




# **SOUTH AFRICAN POLICE SERVICE PRESENTATION TO THE PCOP AGSA AUDIT OUTCOME**

Status of implementation of  
PAAP

9 March 2022

# TABLE OF CONTENTS

- SECTION 1: POST AUDIT ACTION PLAN: 2020/21: PERFORMANCE INFORMATION
  - Background
  - Generic response on performance information
  - Key steps to address root causes to audit findings
  - Challenges on the implementation of PAAP
  - Status/progress of the current interim audit 2021/2022
  - Conclusion
- SECTION 2: POST AUDIT ACTION PLAN: 2020/21 : FINANCIAL AUDIT
  - Executive summary
  - Findings and Status
  - Conclusion



# SECTION 1:

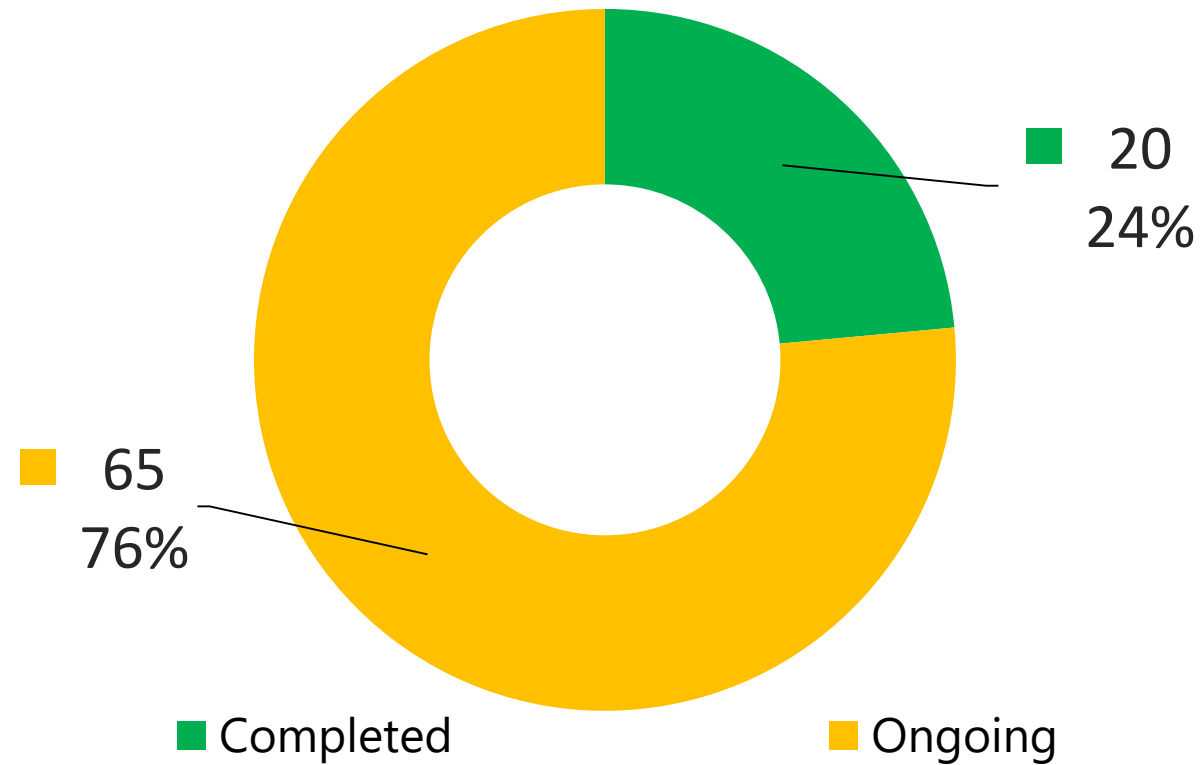
POST AUDIT ACTION PLAN: 2020/21: PERFORMANCE INFORMATION

# BACKGROUND

- A total number of 61 findings were raised for the 2019/2020 audit cycle and 10 were material findings
- During the 2020/2021 audit cycle a total of 35 findings were reported and 15 were material findings
- The Department received unqualified audit opinion with material findings in the 2020/2021 cycle.
- The 2020/2021 audit focused on Programme 2 (Visible Policing and ORS) reported performance information.
- The current 2021/2022 audit is inclusive of Programme 2 (Visible Policing and ORS) and Programme 3 (Criminal Record Centre, Forensic Science Laboratories and DPCI).
- The PAAP was developed to address the 2020/2021 audit outcome.
- The actions on the PAAP are generic by nature to be addressed by all financial programmes.

