

# Annexure E

## Administration

### INTERNAL AUDIT

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| <b>Indicator title</b>                           | Number of internal audit plans developed.   |
| <b>Short definition</b>                          | Three year and annual internal audit plan indicating number and types of audits to be performed during the year.  |
| <b>Purpose/importance</b>                        | Approved three year and annual Internal audit plan indicating number and types of audits to be performed during the year.<br><br>Mandate derived from sections 38(1)(a)(i) and 76(4)(e) of the PFMA |
| <b>Source/collection of data</b>                 | Risk register, AG Reports, Management requests are used to develop three year and annual internal audit plan.   |
| <b>Method of calculation &amp; evidence type</b> | A copy of approved three year and annual Internal audit plan developed annually.  |
| <b>Data limitations</b>                          | None.   |
| <b>Type of indicator</b>                         | Output.   |
| <b>Calculation type</b>                          | Non cumulative.   |
| <b>Reporting cycle</b>                           | Annual.   |
| <b>New indicator</b>                             | Yes.  |
| <b>Desired performance</b>                       | Higher performance.   |
| <b>Indicator responsibility</b>                  | M Mokone.   |

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| <b>Indicator title</b>                           | Number of internal audit charters developed.   |
| <b>Short definition</b>                          | Annual Internal Audit Charter outlining purpose, authority and responsibilities of Internal Audit Activities.  |
| <b>Purpose/importance</b>                        | To set out the nature, role, responsibility, status and authority on Internal Auditing within the Department of Economic Development, Tourism and Environmental Affairs and outline the scope of the internal audit.<br><br>Mandate derived from sections 38(1)(a)(i) and 76(4)(e) of the PFMA |
| <b>Source/collection of data</b>                 | -Manual information from Institute of Internal Auditors Standards.<br>-National Treasury Internal Audit Framework.   |
| <b>Method of calculation &amp; evidence type</b> | Copy of approved Internal audit charter.   |
| <b>Data limitations</b>                          | None.  |
| <b>Type of indicator</b>                         | Output.  |
| <b>Calculation type</b>                          | Non cumulative.  |
| <b>Reporting cycle</b>                           | Annual.  |

|                                 |  |
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| <b>New indicator</b>            | Annual Internal Audit Charter outlining purpose, authority and responsibilities of Internal Audit Activities.  |
| <b>Desired performance</b>      | To set out the nature, role, responsibility, status and authority on Internal Auditing within the Department of Economic Development, Tourism and Environmental Affairs and outline the scope of the internal audit.<br><br>Mandate derived from sections 38(1)(a)(i) and 76(4)(e) of the PFMA |
| <b>Indicator responsibility</b> | -Manual information from Institute of Internal Auditors Standards.<br>-National Treasury Internal Audit Framework.   |

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| <b>Indicator title</b>                           | Number of audit committee charters facilitated.   |
| <b>Short definition</b>                          | Annual Audit Committee Charter outlining purpose, roles, responsibilities and authorities of Audit Committee.   |
| <b>Purpose/importance</b>                        | To set out the purpose, role, responsibilities and authority on Internal Auditing within the Department of Economic Development, Tourism and Environmental Affairs and outline the scope of the audit committee.<br><br>Mandate derived from sections 76(4)(d) and 77 of the PFMA |
| <b>Source/collection of data</b>                 | -Manual information from Institute of Internal Auditors Standards.<br>-National Treasury Internal Audit Framework.  |
| <b>Method of calculation &amp; evidence type</b> | Copy approved of audit committee charter.   |
| <b>Data limitations</b>                          | Unavailability of audit committee members.  |
| <b>Type of indicator</b>                         | Output.   |
| <b>Calculation type</b>                          | Non Cumulative.   |
| <b>Reporting cycle</b>                           | Annually.   |
| <b>New indicator</b>                             | No.   |
| <b>Desired performance</b>                       | Higher performance.   |
| <b>Indicator responsibility</b>                  | M Mokone.   |

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|---------------------------|---|
| <b>Indicator title</b>    | Number of internal audits performed.  |
| <b>Short definition</b>   | Perform internal audits by reporting findings and recommending improvements to management.  |
| <b>Purpose/importance</b> | To provide reasonable assurance to department that risk management, control and governance processes are functioning as intended and will enable the organisation to achieve its objectives and goals.<br><br>Mandate derived from sections 38(1)(a)(i) and 76(4)(e) of the PFMA. |

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| <b>Source/collection of data</b>                 | DESTEA Internal audit procedure manual.                               |
| <b>Method of calculation &amp; evidence type</b> | Copy of internal audit reports.                                       |
| <b>Data limitations</b>                          | Late submission of requested information and documents by management. |
| <b>Type of indicator</b>                         | Outcome.  |
| <b>Calculation type</b>                          | Non Cumulative.   |
| <b>Reporting cycle</b>                           | Quarterly.  |
| <b>New indicator</b>                             | Yes.  |
| <b>Desired performance</b>                       | Higher performance.   |
| <b>Indicator responsibility</b>                  | M Mokone.   |

## RISK MANAGEMENT

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|--|---|
| <b>Indicator title</b>                           | Number of reviews conducted on risk registers.  |
| <b>Short definition</b>                          | Compilation of risk registers for reviews.  |
| <b>Purpose/importance</b>                        | To assess the risks and the opportunities to the Department in order to achieve the organisational strategic objective. |
| <b>Source/collection of data</b>                 | Perform consultations with the risk owners of each components.  |
| <b>Method of calculation &amp; evidence type</b> | Schedule of meetings, attendance register and a complete risk registers.  |
| <b>Data limitations</b>                          | Lack of co-operation by management to comply with the set date.   |
| <b>Type of indicator</b>                         | Outcomes.   |
| <b>Calculation type</b>                          | Cumulative.   |
| <b>Reporting cycle</b>                           | Annually.   |
| <b>New indicator</b>                             | No.   |
| <b>Desired performance</b>                       | Higher performance.   |
| <b>Indicator responsibility</b>                  | CRO   |

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|--|---|
| <b>Indicator title</b>                           | Number of monitoring reports developed.   |
| <b>Short definition</b>                          | Conduct monitoring of action plans  |
| <b>Purpose/importance</b>                        | To ensure compliance of implementation of action plans and development of mitigating strategies |
| <b>Source/collection of data</b>                 | Perform consultations with the risk owners of each components.                                  |
| <b>Method of calculation &amp; evidence type</b> | Schedule of meetings, attendance register, monitoring reports of action plans                   |
| <b>Data limitations</b>                          | Lack of co-operation by management to comply with the set date.                                 |
| <b>Type of indicator</b>                         | Outcomes.   |
| <b>Calculation type</b>                          | Cumulative.   |

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|---------------------------------|---------------------|
| <b>Reporting cycle</b>          | Quarterly           |
| <b>New indicator</b>            | Yes                 |
| <b>Desired performance</b>      | Higher performance. |
| <b>Indicator responsibility</b> | CRO                 |

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|--|---|
| <b>Indicator title</b>                           | Number of emerging risk registers/reports updated.                              |
| <b>Short definition</b>                          | Facilitate identification of new risks during monitoring                        |
| <b>Purpose/importance</b>                        | To establish the new risks in order to achieve the strategic objectives         |
| <b>Source/collection of data</b>                 | Perform consultations with the risk owners of each components.                  |
| <b>Method of calculation &amp; evidence type</b> | Schedule of meetings, attendance register and a complete risk registers/reports |
| <b>Data limitations</b>                          | Lack of co-operation by management to report emerging risks.                    |
| <b>Type of indicator</b>                         | Outcomes  |
| <b>Calculation type</b>                          | Cumulative  |
| <b>Reporting cycle</b>                           | Quarterly   |
| <b>New indicator</b>                             | Yes   |
| <b>Desired performance</b>                       | Higher performance.   |
| <b>Indicator responsibility</b>                  | CRO   |

