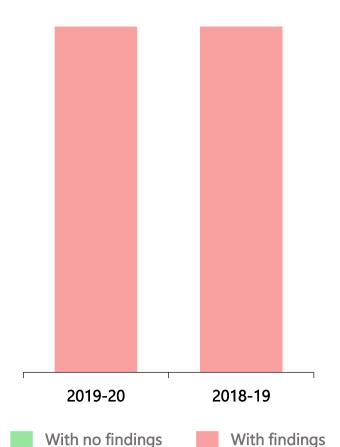
- Percentage of overcrowding in correctional centres and remand detention facilities in excess of approved capacity-Lack of accurate and complete records to support the reported achievement (approved bed spaces capacity).
- Number of new bed spaces created by upgrading of facilities annually -The reported achievement was not consistent with the planned target.
- Planned to create 183 additional bed space on phase III of Standerton project, but reported an achievement of 779 additional bed space on phase I to phase III created over several years and not just the current year.





## Disregard for compliance with legislation

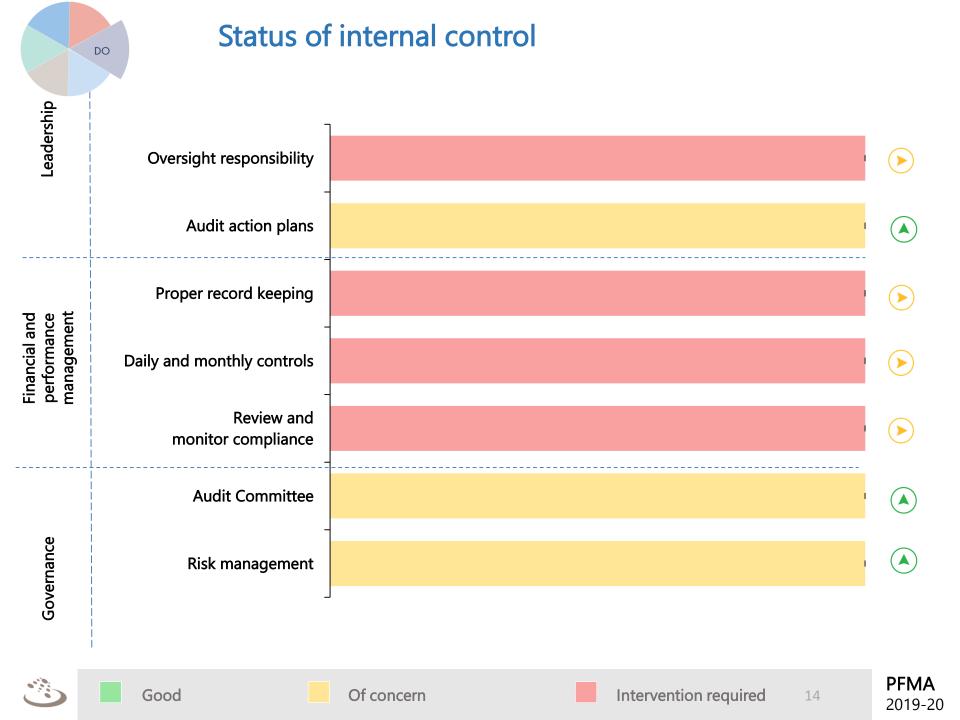
# Findings on compliance with key legislation



#### Top five non-compliance areas

- Management of procurement and contracts
- Prevention of irregular expenditure
- Non Implementation of a system to monitor progress with the annual performance plan and performance management
- Consequence management We were unable to obtain sufficient appropriate audit evidence that disciplinary steps were taken against officials who had incurred irregular expenditure as required by the PFMA. This was due to proper and complete records that were not maintained as evidence to support the investigations into irregular expenditure







# Assurance provided

#### **Assurance**



Financial health and financial management



#### Financial health

Revenue management • Collection of debt – inability to collect monies owed and the resultant impairment of receivables due to the amount owed being irrecoverable.

Asset and liability management

- •Accrual adjusted deficit for the year this may also correlate to an overspending of the auditee's operating expenditure budget. Measures must be implemented to address this situation to ensure sustainable service delivery and financial viability.
- •Current liabilities exceeding current assets indicating liquidity issues, which means that DCS may not be able to pay its creditors as payments become due.

•Negative cash balance.

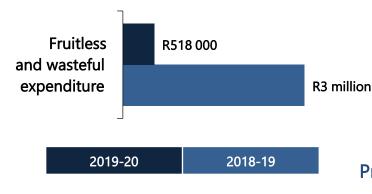
Cash management

### Fruitless and wasteful expenditure decreased over two years

Definition

Expenditure incurred in vain and could have been avoided if reasonable steps had been taken – no value for money!

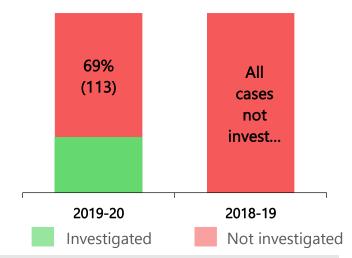
#### Fruitless and wasteful expenditure incurred by the department



#### Nature of fruitless and wasteful expenditure

• Fruitless and wasteful expenditure was incurred as a result of interest paid relating to late payments and travel cancellations.