# GENERIC RESPONSE ON PERFORMANCE INFORMATION

## OVERALL KEYS ACTION STEPS



# GENERIC RESPONSE ON PERFORMANCE INFORMATION

FOCUS AREAS	NUMBER OF ACTIONS	STATUS (Progress)
Reconfirm relevance & viability of internal controls	16	<p>11 actions completed, 5 ongoing</p> <p>Implementation of directive/s and practical guideline/s to facilitate and enhance the flow and quality of performance information, in line with reporting requirements.</p> <p>Conduct periodic sample assessments/inspections at identified districts/stations to determine levels of compliance and implementation of internal controls.</p> <p>Circular on clean Audit was issued by Strategic Management to address the gapes identified on Post Audit Action Plan.</p>

# GENERIC RESPONSE ON PERFORMANCE INFORMATION

FOCUS AREAS	NUMBER OF ACTIONS	STATUS (Progress)
Ensure the Reliability, Accuracy and Completeness of Performance Information	26	<p>8 actions completed, 18 ongoing</p> <p><b>Internal Audit</b>            Consider to review and adjust Internal Audit Plan for audits in regards to performance information.            Conduct focussed audit in regards to performance information.            Conduct an analysis of extent of implementation of the post audit action plan.            Consider to review and adjust Inspectorate Plan(2022/2023) for inspections/interventions in regards to performance information (Focussed Interventions).            Conduct focussed inspections/interventions in regards to performance information at identified Districts/Stations.            Conduct an extent of analysis of implementation of the post audit action plan.</p> <p><b>Crime Register</b>            Consider to review and adjust Crime Registrar Plan for inspections/interventions in regards to crime data that impacts on performance information.            Conduct focussed inspections/interventions in regards to crime data that impacts on performance information.            Communication of quality assurance report to applicable provinces/divisions on the reporting/capturing of crime.</p>

# GENERIC RESPONSE ON PERFORMANCE INFORMATION

FOCUS AREAS	NUMBER OF ACTIONS	STATUS (Progress)
Preparing for Audit	15	<p>Confirmation of audit strategy conducted by Audit Steering subcommittee for performance information. Nodal Points have been established at Divisional and Provincial offices</p> <p>Divisional and Provincial Audit Steering Committees have been established</p> <p>Deputy National Commissioner, Lieut Gen Ntshinga, was appointed to chair the National Audit Steering Committee for Performance Information</p> <p>Communication of audit locations to stakeholders</p> <p>Deployment of task teams to audit locations</p>