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|--|---|
| <b>Indicator title</b>                           | Number of awareness campaigns conducted.  |
| <b>Short definition</b>                          | Training of officials on risk management activities.  |
| <b>Purpose/importance</b>                        | To set the tone on risk management activities and departmental culture.                         |
| <b>Source/collection of data</b>                 | Conduct workshops or training based on methods of identification of risk utilised (Interviews). |
| <b>Method of calculation &amp; evidence type</b> | Approved submission with schedule, attendance register and presentations                        |
| <b>Data limitations</b>                          | Non approval of submission by Accounting Officer.   |
| <b>Type of indicator</b>                         | Outcome   |
| <b>Calculation type</b>                          | Cumulative  |
| <b>Reporting cycle</b>                           | Quarterly   |
| <b>New indicator</b>                             | Yes   |
| <b>Desired performance</b>                       | Higher performance  |
| <b>Indicator responsibility</b>                  | CRO   |

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|---------------------------|---|
| <b>Indicator title</b>    | Number of Risk Management Committee reports.  |
| <b>Short definition</b>   | Facilitation of RMC meetings and present a report in line with the risk management process.   |
| <b>Purpose/importance</b> | To ensure the effectiveness of risk management functions and provide recommendations on the reported issues for approval of the implementation by the Accounting Officer. |

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| <b>Source/collection of data</b>                 | Populate information from risk related activities performed.                                     |
| <b>Method of calculation &amp; evidence type</b> | Invitation of the meetings, attendance register agenda, minutes of the meetings and RMC reports. |
| <b>Data limitations</b>                          | Unavailability of committee members  |
| <b>Type of indicator</b>                         | Outcomes.  |
| <b>Calculation type</b>                          | Cumulative.  |
| <b>Reporting cycle</b>                           | Quarterly  |
| <b>New indicator</b>                             | No   |
| <b>Desired performance</b>                       | Higher performance.  |
| <b>Indicator responsibility</b>                  | CRO  |

## STRATEGIC PLANNING AND RESEARCH

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| <b>Indicator title</b>                           | Number of Service Delivery planning documents developed.  |
| <b>Short definition</b>                          | Various service delivery planning documents developed.  |
| <b>Purpose/importance</b>                        | The purpose of these documents is to present a framework of DESTEA's services by informing the staff and community on who is in charge, the executive management, services offered and which procedure to follow when one want to complain. This is augmented by service standards etc. |
| <b>Source/collection of data</b>                 | SDIP documents developed.   |
| <b>Method of calculation &amp; evidence type</b> | 3 Plans annually; 4 plans every 3 <sup>rd</sup> year.   |
| <b>Data limitations</b>                          | Lack of inputs from programme and sub-programme managers.   |
| <b>Type of indicator</b>                         | Output.   |
| <b>Calculation type</b>                          | Cumulative.   |
| <b>Reporting cycle</b>                           | Annually.   |
| <b>New indicator</b>                             | No.   |
| <b>Desired performance</b>                       | Targets are set at the desired level.   |
| <b>Indicator responsibility</b>                  | Dirk Hagen.   |

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| <b>Indicator title</b>                           | Number of strategic and performance plans facilitated.   |
| <b>Short definition</b>                          | Facilitation of Annual performance plan and strategic plan.  |
| <b>Purpose/importance</b>                        | To assist with the development of strategic and annual performance plan, as well as the timely submission of these plans to the provincial Treasury. |
| <b>Source/collection of data</b>                 | Copies of approved plans.  |
| <b>Method of calculation &amp; evidence type</b> | APP are to be reviewed and submitted annually.<br>Strategic plans are to be reviewed and submitted every 5 years.                                    |
| <b>Data limitations</b>                          | Lack of SMART inputs by programme and sub-programme managers.  |

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| <b>Type of indicator</b>        | Output.                               |
| <b>Calculation type</b>         | Cumulative.                           |
| <b>Reporting cycle</b>          | Annually.                             |
| <b>New indicator</b>            | No.                                   |
| <b>Desired performance</b>      | Targets are set at the desired level. |
| <b>Indicator responsibility</b> | Dirk Hagen.                           |

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| <b>Indicator title</b>                           | Number of FSDM reports compiled  |
| <b>Short definition</b>                          | To ensure effective and efficient service delivery.  |
| <b>Purpose/importance</b>                        | The FSDM programme ensures that through government efforts, citizen's experience frontline facilities of quality services as envisioned in the National Development Plan Vision 2030 |
| <b>Source/collection of data</b>                 | FSDM reports   |
| <b>Method of calculation &amp; evidence type</b> | Simple count   |
| <b>Data limitations</b>                          | Lack of inputs from programme managers   |
| <b>Type of indicator</b>                         | Output   |
| <b>Calculation type</b>                          | Cumulative   |
| <b>Reporting cycle</b>                           | Quarterly  |
| <b>New indicator</b>                             | yes  |
| <b>Desired performance</b>                       | Higher performance desired.  |
| <b>Indicator responsibility</b>                  | Dirk Hagen.  |

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| <b>Indicator title</b>                           | Number of departmental projects assessed.  |
| <b>Short definition</b>                          | It refer to all projected provided by DESTEA.                                    |
| <b>Purpose/importance</b>                        | To ensure that all projects were received in line with the departmental mandate. |
| <b>Source/collection of data</b>                 | Database   |
| <b>Method of calculation &amp; evidence type</b> | Simple count.<br>Reports   |
| <b>Data limitations</b>                          | None   |
| <b>Type of indicator</b>                         | Output   |
| <b>Calculation type</b>                          | Non cumulative   |
| <b>Reporting cycle</b>                           | Quarterly  |
| <b>New indicator</b>                             | yes  |
| <b>Desired performance</b>                       | Higher performance desired.  |
| <b>Indicator responsibility</b>                  | Dirk Hagen.  |

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| <b>Indicator title</b> | Number of cargo airports feasibility studies initiated. |
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| <b>Short definition</b>                         | An expression of interest document will be developed for service providers to submit proposals on an assessment of the practicality of establishing cargo airports in Bethlehem and Welkom. |
| <b>Purpose/importance</b>                       | To determine the practicality of establishing cargo airports in Bethlehem and Welkom.   |
| <b>Source/collection of data</b>                | Feedback from stakeholders and literature review  |
| <b>Method of calculation&amp; evidence type</b> | Simple count. Number of approved expression of interest documents developed   |
| <b>Data limitations</b>                         | Lack of interest from investors/service providers   |
| <b>Type of indicator</b>                        | Output  |
| <b>Calculation type</b>                         | Non-cumulative  |
| <b>Reporting cycle</b>                          | Annually  |
| <b>New indicator</b>                            | Yes   |
| <b>Desired performance</b>                      | Higher performance is desired   |
| <b>Indicator responsibility</b>                 | Mr Jonas Mosia  |