# Previous year fruitless and wasteful expenditure reported for investigation



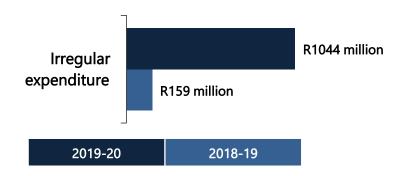


## Irregular expenditure increase over two years

Definition

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

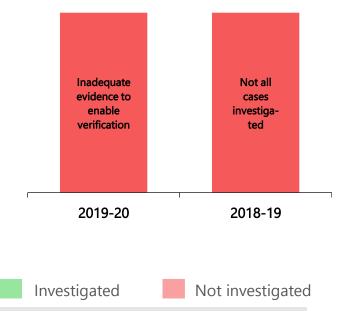
#### Irregular expenditure incurred by the department



#### Nature of irregular expenditure

- Splitting of orders the amount of R1 billion disclosed relates to this category, 50% of this amount relates to cases identified in the current year relating to prior year (2018/19)
- Competitive bidding process not followed\*
- Non-compliance with SITA Act\*
- Three price quotations not obtained\*
- Contract variation in excess of 20%\*

# Previous year irregular expenditure reported for investigation



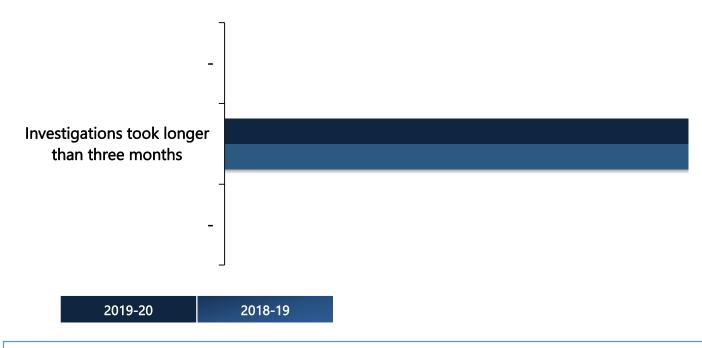


<sup>\*</sup> These categories of irregular expenditure were not disclosed as irregular expenditure in the financial statements



# Fraud and lack of consequences

Allegations of financial and/or fraud and SCM misconduct



- 2018-19 36 possible fraudulent cases were identified by the department and are being investigated
- 2019-20 10 possible fraudulent cases were identified by the department, these cases are in the process of being investigated.



# 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



# What is a material irregularity?

#### Irregularity



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



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

## **Impact**



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



#### **Root causes**





## Recommendations to the Accounting Officer

#### To Accounting Officer

- 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 irregular expenditure and other cases of financial misconduct.



#### Recommendations to the Portfolio Committee

#### To the portfolio committee

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



#### Additional efforts were introduced



Regular key control assessment - enhanced to Status of records reviews



Frequent oversight engagements



Early warning system for accounting officers and authorities



with accounting officers/ authorities and executive authorities



#### **Roadshows**

To share audit outcomes and recommendations after each cycle Media briefings

After every cycle



Capacity building initiatives by Cogta, treasuries and other coordinating and supporting institutions also introduced



To improve the status of financial and performance management

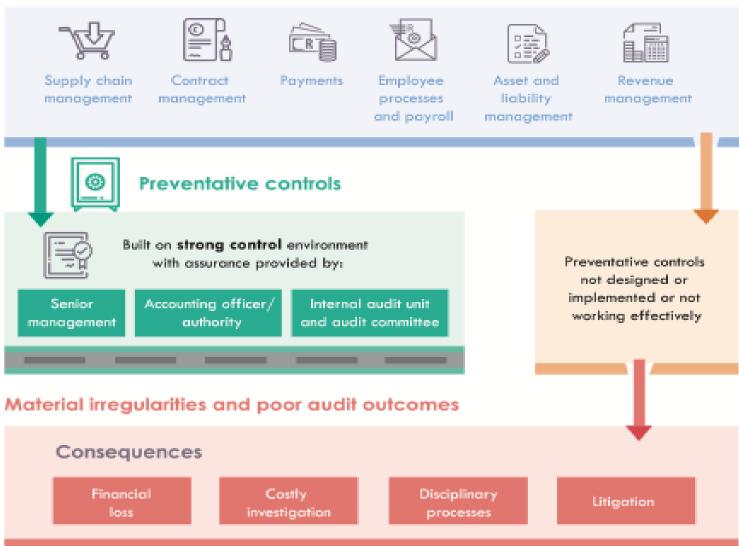


**Preventative controls** 





#### Typical business processes of the institution





# Why these guides

- Enable oversight structures to assess whether the most important preventive controls are implemented by institutions to address their main areas of risks. This will assist oversight structures to diagnose weaknesses in preventative mechanisms and focus their oversight efforts on obtaining assurance from the executive authority and the accounting officer or authority that those weaknesses are being effectively addressed in accordance with their legislated obligations.
- Enable the accounting officer or authority and the executive authority to effectively address the assurance needs of oversight structures pertaining to preventative controls.
- Create **general awareness of the role of the accounting officer or authority** and their legislated obligations towards good financial and performance management in their institutions.



# Importance of preventative controls GUIDE Tone and control culture GUIDE 2 Institutionalised internal controls GUIDE (3) Procurement of goods and services GUIDE 4

Preparation of financial statements GUIDE 5

Asset management GUIDE (



# What is included in the guides for each control



Controls accounting officers and authorities should implement



Questions oversight structures and executive authorities could ask to obtain assurance



Why it is important



Applicable legislation



Learn more about this control here



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