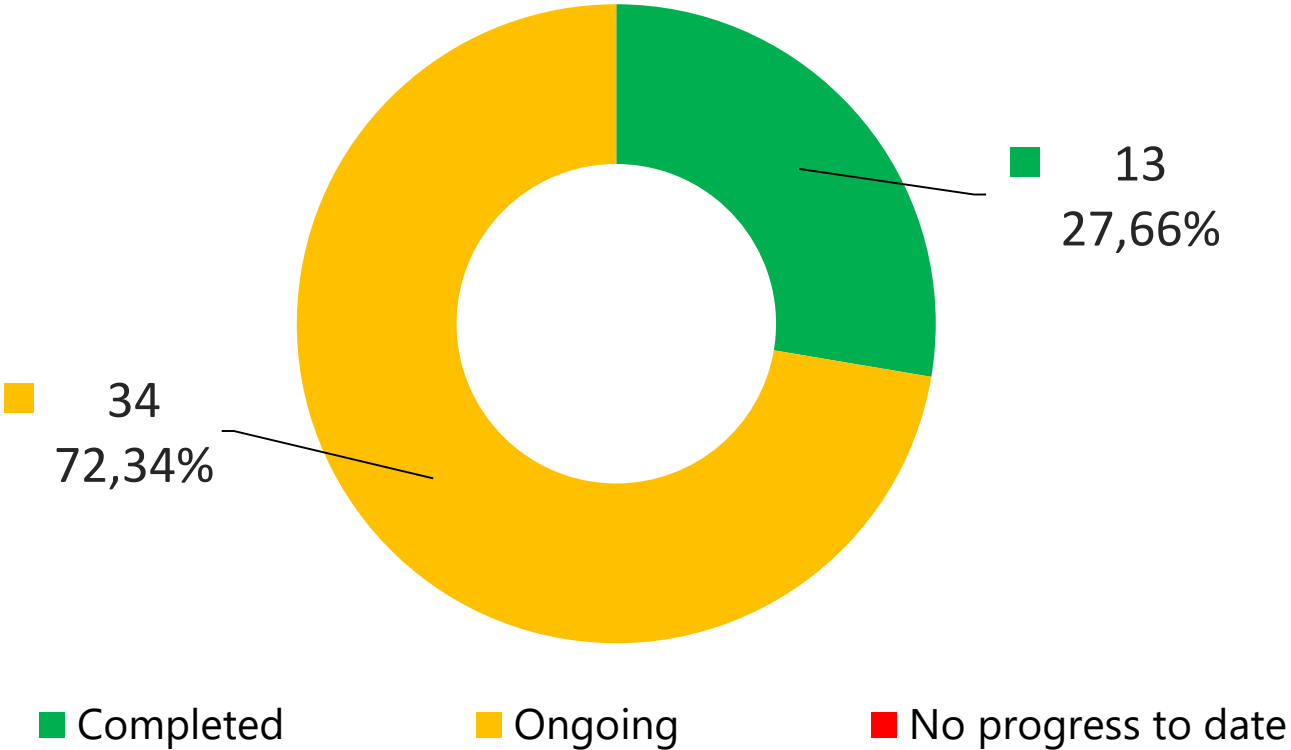


# GENERIC RESPONSE ON PERFORMANCE INFORMATION

FOCUS AREAS	NUMBER OF ACTIONS	STATUS (Progress)
Audit of Identified Audit Locations	25	Opening and closing meetings were conducted in consultation with the audit teams Preparatory sessions were conducted by all auditees Readiness certificates were provided by all auditees Information has been made available at all audit locations Commanders present at audit locations Management responses on COMAFs has been addressed.
Correcting Audit Findings and Restatement of Performance Information	3	Not measured, pending finalisation of the audit

# KEY STEPS TO ADDRESS ROOT CAUSES TO AUDIT FINDINGS

## OVERALL KEYS ACTION STEPS



## A. UNDERSTANDING OF THE PERFORMANCE MEASURES – APP INDICATORS

Key Action	Progress
Conduct awareness and communication of the performance measures for production and management levels	<p>Quarterly review sessions are continuously conducted by all environments</p> <p>Performance agreements and assessment frameworks for Station Commanders, Vispol Commanders and Detective Commanders at station level in process of revision</p> <p>Roll-out of Relief Commander KPA's – In-service training of Station -, Vispol -, Detective -, Relief – and CSC Commanders – Started 15 November 2021 – 21 stations visited (WC); Limpopo (10 January 2022); other provinces to follow</p>
Conduct an analysis of the audit findings at business units for the cycle 2019/2020 and 2020/2021	<p>100% completed</p> <p>Root cause analysis conducted which includes findings from IA, Inspectorate and AGSA.</p>
Ensure purification of 2021/2022 TIDs	<p>100% completed</p> <p>The 2021/2022 TIDs have been reviewed and amended with emphasis placed on the means of verification and submitted to Strategic Management.</p> <p>The TID was revised on 11 October 2021 to accommodate performance calculation methodology.</p>