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| <b>Indicator title</b>                          | Number of unit financial reports compiled.   |
| <b>Short definition</b>                         | Management of finances in the unit.  |
| <b>Purpose/importance</b>                       | To ensure better control of budget and expenditure in the unit in order to ensure a better administrative process. |
| <b>Source/collection of data</b>                | Reports and registers produced by the Admin Clerk.   |
| <b>Method of calculation&amp; evidence type</b> | Simple count; Reports and registers.   |
| <b>Data limitations</b>                         | Availability of financial data from Finance.   |
| <b>Type of indicator</b>                        | Output.  |
| <b>Calculation type</b>                         | Cumulative.  |
| <b>Reporting cycle</b>                          | Quarterly.   |
| <b>New indicator</b>                            | No.  |
| <b>Desired performance</b>                      | Higher performance .   |
| <b>Indicator responsibility</b>                 | Dirk Hagen.  |

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| <b>Indicator title</b>                          | Number of client satisfaction surveys conducted.  |
| <b>Short definition</b>                         | Survey conducted to determine department's adherence to its service standards.              |
| <b>Purpose/importance</b>                       | To gauge service recipients level of satisfaction about service rendered by the department. |
| <b>Source/collection of data</b>                | Completed questionnaire.  |
| <b>Method of calculation&amp; evidence type</b> | Simple count; Approved Survey Report.   |
| <b>Data limitations</b>                         | Response rate by stakeholders.  |

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| <b>Type of indicator</b>        | Impact.            |
| <b>Calculation type</b>         | Manual.            |
| <b>Reporting cycle</b>          | Bi-Annual.         |
| <b>New indicator</b>            | No                 |
| <b>Desired performance</b>      | Higher performance |
| <b>Indicator responsibility</b> | Dirk Hagen.        |

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| <b>Indicator title</b>                           | Number of departmental annual reports facilitated.   |
| <b>Short definition</b>                          | Facilitation of the Annual Report and submission/tabling.  |
| <b>Purpose/importance</b>                        | Produce a detailed progress report of the previous year's performance, both financial and non-financial. |
| <b>Source/collection of data</b>                 | Approved annual report.  |
| <b>Method of calculation &amp; evidence type</b> | One annual report per annum.   |
| <b>Data limitations</b>                          | Lack of inputs from programme and sub-programme managers.  |
| <b>Type of indicator</b>                         | Output.  |
| <b>Calculation type</b>                          | Cumulative.  |
| <b>Reporting cycle</b>                           | Annually.  |
| <b>New indicator</b>                             | No.  |
| <b>Desired performance</b>                       | Targets are set at the desired level.  |
| <b>Indicator responsibility</b>                  | Dirk Hagen.  |

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| <b>Indicator title</b>                           | Number of MPAT Self-Assessments facilitated.   |
| <b>Short definition</b>                          | Facilitate annual MPAT self-assessment on 4 KPA's.   |
| <b>Purpose/importance</b>                        | To facilitate the annual MPAT self-assessment process, as well as to support the KPA Coordinators during this process. |
| <b>Source/collection of data</b>                 | Self-Assessment Results in MPAT System.  |
| <b>Method of calculation &amp; evidence type</b> | Simple count; Self-Assessment Results in MPAT System.  |
| <b>Data limitations</b>                          | Lack of inputs and support from Standard Managers.   |
| <b>Type of indicator</b>                         | Output.  |
| <b>Calculation type</b>                          | Non-Cumulative.  |
| <b>Reporting cycle</b>                           | Annually.  |
| <b>New indicator</b>                             | New Indicator .  |
| <b>Desired performance</b>                       | Higher performance.  |
| <b>Indicator responsibility</b>                  | Dirk Hagen.  |

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| <b>Indicator title</b>  | Number of SDIP Annual Reports developed  |
| <b>Short definition</b> | An annual report submitted to DPSA by 30 June on a three year departmental SDIP. |



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| <b>Purpose/importance</b>                       | To comply with DPSA provisions  |
| <b>Source/collection of data</b>                | Verified M&E quarterly reports and reports from programme owners      |
| <b>Method of calculation&amp; evidence type</b> | Approved annual report by the MEC                                     |
| <b>Data limitations</b>                         | Possible delay by programme owners in submitting additional evidence. |
| <b>Type of indicator</b>                        | Output  |
| <b>Calculation type</b>                         | Cummulative   |
| <b>Reporting cycle</b>                          | Annually  |
| <b>New indicator</b>                            | No  |
| <b>Desired performance</b>                      | Targets are set at the desired level.                                 |
| <b>Indicator responsibility</b>                 | Dirk Hagen.   |

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| <b>Indicator title</b>                          | <b>Number of Research Agendas developed</b>                                      |
| <b>Short definition</b>                         | Consolidation of economic research needs from various directorates of the DesteA |
| <b>Purpose/importance</b>                       | Serve as a guide on the research studies to be conducted                         |
| <b>Source/collection of data</b>                | Inputs from Directorates   |
| <b>Method of calculation&amp; evidence type</b> | Simple count. Number of approved List of Research Topics                         |
| <b>Data limitations</b>                         | Delayed responses from Directorates on their research needs                      |
| <b>Type of indicator</b>                        | Output   |
| <b>Calculation type</b>                         | Cumulative   |
| <b>Reporting cycle</b>                          | Annually   |
| <b>New indicator</b>                            | Yes  |
| <b>Desired performance</b>                      | Targets are set at a desired level.  |
| <b>Indicator responsibility</b>                 | Mr Jonas Mosia   |

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| <b>Indicator title</b>                          | <b>Number of research policies reviewed.</b>   |
| <b>Short definition</b>                         | Revision of Research Policy to guide the carrying out of research projects   |
| <b>Purpose/importance</b>                       | To ensure that the policy is in line with updated vision and the mission of DesteA and helps in ensuring provision of accurate information for evidence-based decision-making. |
| <b>Source/collection of data</b>                | Research Policy; inputs from directorates; literature review   |
| <b>Method of calculation&amp; evidence type</b> | Simple count. Approved Research Policy   |
| <b>Data limitations</b>                         | Not applicable   |

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| <b>Type of indicator</b>        | Output                       |
| <b>Calculation type</b>         | Non-cumulative               |
| <b>Reporting cycle</b>          | Annual                       |
| <b>New indicator</b>            | No                           |
| <b>Desired performance</b>      | Target is at a desired level |
| <b>Indicator responsibility</b> | Mr Jonas Mosia               |

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| <b>Indicator title</b>                           | Number of SOPs reviewed.  |
| <b>Short definition</b>                          | Revision of Research Policy SOP   |
| <b>Purpose/importance</b>                        | To provide guidance on the procedure to be followed when dealing with the identification of research topics, facilitation and commissioning of economic research in Desteá. |
| <b>Source/collection of data</b>                 | Research Policy; inputs from directorates; literature review  |
| <b>Method of calculation &amp; evidence type</b> | Simple count. Approved SOP  |
| <b>Data limitations</b>                          | Not applicable  |
| <b>Type of indicator</b>                         | Output  |
| <b>Calculation type</b>                          | Non-cumulative  |
| <b>Reporting cycle</b>                           | Annually  |
| <b>New indicator</b>                             | No  |
| <b>Desired performance</b>                       | Target is at a desired level  |
| <b>Indicator responsibility</b>                  | Mr Jonas Mosia  |

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| <b>Indicator title</b>                           | Number of reports on opportunities for SMMEs developed.   |
| <b>Short definition</b>                          | This research will look at key projects in sectors that have been prioritised by the Department in which SMMEs could invest |
| <b>Purpose/importance</b>                        | To provide information that will help potential SMME investors to make investment decisions                                 |
| <b>Source/collection of data</b>                 | Data to be collected from various stakeholders in the different sectors, including the public and private sectors           |
| <b>Method of calculation &amp; evidence type</b> | Simple count. Approved Report on opportunities for SMMEs  |
| <b>Data limitations</b>                          | Delays of feedback from various stakeholders  |
| <b>Type of indicator</b>                         | Output  |
| <b>Calculation type</b>                          | Non-cumulative  |
| <b>Reporting cycle</b>                           | Quarterly   |
| <b>New indicator</b>                             | Yes   |
| <b>Desired performance</b>                       | Target is set at desired level  |
| <b>Indicator responsibility</b>                  | Mr Jonas Mosia  |