## A. UNDERSTANDING OF THE PERFORMANCE MEASURES – APP INDICATORS

Key Action	Progress
Implementation of Quarterly Monitoring & Reporting guidelines at Provincial, District and Station level	SOP on Processing and Management of Crime Statistics compiled – In process of sign-off <ul style="list-style-type: none"> <li>• Firearm recoveries – 7 provinces visited / 2 in process</li> </ul>
Ensure alignment with reporting as contained in the TID's	Directive on Escapes out of police custody circulated – correct interpretation of crime codes – Supplemented through workshop concluded and station visits Directive on Community in Blue Concept circulated
Purification of functions of Divisional and Provincial Audit Steering Committees	National directive on preparing for the audit of performance information circulated (23/3/1, dated 2021/12/01) Divisional Audit Steering Committee activated and meeting concluded on 2021/11/15 - Chaired by the Divisional Commissioner TOR for the DASC compiled, aligned with directive 23/3/1, dated 2021/12/01, and approved TOR of DASC circulated to all provinces to ensure alignment
Conduct quarterly review sessions on performance information to create a culture of accountability	Ongoing Quarterly review sessions are held and feedback on performance is provided <ul style="list-style-type: none"> <li>• Review Session conducted: 17 – 18 November 2021</li> </ul>

## B. OUTDATED AND INADEQUATE INTERNAL CONTROLS

Key Action	Progress
Develop/revise practical guidelines in terms of KPI (Do's and Don'ts).	<p>100% completed</p> <p>Guidelines have been reviewed and developed where necessary for implementation by all relevant business units.</p> <ul style="list-style-type: none"> <li>• SOP on Processing and Management of Crime Statistics compiled – In process of sign-off</li> </ul>
Develop practical guidelines for Policies/NI/SOP/Frameworks/Norms & Standards/Delegation of Power or authority/ in terms of the APP indicators.	<ul style="list-style-type: none"> <li>• Directive 3/1/8 dated 2021-12-30 Audit of performance information by the Auditor General of South Africa (AGSA) 2020/2021 financial year: Implementation of the post audit action plan to Provincial Commissioners, await compliance certificated from Provinces</li> </ul>

## B. OUTDATED AND INADEQUATE INTERNAL CONTROLS

Key Action	Progress
Conduct full assessment of internal controls in terms of APP indicators by relevant business environment.	Full assessment of internal controls on all APP indicators conducted and finalised except for the internal controls pertaining to the Crime Indicators Directive 23/3/1, dated 2022/02/03, Management of Performance Information: 2021/2022: Ensuring a Clean Audit – In process
Purification of relevant internal controls in terms of APP indicators.	Current internal controls were assessed and revised/enhanced where necessary. <ul style="list-style-type: none"><li>• System enhancement to verify charges not yet linked to a suspect not yet arrested</li><li>• Business requirements compiled and signed off</li></ul>

## C. EFFECTIVE COMMUNICATION AND IMPLEMENTATION OF INTERNAL CONTROLS

Key Action	Progress
<p>Conduct awareness campaigns to communicate practical guidelines in terms of KPI (Do's and Don'ts) at all levels (what is the role &amp; responsibility of each level in the reporting &amp; communication process).</p>	<p>Workshops on the recovery of firearms were conducted in 6 provinces.</p>
<p>Conduct awareness campaigns to communicate practical guidelines for Policies/NI/SOP/Frameworks/Norms and Standards/Delegation of Power or authority/ in terms of the APP indicators at all levels (what is the role &amp; responsibility of each level in the reporting &amp; communication process).</p>	<p>Circular with reference number 3/1/8, dated 2021-04-01: New functionality on CAS/ICDMS in respect of the registration of cases where the victim is a woman or a child, Division Visible Policing Letter with reference number 3/1/5/1/68 dated 2020-11-03: Registration of case dockets on CASI/CDMS: Perusal and Alteration of Crime Codes.</p>
<p>Provide electronic mediums (TV, monitors) for display/communication of practical guidelines.</p>	<p>Letter to Provinces 23/7/1 circulated on 2022-01-25 to provide feedback on the number of police stations already equipped with electronic mediums – Await feedback from Provinces.</p>
<p>Communicate monthly themes &amp; bulk sms's to improve the communication of internal controls.</p>	<p>Continuous communication through articles in magazines, Awareness banners on internal emails; circulation of directives to all SAPS users and communication through WhatsApp Groups is continuously done.</p>

## D. EFFECTIVE COMMUNICATION AND IMPLEMENTATION OF INTERNAL CONTROLS

Key Action	Progress
Communicate guidelines for appropriate sanctions for non-compliance.	Circular issued by the National Commissioner 3/1/8 dated 2021-05-11: Management of performance in respect of findings by the AGSA and Internal Assurance Providers. – Finalised Directive 3/1/8 dated 2021-12-30 issued to the provinces and awaits certificate of compliance.
Institute investigations for 2020/2021 audit outcome	<p>100% completed</p> <p>Investigations were instituted and the outcomes thereof were submitted in a report - signed off by the DNC: Policing.</p> <p>Consequence management based on the findings and root causes analysis initiated to all responsible members and proof of consequence management submitted to national nodal point.</p>
Initiate investigations into the manipulation of crime	<p>100% completed</p> <p>Investigations were instituted and the outcomes thereof were submitted in a report - signed off by the DNC: Policing.</p> <p>Consequence management based on the findings and root causes analysis initiated to all responsible members and proof of consequence management submitted to national nodal point.</p>



## D. EFFECTIVE COMMUNICATION AND IMPLEMENTATION OF INTERNAL CONTROLS

Key Action	Progress
Establish accountability – signing of undertakings and consolidation notices	<p>All role players are held accountable as per the signed Audit Readiness Certificates.</p> <ul style="list-style-type: none"> <li>• Directive 3/1/8 dated 2021-12-30 issued to the provinces and awaits certificate of compliance</li> </ul>
Ensure activation of compliance board	<p>The Inspectorate has completed all the necessary documentation and Standard Operating Procedures (SOP) for the initiation of the Compliance Board. Appointment of the Compliance Board Chairperson and Board Members still pending approval.</p>
Institute appropriate remedial action to contributing business entities	<p>Directive 3/1/8 dated 2021-12-30 issued to the provinces and awaiting certificate of compliance.</p>
Conduct an audit of consequential management of the previous audit	
Institute appropriate remedial action to contributing business entities	<p>Directive 3/1/8 dated 2021-12-30 issued to the provinces and awaiting certificate of compliance.</p>
Conduct an audit of consequential management of the previous audit	

## E. MANAGEMENT OF ROLES AND SUPERVISORY REMEDIATION

Key Action	Progress
Clarification of current understanding of generic roles/responsibility, expectation and accountability at different managerial levels.	<p>100% completed</p> <ul style="list-style-type: none"> <li>• Workshops were conducted in 6 provinces.</li> </ul>
Conduct road shows/awareness campaigns of management roles (Division/Province/District/Station).	
Clarification of lines of communications/authority/accountability.	SOP on the Crime Statistics Value Chain developed and submitted for approval by DNC policing to address to communication/authority and accountability value chain towards contact crime indicator.
Ensure inclusion of all stakeholders in the implementation of audit action plans.	All stakeholders, including all Provincial DPC's, Provincial Heads, District Commanders and Police Stations are included in all audit preparations and processes

## G. CORPORATE SYSTEMS INTEGRATION

Key Action	Progress
<p>Identify quick wins with Div: TMS per APP indicator.</p>	<p>Divisions/components are in engagements with Division: TMS Internal Controls assessment concluded by Internal Audit on CAS/ICDMS relevant to Contact Crime:</p> <ul style="list-style-type: none"> <li>▪ System enhancement towards calculation of victims age and incorporation of victims where the person was still under aged when the crime was committed</li> <li>▪ Charges linked to the victim and controls towards the fact that these dockets cannot be finalised if the linkage was not concluded</li> <li>▪ Unique report to identify charges not yet linked to a victim - Finalised</li> </ul> <p>Organisational Development with the Division: TMS facilitate the request to systemise all SAPS Registers - In process</p>
<p>Ensure involvement of all role players with Div: TMS to assist in identifying quick wins to address deficiencies in relation to Linkage/integration of CAS, Loss control, ERFS and PAS.</p>	<p>An integration of EFRS and CAS exists, through which CAS/ICDMS provides a status of possible Lost/Stolen firearms. Engagement with relevant TMS System Manager activated to obtain the user requirements on integration of PAS and CAS/ICDMS.</p>