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| <b>Indicator title</b> | Number of research projects on municipal incentives initiated. |
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| <b>Short definition</b>                          | Research will be conducted on what type of incentives are provided by the different municipalities to attract investment. |
| <b>Purpose/importance</b>                        | Research can provide recommendations and lessons learned  |
| <b>Source/collection of data</b>                 | Data from the different municipalities (documents, interviews, questionnaires).   |
| <b>Method of calculation &amp; evidence type</b> | Simple count. Terms of Reference; approved reports on municipal incentives.   |
| <b>Data limitations</b>                          | Delay in response from various stakeholders   |
| <b>Type of indicator</b>                         | Output  |
| <b>Calculation type</b>                          | Cumulative  |
| <b>Reporting cycle</b>                           | Annually  |
| <b>New indicator</b>                             | Yes   |
| <b>Desired performance</b>                       | Target is set at a desired level.   |
| <b>Indicator responsibility</b>                  | Mr Mosia  |

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| <b>Indicator title</b>                           | Number of PRAC meetings held.  |
| <b>Short definition</b>                          | Provincial Research Advisory Committee (PRAC) was established by Desteza and involves different economic departments and institutions of higher learning |
| <b>Purpose/importance</b>                        | To avoid duplication of research, share resources and promote research collaboration   |
| <b>Source/collection of data</b>                 | Sharing of research data   |
| <b>Method of calculation &amp; evidence type</b> | Simple count. Number of meetings   |
| <b>Data limitations</b>                          | Lack of participation by key stakeholders  |
| <b>Type of indicator</b>                         | Activity   |
| <b>Calculation type</b>                          | Cumulative   |
| <b>Reporting cycle</b>                           | Quarterly  |
| <b>New indicator</b>                             | No   |
| <b>Desired performance</b>                       | Target is set to be at desired level   |
| <b>Indicator responsibility</b>                  | Mr Mosia   |

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| <b>Indicator title</b>                           | Number of intelligence reports on GDP developed.                        |
| <b>Short definition</b>                          | A summary of GDP statistics from StatsSA and other statistical agencies |
| <b>Purpose/importance</b>                        | Assist in diagnosing the performance of the economy                     |
| <b>Source/collection of data</b>                 | Reports by Statistics SA  |
| <b>Method of calculation &amp; evidence type</b> | Simple count, number of approved reports produced.                      |
| <b>Data limitations</b>                          | Delay in Updated GDP reports published                                  |
| <b>Type of indicator</b>                         | Activity  |
| <b>Calculation type</b>                          | Non-cumulative  |

|                                 |                                      |
|---------------------------------|--------------------------------------|
| <b>Reporting cycle</b>          | Quarterly                            |
| <b>New indicator</b>            | No                                   |
| <b>Desired performance</b>      | Target is set to be at desired level |
| <b>Indicator responsibility</b> | Mr Mosia                             |

|  |  |
|--|--|
| <b>Indicator title</b>                           | Number of poultry industry research projects initiated.                          |
| <b>Short definition</b>                          | The research serves to determine the state of poultry in the Free State          |
| <b>Purpose/importance</b>                        | To determine the state of poultry in the Free State and the value chain involved |
| <b>Source/collection of data</b>                 | Literature review; interviews and questionnaires                                 |
| <b>Method of calculation &amp; evidence type</b> | Simple count. Terms of Reference; approved reports on municipal incentives.      |
| <b>Data limitations</b>                          | Lack of response from stakeholders   |
| <b>Type of indicator</b>                         | Output   |
| <b>Calculation type</b>                          | Non-cumulative   |
| <b>Reporting cycle</b>                           | Annually   |
| <b>New indicator</b>                             | Yes  |
| <b>Desired performance</b>                       | Target is set at a desired level   |
| <b>Indicator responsibility</b>                  | Mr Mosia   |

|  |   |
|--|---|
| <b>Indicator title</b>                           | Number of intelligence reports on employment statistics developed.  |
| <b>Short definition</b>                          | These reports provide in-depth view of employment figures in SA and more especially the Free State province.  |
| <b>Purpose/importance</b>                        | Provide the department with updated information on the statistics and factors that might have influenced the increase or decrease in the employment statistics. |
| <b>Source/collection of data</b>                 | Reports from Statistics South Africa  |
| <b>Method of calculation &amp; evidence type</b> | Simple count. Number of approved reports produced   |
| <b>Data limitations</b>                          | If there is a delay in Statistics SA publishing the employment statistics   |
| <b>Type of indicator</b>                         | Output  |
| <b>Calculation type</b>                          | Non-cumulative  |
| <b>Reporting cycle</b>                           | Annually  |
| <b>New indicator</b>                             | No  |
| <b>Desired performance</b>                       | Target is set at a desired level  |
| <b>Indicator responsibility</b>                  | Mr Mosia  |

|  |   |
|--|---|
| <b>Indicator title</b>                           | Number of SEZ feasibility studies initiated.  |
| <b>Short definition</b>                          | An expression of interest document will be developed for investors/service providers to submit proposals on an assessment of the practicality of establishing an SEZ in Welkom. |
| <b>Purpose/importance</b>                        | To determine the practicality of establishing an SEZ in Welkom.   |
| <b>Source/collection of data</b>                 | Feedback from stakeholders and literature review  |
| <b>Method of calculation &amp; evidence type</b> | Simple count. Number of approved expression of interest documents developed   |
| <b>Data limitations</b>                          | Lack of interest from investors/service providers   |
| <b>Type of indicator</b>                         | Output  |
| <b>Calculation type</b>                          | Non-cumulative  |
| <b>Reporting cycle</b>                           | Annually  |
| <b>New indicator</b>                             | Yes   |
| <b>Desired performance</b>                       | Higher performance is desired   |
| <b>Indicator responsibility</b>                  | Mr Jonas Mosia  |

|  |  |
|--|--|
| <b>Indicator title</b>                           | Number of techno park feasibility studies initiated.   |
| <b>Short definition</b>                          | An expression of interest document will be developed for investors/service providers to submit proposals on an assessment of the practicality of establishing a techno-park in MAP-SEZ |
| <b>Purpose/importance</b>                        | To determine the practicality of establishing a techno-park in MAP-SEZ   |
| <b>Source/collection of data</b>                 | Feedback from stakeholders and literature review   |
| <b>Method of calculation &amp; evidence type</b> | Simple count. Number of approved expression of interest documents developed  |
| <b>Data limitations</b>                          | Lack of interest from investors/service providers  |
| <b>Type of indicator</b>                         | Output   |
| <b>Calculation type</b>                          | Non-cumulative   |
| <b>Reporting cycle</b>                           | Quarterly  |
| <b>New indicator</b>                             | Yes  |
| <b>Desired performance</b>                       | Target is set at a desired level.  |
| <b>Indicator responsibility</b>                  | Mr Mosia   |

## SECURITY SERVICES AND ANTI-CORRUPTION

|   |   |
|---|---|
| <b>Indicator title</b>                          | Number of Security-Awareness Sessions conducted.  |
| <b>Short definition</b>                         | Refers to the number activities (workshops and sessions) organized towards promoting awareness about issues relating to security. |
| <b>Purpose/importance</b>                       | To track security awareness efforts.  |
| <b>Source/collection of data</b>                | Workshops held with officials.  |
| <b>Method of calculation&amp; evidence type</b> | Manual count.<br>Evidence = Attendance registers and Report.  |
| <b>Data limitations</b>                         | Keeping record of attendees.  |
| <b>Type of indicator</b>                        | Output.   |
| <b>Calculation type</b>                         | Cumulative.   |
| <b>Reporting cycle</b>                          | Quarterly.  |
| <b>New indicator</b>                            | No.   |
| <b>Desired performance</b>                      | Higher performance .  |
| <b>Indicator responsibility</b>                 | Mr T Kotsi  |

|   |   |
|---|---|
| <b>Indicator title</b>                          | Number of Policies Reviewed and SOPs developed.   |
| <b>Short definition</b>                         | A deliberate system of principles to guide decisions and achieve rational outcomes.   |
| <b>Purpose/importance</b>                       | To provide common understanding and agreement on how things should be done or to establish boundaries for acceptable behaviour and guidelines for best practises within the department. |
| <b>Source/collection of data</b>                | Research material and visualizing different concepts and procedures   |
| <b>Method of calculation&amp; evidence type</b> | Signed Policies and SOPs  |
| <b>Data limitations</b>                         | Keeping documents   |
| <b>Type of indicator</b>                        | Output  |
| <b>Calculation type</b>                         | Non – cumulative  |
| <b>Reporting cycle</b>                          | Annually  |
| <b>New indicator</b>                            | Yes   |
| <b>Desired performance</b>                      | High Performance  |
| <b>Indicator responsibility</b>                 | Mr T Kotsi  |

|                                  |   |
|----------------------------------|---|
| <b>Indicator title</b>           | Number of Cases Reported and Investigated.  |
| <b>Short definition</b>          | Investigate cases reported to Security Services and produce investigation report/s that will include the recommendations.   |
| <b>Purpose/importance</b>        | To gather facts of the incident, to find out the cause of the incident and to prevent similar acts in the future. Briefly, the process is designed to test allegations to find out what really transpired and to establish whether there are grounds for disciplinary action. |
| <b>Source/collection of data</b> | Conducting interviewes, identify relavant witnesses, documents and other evidence.  |

|   |   |
|---|---|
| <b>Method of calculation&amp; evidence type</b> | Affidavit, Report and Case Number           |
| <b>Data limitations</b>                         | Keeping records of incidents                |
| <b>Type of indicator</b>                        | Output                                      |
| <b>Calculation type</b>                         | Non - Cumulative                            |
| <b>Reporting cycle</b>                          | Controlled by circumstances (Demand Driven) |
| <b>New indicator</b>                            | No  |
| <b>Desired performance</b>                      | High Performance                            |
| <b>Indicator responsibility</b>                 | Mr T Kotsi                                  |

|   |   |
|---|---|
| <b>Indicator title</b>                          | Number of reports on Z204 forms submitted to SSA.   |
| <b>Short definition</b>                         | Reports on Z204 forms are utilised by State Security Agency (SSA) to conduct vetting on officials occupying critical posts in the department. Officials are required to complete the Z204 forms and submit to Security Services Unit for a report to be compiled and submitted. |
| <b>Purpose/importance</b>                       | Is to check the person's background and private life in order to make sure that the individual can be safely trusted to hold his or her job.  |
| <b>Source/collection of data</b>                | Z204 Forms  |
| <b>Method of calculation&amp; evidence type</b> | Report/s  |
| <b>Data limitations</b>                         | SSA keeps the forms   |
| <b>Type of indicator</b>                        | Output  |
| <b>Calculation type</b>                         | Non – Cumulative  |
| <b>Reporting cycle</b>                          | Controlled by the number of newly employed officials in critical posts and the arising needs that may occur following an incident (Demand Driven).  |
| <b>New indicator</b>                            | Yes   |
| <b>Desired performance</b>                      | High Performance  |
| <b>Indicator responsibility</b>                 | Mr T Kotsi  |

## COMMUNICATION

|   |  |
|---|--|
| <b>Indicator title</b>                          | Number of implementation plans developed.      |
| <b>Short definition</b>                         | Number of action plans                         |
| <b>Purpose/importance</b>                       | To outline activities or tasks to be performed |
| <b>Source/collection of data</b>                | Monthly activity list                          |
| <b>Method of calculation&amp; evidence type</b> | Simple counting                                |
| <b>Data limitations</b>                         | None   |

|                                 |                   |
|---------------------------------|-------------------|
| <b>Type of indicator</b>        | Activities        |
| <b>Calculation type</b>         | Cumulative        |
| <b>Reporting cycle</b>          | Monthly           |
| <b>New indicator</b>            | New               |
| <b>Desired performance</b>      | Higher            |
| <b>Indicator responsibility</b> | Ms Festy Nyamate. |

|   |   |
|---|---|
| <b>Indicator title</b>                          | Number of media engagement plans developed.       |
| <b>Short definition</b>                         | All media related activities planned for the year |
| <b>Purpose/importance</b>                       | To ensure that action are proactive that reactive |
| <b>Source/collection of data</b>                | Communication Strategy                            |
| <b>Method of calculation&amp; evidence type</b> | Simple counting                                   |
| <b>Data limitations</b>                         | None  |
| <b>Type of indicator</b>                        | Activities  |
| <b>Calculation type</b>                         | Cumulative  |
| <b>Reporting cycle</b>                          | Quarterly   |
| <b>New indicator</b>                            | New   |
| <b>Desired performance</b>                      | High  |
| <b>Indicator responsibility</b>                 | Ms Nyamate  |

|   |  |
|---|--|
| <b>Indicator title</b>                          | Number of media statements issued.                               |
| <b>Short definition</b>                         | Profile successes of DESTEA through local and national media     |
| <b>Purpose/importance</b>                       | Promote government policies statements and programmes            |
| <b>Source/collection of data</b>                | Media monitoring   |
| <b>Method of calculation&amp; evidence type</b> | Formula to calculate reach and impact<br>Media monitoring report |
| <b>Data limitations</b>                         | None   |
| <b>Type of indicator</b>                        | Output   |
| <b>Calculation type</b>                         | Cumulative   |
| <b>Reporting cycle</b>                          | Monthly/Quartertley/Annually                                     |
| <b>New indicator</b>                            | No   |
| <b>Desired performance</b>                      | Higher   |
| <b>Indicator responsibility</b>                 | Ms Festy Nyamate.  |

|                         |   |
|-------------------------|---|
| <b>Indicator title</b>  | % of economically active population reached in the Free State |
| <b>Short definition</b> | Communicate successes of DESTEA through media                 |



|  |  |
|--|--|
| <b>Purpose/importance</b>                        | To communicate government messages with relevant stakeholders through media. |
| <b>Source/collection of data</b>                 | Media monitoring   |
| <b>Method of calculation &amp; evidence type</b> | Formula to calculate reach and impact<br>Media monitoring report             |
| <b>Data limitations</b>                          | None   |
| <b>Type of indicator</b>                         | Output   |
| <b>Calculation type</b>                          | Cumulative   |
| <b>Reporting cycle</b>                           | Monthly/Quarterly/Annually   |
| <b>New indicator</b>                             | No   |
| <b>Desired performance</b>                       | Higher   |
| <b>Indicator responsibility</b>                  | Ms Festy Nyamate.  |