## G. CORPORATE SYSTEMS INTEGRATION

Key Action	Progress
Explore the viability of provision of datasets to Divisions by agreed time frames	Directive to Crime Registrar to quality control contact crime statistics – Finalised Viability being explored by TMS, as per action plan within a Internal Audit Finding presented, to use the of Management Information Centre at SITA to extract data within timeframes as well as to ensure that the data schedules reconcile with the datasets - In process
Explore the viability of provision of datasets to provinces	Datasets available on SHAREPOINT and provided to provinces

## G. CORPORATE SYSTEMS INTEGRATION

Key Action	Progress
Development of information technology systems for manually maintained APP Performance Indicators	The Annual Performance Monitor (APM) system is being developed in order to provide for the measurement of performance indicators against predetermined targets. The APM system is currently undergoing testing. User requirements from Strategic Management for the enhancement of the APM System is being addressed. Provision is made for the capturing of performance indicators, targets and results for those indicators not available from a source system or available within the Efficiency Index System (EIS).
Ensure digitalisation of registers relating to APP Performance Indicators	Request from Organisational Development to Technology Management Services regarding the digitalisation of registers relating to the performance indicators in the SAPS Annual Performance Plan. Registers / forms are being identified and nominations sourced to form part of the task teams
Ensure quality assurance of information from performance reporting systems	Application control review (Extraction of complete performance information reports) on the EFRS to be activated with Internal Audit – Input provided on Annual Audit Plan Application control review on the CAS/ICDMS to be activated towards escapes and the uploading of required documentation
Ensure maintenance of systems for APP performance indicators for audit trail purposes	IRIS System Special Task Force (STF) and National Intervention Unit (NIU) – All performance stats are done manually in registers but full functionality was developed and Piloted for 2021-2022. All Systems are currently maintained under the SITA / SAPS application maintenance SLA.

## H. ROTATION/TURN-OVER OF PERSONNEL

Key Action	Progress
Conduct skills audit to identify critical posts associated with APP indicators.	A SAPS Retention Policy is approved and is designed to retain (key / essential) job specific skills where appropriate. The policy is presently being consulted – an implementation plan per Division will be developed thereafter.
Communicate rotation and transfer policies.	Rotation and transfer policies are circulated and communicated by Provincial Human Resource Management as well as Corporate Communication, upon receipt of such policies from National Head Office.
Relook the current transfer policy and rotation policy and issue a directive towards critical positions associated with APP indicators (i.e. CIMAC, Data typist, Commanders at station level)	Rotation and transfer policies are circulated and communicated by Provincial Human Resource Management as well as Corporate Communication, upon receipt of such policies from National Head Office.

## H. ROTATION/TURN-OVER OF PERSONNEL

Key Action	Progress
Monitor the implementation of post audit action plan.	2020/2021 Post Audit Action Plan has been circulated for implementation to all Divisions, Provincial Heads and District Commissioners, as per the directive issued. Monthly and quarterly feedback is monitored from all business units Monthly monitoring activated within the Division: Visible Policing supported by a directive issued to the Provinces to address incomplete submissions
Obtain legal opinion in terms of audit readiness certificate.	Engagement with Legal Services has been initiated and the matter is still ongoing
Consolidation of audits/inspection findings from various compliance levels (Divisional/Provincial Inspection Teams, Crime Registrar, Inspectorate, IA, AGSA).	A database of all findings from internal and external assurance providers is in place

## I. RESPONSE TO AUDIT FINDINGS AND INSPECTIONS

Key Action	Progress
<p>Conduct audit history of all business units, focusing on findings and individual performance ratings;            Check all 2020/2021 audit findings;            and            Check all audit findings for the past 3 years.</p>	<p>A database of all findings from internal and external assurance providers is in place</p>
<p>Ensure capacitation and location of nodal points.</p>	<p>100% completed            Nodal points have been established</p>
<p>Ensure improved functioning of the DASCs/PASCs.</p>	<p>Divisional Audit Steering Committee activated and meeting concluded on 2021/11/15 and TOR adopted            Provincial Audit Steering Committees activated in all provinces</p>