|  |   |
|--|---|
| <b>Indicator title</b>                           | Number of campaigns conducted   |
| <b>Short definition</b>                          | Series of activities to create awareness about DESTEA's programmes and projects       |
| <b>Purpose/importance</b>                        | To deliver a message, create awareness and encourages action to the targeted audience |
| <b>Source/collection of data</b>                 | Implemented campaigns   |
| <b>Method of calculation &amp; evidence type</b> | Simple count<br>Campaign plans  |
| <b>Data limitations</b>                          | None  |
| <b>Type of indicator</b>                         | Activities  |
| <b>Calculation type</b>                          | Cumulative  |
| <b>Reporting cycle</b>                           | Quarterly   |
| <b>New indicator</b>                             | No  |
| <b>Desired performance</b>                       | Higher  |
| <b>Indicator responsibility</b>                  | Ms Festy Nyamate.   |

|  |   |
|--|---|
| <b>Indicator title</b>                           | Number of publications produced.  |
| <b>Short definition</b>                          | Number of publications produced to communicate and promote achievements of DESTEA |
| <b>Purpose/importance</b>                        | To communicate government messages with relevant stakeholders                     |
| <b>Source/collection of data</b>                 | Number of publications produced   |
| <b>Method of calculation &amp; evidence type</b> | Approved-publications produced  |
| <b>Data limitations</b>                          | None  |
| <b>Type of indicator</b>                         | Inputs  |

|                                 |                   |
|---------------------------------|-------------------|
| <b>Calculation type</b>         | None              |
| <b>Reporting cycle</b>          | Annually          |
| <b>New indicator</b>            | Yes               |
| <b>Desired performance</b>      | Higher            |
| <b>Indicator responsibility</b> | Ms Festy Nyamate. |

|  |   |
|--|---|
| <b>Indicator title</b>                           | Number of profiled programmes                       |
| <b>Short definition</b>                          | Services to be provided to the community by DESTEA. |
| <b>Purpose/importance</b>                        | Profile successes of DESTEA through media           |
| <b>Source/collection of data</b>                 | Media Monitoring                                    |
| <b>Method of calculation &amp; evidence type</b> | Number of profiled programmes.                      |
| <b>Data limitations</b>                          | None  |
| <b>Type of indicator</b>                         | Activity  |
| <b>Calculation type</b>                          | None  |
| <b>Reporting cycle</b>                           | Annually  |
| <b>New indicator</b>                             | Yes   |
| <b>Desired performance</b>                       | Higher  |
| <b>Indicator responsibility</b>                  | Ms Festy Nyamate.                                   |

## INFORMATION TECHNOLOGY AND KNOWLEDGE MANAGEMENT

|  |  |
|--|--|
| <b>Indicator title</b>                           | Number of implemented ICT solutions.   |
| <b>Short definition</b>                          | Implementation of the IT solutions/initiatives that support business goals and objectives. |
| <b>Purpose/importance</b>                        | To align IT initiatives and plans with business processes.                                 |
| <b>Source/collection of data</b>                 | Two (2) IT solution implemented  |
| <b>Method of calculation &amp; evidence type</b> | Number:<br>Evidence = Printed screen shots of the systems                                  |
| <b>Data limitations</b>                          | None   |
| <b>Type of indicator</b>                         | Output   |
| <b>Calculation type</b>                          | Cumulative   |
| <b>Reporting cycle</b>                           | Bi-Annually  |
| <b>New indicator</b>                             | Yes  |
| <b>Desired performance</b>                       | Higher performance.  |
| <b>Indicator responsibility</b>                  | Ms Tshidi Mphahlane  |

|                        |   |
|------------------------|---|
| <b>Indicator title</b> | Number of monitoring reports compiled for ICT services, usage of IT resources and ICT security risks. |
|------------------------|---|

|   |   |
|---|---|
| <b>Short definition</b>                         | Provide report on Performance of ICT Services, efficient usage of IT resources such as email, internet and shared storage and ICT risk exposures. |
| <b>Purpose/importance</b>                       | To measure the effectiveness of IT controls.  |
| <b>Source/collection of data</b>                | Reports from monitoring systems   |
| <b>Method of calculation&amp; evidence type</b> | Best practice (ITIL and COBIT)<br>Evidence = Approved reports.  |
| <b>Data limitations</b>                         | None.   |
| <b>Type of indicator</b>                        | Output.   |
| <b>Calculation type</b>                         | Cumulative.   |
| <b>Reporting cycle</b>                          | Quarterly.  |
| <b>New indicator</b>                            | No.   |
| <b>Desired performance</b>                      | Higher performance.   |
| <b>Indicator responsibility</b>                 | Ms Tshidi Mphahlane.  |

|   |  |
|---|--|
| <b>Indicator title</b>                          | Number of e-Government initiatives implemented   |
| <b>Short definition</b>                         | Implementation of IT systems to improve the life of citizens and enable them to interact with government in a cost effective manner. |
| <b>Purpose/importance</b>                       | To provide services to citizens in a cost effective manner.  |
| <b>Source/collection of data</b>                | Approved reports   |
| <b>Method of calculation&amp; evidence type</b> | Number:<br>Evidence= Two (2) Project Reports   |
| <b>Data limitations</b>                         | None   |
| <b>Type of indicator</b>                        | Output   |
| <b>Calculation type</b>                         | Cumulative   |
| <b>Reporting cycle</b>                          | Annually   |
| <b>New indicator</b>                            | Yes  |
| <b>Desired performance</b>                      | Higher performance.  |
| <b>Indicator responsibility</b>                 | Ms Tshidi Mphahlane.   |

## LEGAL SERVICES AND LABOUR RELATIONS

|   |  |
|---|--|
| <b>Indicator title</b>                          | Number of legislation drafted.                                     |
| <b>Short definition</b>                         | Number of Drafting of Legislation Drafted and or reviewed.         |
| <b>Purpose/importance</b>                       | To minimise the risk of litigation against the department.         |
| <b>Source/collection of data</b>                | Different Directorates.  |
| <b>Method of calculation&amp; evidence type</b> | Manual count.<br>Evidence = No of Legislation drafted or reviewed. |
| <b>Data limitations</b>                         | Dependent on instructions received from client Directorates/Units. |
| <b>Type of indicator</b>                        | Efficiency.  |

|                                 |                                     |
|---------------------------------|-------------------------------------|
| <b>Calculation type</b>         | Non-Cumulative.                     |
| <b>Reporting cycle</b>          | Quarterly.                          |
| <b>New indicator</b>            | No.                                 |
| <b>Desired performance</b>      | Approved Legislation by Legislature |
| <b>Indicator responsibility</b> | M.Rakaki                            |

|  |  |
|--|--|
| <b>Indicator title</b>                           | Number of contracts drafted  |
| <b>Short definition</b>                          | Contracts drafting. Directorate would instruct LS to draft a contract to either procure goods and services from third parties.         |
| <b>Purpose/importance</b>                        | To ensure that the Department has entered in a duly binding agreement and also minimise the risk of litigation against the department. |
| <b>Source/collection of data</b>                 | Different Directorates   |
| <b>Method of calculation &amp; evidence type</b> | Copy of Contracts drafted and covering letter  |
| <b>Data limitations</b>                          | Dependent on instructions received   |
| <b>Type of indicator</b>                         | Efficiency   |
| <b>Calculation type</b>                          | Non-Cumulative   |
| <b>Reporting cycle</b>                           | Quarterly.   |
| <b>New indicator</b>                             | No   |
| <b>Desired performance</b>                       | Valid contract   |
| <b>Indicator responsibility</b>                  | M.Rakaki   |

|  |   |
|--|---|
| <b>Indicator title</b>                           | Number of contracts vetted  |
| <b>Short definition</b>                          | Contracts vetting. Directorate would instruct LS to vet a contract to either procure goods and services from third parties.           |
| <b>Purpose/importance</b>                        | To ensure that the Department has entered in a duly binding agreement and also minimise the risk of litigation against the department |
| <b>Source/collection of data</b>                 | Different Directorates  |
| <b>Method of calculation &amp; evidence type</b> | Copy of contract and covering letter.   |
| <b>Data limitations</b>                          | None  |
| <b>Type of indicator</b>                         | Efficiency  |
| <b>Calculation type</b>                          | Non-Cumulative  |
| <b>Reporting cycle</b>                           | Quarterly.  |
| <b>New indicator</b>                             | Yes   |
| <b>Desired performance</b>                       | Valid Contract  |
| <b>Indicator responsibility</b>                  | M.Rakaki  |

|  |   |
|--|---|
| <b>Indicator title</b>                           | Number of misconduct cases handled                                      |
| <b>Short definition</b>                          | Misconduct cases handled within the prescribed time-frames.             |
| <b>Purpose/importance</b>                        | To monitor unbecoming behaviour within the department.                  |
| <b>Source/collection of data</b>                 | Labour Relations Unit.  |
| <b>Method of calculation &amp; evidence type</b> | Cases resolved within prescribed time frames<br>Evidence = FOSAD Report |
| <b>Data limitations</b>                          | None.   |
| <b>Type of indicator</b>                         | Output.   |
| <b>Calculation type</b>                          | Cumulative.   |
| <b>Reporting cycle</b>                           | Quarterly.  |
| <b>New indicator</b>                             | No.   |
| <b>Desired performance</b>                       | Higher.   |
| <b>Indicator responsibility</b>                  | Mr. M. Mahlasela  |

|  |   |
|--|---|
| <b>Indicator title</b>                           | Number of grievances handled  |
| <b>Short definition</b>                          | Number of grievance cases resolved within the prescribed time   |
| <b>Purpose/importance</b>                        | To investigate grievances of employees concerning official acts or omission, and recommend appropriate remedy |
| <b>Source/collection of data</b>                 | Aggrieved employees/ Different directorates.  |
| <b>Method of calculation &amp; evidence type</b> | Grievances resolved within prescribed time frames<br>Evidence = FOSAD Report                                  |
| <b>Data limitations</b>                          | None.   |
| <b>Type of indicator</b>                         | Output  |
| <b>Calculation type</b>                          | Cumulative  |
| <b>Reporting cycle</b>                           | Quarterly   |
| <b>New indicator</b>                             | No  |
| <b>Desired performance</b>                       | Higher  |
| <b>Indicator responsibility</b>                  | Mr. M. Mahlasela  |

|  |  |
|--|--|
| <b>Indicator title</b>                           | Number of disputes managed   |
| <b>Short definition</b>                          | Number of grievance cases resolved within the prescribed time                                |
| <b>Purpose/importance</b>                        | To resolve disputes from Bargaining Councils through settlement/ conciliation or arbitration |
| <b>Source/collection of data</b>                 | Aggrieved employees/ Different directorates.   |
| <b>Method of calculation &amp; evidence type</b> | Dispute referral<br>Evidence = FOSAD Report  |
| <b>Data limitations</b>                          | None.  |
| <b>Type of indicator</b>                         | Output   |
| <b>Calculation type</b>                          | Cumulative   |
| <b>Reporting cycle</b>                           | Quarterly  |

|                                 |                  |
|---------------------------------|------------------|
| <b>New indicator</b>            | No               |
| <b>Desired performance</b>      | Higher           |
| <b>Indicator responsibility</b> | Mr. M. Mahlasela |

|  |  |
|--|--|
| <b>Indicator title</b>                           | Number of workshops managed  |
| <b>Short definition</b>                          | Conduct workshops to promote sound labour peace                                |
| <b>Purpose/importance</b>                        | To ensure that employees understand misconduct and discipline at the workplace |
| <b>Source/collection of data</b>                 | Different directorates.  |
| <b>Method of calculation &amp; evidence type</b> | Attendance Register  |
| <b>Data limitations</b>                          | None.  |
| <b>Type of indicator</b>                         | Output   |
| <b>Calculation type</b>                          | Cumulative   |
| <b>Reporting cycle</b>                           | Bi-annually  |
| <b>New indicator</b>                             | Yes  |
| <b>Desired performance</b>                       | Higher   |
| <b>Indicator responsibility</b>                  | Mr. M. Mahlasela   |

|  |  |
|--|--|
| <b>Indicator title</b>                           | Number of PAIA manual published  |
| <b>Short definition</b>                          | Section 14 manual. It informs the public about classification of information held by the department. |
| <b>Purpose/importance</b>                        | To inform the public regarding information held by the department.                                   |
| <b>Source/collection of data</b>                 | Different Directorates   |
| <b>Method of calculation &amp; evidence type</b> | Copy of signed PAIA manual   |
| <b>Data limitations</b>                          | None   |
| <b>Type of indicator</b>                         | Efficiency   |
| <b>Calculation type</b>                          | Non-Cumulative   |
| <b>Reporting cycle</b>                           | Annually   |
| <b>New indicator</b>                             | No   |
| <b>Desired performance</b>                       | Compliance with PAIA provisions  |
| <b>Indicator responsibility</b>                  | M. Rakaki  |

|                        |   |
|------------------------|---|
| <b>Indicator title</b> | Number of reports to SAHRC in terms of section 32 of PAIA |
|------------------------|---|

|   |   |
|---|---|
| <b>Short definition</b>                         | Section 32 report. To inform SAHR about a number of PAIA request received and how many were granted or refused. |
| <b>Purpose/importance</b>                       | To make available to the public information held by the Department and how it has been accessed.                |
| <b>Source/collection of data</b>                | File Register   |
| <b>Method of calculation&amp; evidence type</b> | Copy of a signed Section 32 Report  |
| <b>Data limitations</b>                         | None  |
| <b>Type of indicator</b>                        | Efficiency  |
| <b>Calculation type</b>                         | Non-Cumulative  |
| <b>Reporting cycle</b>                          | Annually  |
| <b>New indicator</b>                            | No  |
| <b>Desired performance</b>                      | Compliance with PAIA provisions   |
| <b>Indicator responsibility</b>                 | M. Rakaki   |

## MANAGEMENT ACCOUNTING

|   |  |
|---|--|
| <b>Indicator title</b>                          | Number of credible Budget statement submitted to Treasury on time.   |
| <b>Short definition</b>                         | A <b>budget statement</b> is a memo that a department prepares at the end of each year to report information about the use of finances . |
| <b>Purpose/importance</b>                       | Its importance will assist in decision making on increase/decrease budget for the following financial year.                              |
| <b>Source/collection of data</b>                | From managers.   |
| <b>Method of calculation&amp; evidence type</b> | Number:<br>Evidence = Budget statement.  |
| <b>Data limitations</b>                         | The reliability of inputs from the managers.   |
| <b>Type of indicator</b>                        | Efficiency.  |
| <b>Calculation type</b>                         | Cumulative.  |
| <b>Reporting cycle</b>                          | Annually.  |
| <b>New indicator</b>                            | No.  |

|                                 |                     |
|---------------------------------|---------------------|
| <b>Desired performance</b>      | Higher performance. |
| <b>Indicator responsibility</b> | J Motsetse.         |