# I. RESPONSE TO AUDIT FINDINGS AND INSPECTIONS

Key Action	Progress
Identification of repeat contributors to findings.	100% completed Analysis of audit findings and root causes conducted which encapsulate findings presented by the AGSA, Internal Audit and Inspectorate
Provide guidelines to improve responses to findings.	Guidelines provided at DASC meeting held on 2021/11/15 Nodal points to accompany audit team to audit location to coordinate sampling, walk through test of controls, to provide clarity towards internal controls and to oversee all management responses Support rendered by Divisional Nodal Point during audit
Institute measures to ensure proper implementation of verbal review.	Engagements between HRM and Strategic Management on the performance management system have commenced and discussions are still ongoing
Conduct review of value and weight of findings from AGSA and Internal Audit (IA) for individual assessment.	

## CHALLENGES ON THE IMPLEMENTATION OF PAAP

- Although the PAAP is being implemented, there is slow improvement in the current 2021/2022 interim audit, as there are still repeat findings and new emerging findings.

## STATUS/PROGRESS OF THE CURRENT 2021/2022 INTERIM AUDIT

- 6 out of 18 audit locations were audited , as at 2022-02-04
- 12 still to be audited by 2022-03-31
- All RFIs and COMAFs received are being responded to

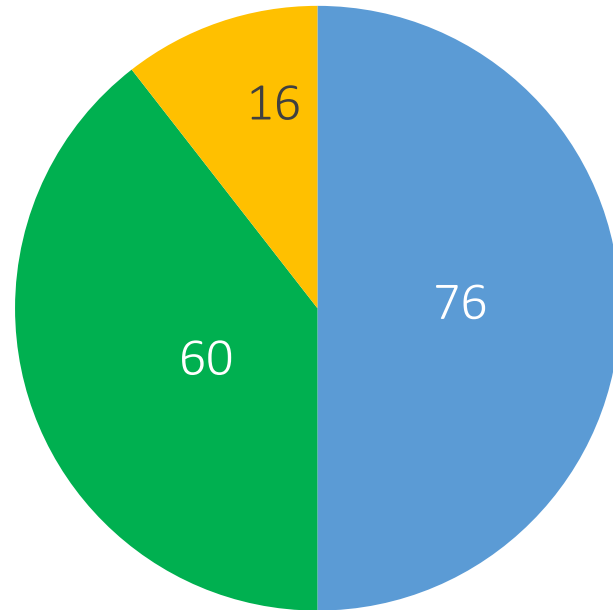


# SECTION 2:

POST AUDIT ACTION PLAN: 2020/21: FINANCIAL AUDIT

## SUMMARY: POST AUDIT ACTIONS: FINANCIAL AUDIT

PAAP 2020/2021



■ TOTAL ACTION STEPS ■ COMPLETED ■ IN PROGRESS

## 2020/21 AGSA AUDIT: STATUS OF IMPLEMENTATION OF PAAP

- ❑ 60 actions of 76 have been executed and completed which represents a 78.9% completion rate
- ❑ The 16 actions are still in progress and not yet concluded are as follows:

DIVISION	NUMBER OF ACTIONS	STATUS (Not yet due/In Progress)
Supply Chain Management (Asset related)	8	In progress
Supply Chain Management (Procurement & Contract Management)	1	In progress
Corporate Support (Heritage Assets)	3	In progress
TMS ( Network Assets)	2	In progress
Legal Services (Contingent liabilities & Provisions)	2	In progress

## FINDINGS AND STATUS

ENVIROMENT	FINDINGS	PROGRESS
SCM (Asset Management)	4 Findings which relates to the Movement in the asset register which does not reconcile to source documents. <ul style="list-style-type: none"> <li>▪ Non Cash additions</li> <li>▪ Prior year errors</li> <li>▪ Disposals</li> </ul>	12 Action steps which is 97% completed with the remaining 3% envisaged to be completed by 31 March 2022
SCM (Asset Management)	2 Findings which relates to Minor asset register which must be purified <ul style="list-style-type: none"> <li>▪ Assets below R 5000.00</li> <li>▪ Assets below R 2000.00</li> </ul>	12 Action steps which is 99% completed  The remaining 1% is as a result of the User acceptance testing to be finalized during the 1st week of March 2022

## FINDINGS AND STATUS

ENVIROMENT	FINDINGS	PROGRESS
SCM (Asset Management)	2 Finding which relates to: Assets not recorded on the asset register - Completeness testing by AGSA	4 Action steps which is 95% completed  The remaining 5% is as a result of an investigation to be conducted by Organisational Development in respect of barcoding.
SCM & Corporate Support (Asset Management)	1 Finding which relates to: Heritage assets - Incomplete asset register and valuation	3 Action steps still in progress which is 45% completed  The remaining 55% will be completed upon conclusion of the BID processes



## FINDINGS AND STATUS

ENVIROMENT	FINDINGS	TO BE VISITED IN MARCH
SCM Operating Leases	1 Finding which relates to incorrect disclosure of operating leases ( Photocopiers)	99 % completed The remaining 1% is as a result of the User acceptance testing to be finalized during the 1st week of March 2022
SCM Procurement	2 Findings which relates to - Sub contracting - Local content	100 % completed
SCM Procurement	15 Other non compliance findings on contract and bid management.	100 % completed
SCM Procurement	1 Finding on Irregular expenditure for long Outstanding Investigations	99% concluded - Intervention session in provinces - 1 visit to provinces still to be concluded with KZN's visit to take place during March 2022

## FINDINGS AND STATUS

ENVIROMENT	FINDINGS	PROGRESS
TMS	Discrepancies of the Network Asset Register and supporting PAS Register	1 Action steps which is 100 % Completed
TMS	Components incorrectly disclosed as “Assets under Investigation”	5 Action steps which is 90% Completed  The remaining 10% is as result of a forensic internal audit that has been sanctioned by the SAPS management and it is in progress
TMS	Asset could not be traced back to the asset register	3 Action steps which is 100% Completed
TMS	Assets not correctly valued due to incorrect VAT capitalized on the asset register	2 Action steps which is 100% Completed
TMS	Not relating to a finding (Management and control of SAPS Network Assets)	1 Action step which is 50% completed Envisaged conclusion date is 31 March 2022

## FINDINGS AND STATUS

ENVIROMENT	FINDINGS	PROGRESS
Legal Services	Contingent liabilities not completely recorded in the accounting records	1 Action step which is 92% completed  The remaining 8% relates to the last quarter certifications which will be concluded by 31 March 2022
Legal Services	Understatement of contingent liability resulting from negative amounts	1 Action step which is 95% completed 4 The remaining 5% relates to the last quarter visits to NW & EC and a final reconciliation by Provinces by 15 March 2022, the action step will be concluded by 31 March 2022
Legal Services	Contingent liability schedule overstated with the provision claims	1 Action steps which is 100 % completed
Legal Services	Provision – claims were recorded twice using different claim numbers	1 Action step which is 100 % completed
Legal Services	Claim recorded in both provisions and contingent liabilities schedule	1 Action step which is 100% completed

## FINDINGS AND STATUS

ENVIROMENT	FINDINGS	PROGRESS
Risk and Integrity Management	Members of the police owning taxis	5 Action steps which is 100% completed
Risk and Integrity Management	Employees doing business with the state	8 Action steps which is 100% completed
HRM	SAPS appointment process – control deficiency	2 Action Steps 100% completed

## CONCLUSION

- The PAAP was developed and adopted during the week of 13 September 2021 to 15 September 2021 in Belabela.
- The National Commissioner approved the PAAP on 18 October 2021.
- Steering Committee Meetings were activated on 4 November 2021 to monitor the implementation of the PAAP. All responsible Divisions provides progress on the status of the PAAP.
- The selected Provinces as per the Audit Strategy forms part of the weekly Steering Committee Meetings which allows them to understand and assist the audit process in respect of the previous findings and action steps to address such in the PAAP.
- Two Provinces were already audited and audit findings were issued with no material findings.



**THANK YOU**

---