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|--|--|
| <b>Indicator title</b>                           | Number of credible adjustment budget submitted to Treasury on time.  |
| <b>Short definition</b>                          | A adjustment <b>budget</b> is a memo that a department prepares at the end of each year to report information about the use of finances. |
| <b>Purpose/importance</b>                        | Its importance will assist in decision making on increase/decrease budget for the following financial year.                              |
| <b>Source/collection of data</b>                 | From managers.   |
| <b>Method of calculation &amp; evidence type</b> | Number.<br>Evidence = Adjustment Budget statement.   |
| <b>Data limitations</b>                          | The reliability of inputs from the managers.   |
| <b>Type of indicator</b>                         | Efficiency.  |
| <b>Calculation type</b>                          | Cumulative.  |
| <b>Reporting cycle</b>                           | Annually.  |
| <b>New indicator</b>                             | No .   |
| <b>Desired performance</b>                       | Higher performance.  |
| <b>Indicator responsibility</b>                  | J Motsetse.  |

|  |   |
|--|---|
| <b>Indicator title</b>                           | Number of In-Year monitoring reports submitted to Treasury on time.   |
| <b>Short definition</b>                          | Review the spending and projections.  |
| <b>Purpose/importance</b>                        | In-year monitoring provides a formal system for reviewing spending plans and priorities set for the financial year in question in the light of more up to date information. |
| <b>Source/collection of data</b>                 | System generated reports and managers .   |
| <b>Method of calculation &amp; evidence type</b> | Number<br>Evidence = IYM reports.   |
| <b>Data limitations</b>                          | The reliability of inputs from managers.  |
| <b>Type of indicator</b>                         | Efficiency.   |
| <b>Calculation type</b>                          | Cumulative.   |
| <b>Reporting cycle</b>                           | Quarterly.  |
| <b>New indicator</b>                             | No.   |
| <b>Desired performance</b>                       | Higher performance.   |
| <b>Indicator responsibility</b>                  | J Motsetse.   |

## FINANCIAL MANAGEMENT

|                         |   |
|-------------------------|---|
| <b>Indicator title</b>  | Number of annual Financial statement compiled according to prescripts.  |
| <b>Short definition</b> | Annual financial statements must consist of a statement of financial position; a statement of changes in equity; a statement of financial |



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|  | performance; a cash flow statement; an appropriation statement; notes to the appropriation statement and annual financial statement.   |
| <b>Purpose/importance</b>                        | Financial statements are formal presentations of the flow of money into, through and out of a department.  |
| <b>Source/collection of data</b>                 | Data collected from financial systems (BAS, LOGIS and PERSAL), manual reconciliations from different sections as per the prescribed templates and any other source documentation that can verify the use of figures in the statements.         |
| <b>Method of calculation &amp; evidence type</b> | The AFS template is formula based and automatically imports figures between the different worksheets in the template. The Disclosure Note is done manually as the information required is not system based.<br>Evidence = Proof of submission. |
| <b>Data limitations</b>                          | System errors resulting in unavailability of reports. Lack of integrity on information submitted by other components.  |
| <b>Type of indicator</b>                         | Measures the status of financial position, performance and equity of the department.   |
| <b>Calculation type</b>                          | Cumulative.  |
| <b>Reporting cycle</b>                           | Annual.  |
| <b>New indicator</b>                             | No.  |
| <b>Desired performance</b>                       | Higher performance.  |
| <b>Indicator responsibility</b>                  | Puleng Rantekane.  |

|  |   |
|--|---|
| <b>Indicator title</b>                           | Number of quarterly Interim Statements compiled according to prescripts.  |
| <b>Short definition</b>                          | Interim financial statements must consist of a statement of financial position; a statement of changes in equity; a statement of financial performance; a cash flow statement; an appropriation statement; notes to the appropriation statement and annual financial statement. |
| <b>Purpose/importance</b>                        | Financial statements are formal presentations of the flow of money into, through and out of a department.   |
| <b>Source/collection of data</b>                 | Data collected from financial systems (BAS, LOGIS and PERSAL), manual reconciliations from different sections as per the prescribed templates and any other source documentation (registers) that can verify the use of figures in the statements.                              |
| <b>Method of calculation &amp; evidence type</b> | The IFS template is formula based and automatically imports figures between the different worksheets I in the template. The Disclosure Note is done manually as the information required is not system based.<br>Evidence = Proof of submission                                 |
| <b>Data limitations</b>                          | System errors resulting in unavailability of reports. System errors resulting in unavailability of reports. Lack of integrity on information submitted by other components.   |

|                                 |  |
|---------------------------------|--|
| <b>Type of indicator</b>        | Measures the status of financial position, performance and equity of the department. |
| <b>Calculation type</b>         | Cumulative.  |
| <b>Reporting cycle</b>          | Annual.  |
| <b>New indicator</b>            | No.  |
| <b>Desired performance</b>      | Higher performance.  |
| <b>Indicator responsibility</b> | Puleng Rantekane.  |

## SUPPLY CHAIN MANAGEMENT

|  |  |
|--|--|
| <b>Indicator title</b>                           | Percentage of payments made to creditors within 30 days from receipts of an invoice.   |
| <b>Short definition</b>                          | All payments due to creditors must be settled within thirty (30) days from receipt of an invoice.  |
| <b>Purpose/importance</b>                        | Aims to enhance compliance with section 38(1)(f) of the Public Finance Management Act (PFMA) which requires accounting officers to settle all contractual obligations and pay all money owing, including intergovernmental claims, within the prescribed or agreed period and Treasury regulations- 8.2.3. |
| <b>Source/collection of data</b>                 | Tracking of invoice manually.  |
| <b>Method of calculation &amp; evidence type</b> | Simple count.<br>Evidence: Logistic Management System generate report for all payments made within the month and shows age (days) of each payment and we calculate using a formula.  |
| <b>Data limitations</b>                          | Correctness of reports.  |
| <b>Type of indicator</b>                         | Output.  |
| <b>Calculation type</b>                          | Non cumulative.  |
| <b>Reporting cycle</b>                           | Quarterly.   |
| <b>New indicator</b>                             | No.  |
| <b>Desired performance</b>                       | Higher performance.  |
| <b>Indicator responsibility</b>                  | Molefi Machela   |

|                         |  |
|-------------------------|--|
| <b>Indicator title</b>  | Number of days to conclude quotes/bids <ul style="list-style-type: none"> <li>• Transversal Contracts:</li> <li>• Price quotations(&lt;30000)</li> <li>• Price quotation (30000-500000)</li> <li>• Bid/Tenders.</li> </ul>             |
| <b>Short definition</b> | Is the acquisition of goods, services or works from an external source and the act of obtaining or buying goods and services which includes preparation and processing of a demand as well as the end receipt and approval of payment. |

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| <b>Purpose/importance</b>                       | To enable the department to save time, save money, reduce risk and ensure that we get the right solution to meet our business needs. |
| <b>Source/collection of data</b>                | Tracking of request Manually.  |
| <b>Method of calculation&amp; evidence type</b> | Simple count.<br>Evidence: Analysis of reports.  |
| <b>Data limitations</b>                         | Correctness of the register.   |
| <b>Type of indicator</b>                        | Output.  |
| <b>Calculation type</b>                         | Non cumulative.  |
| <b>Reporting cycle</b>                          | Quarterly.   |
| <b>New indicator</b>                            | No.  |
| <b>Desired performance</b>                      | Higher performance.  |
| <b>Indicator responsibility</b>                 | Molefi Machela   |

|   |  |
|---|--|
| <b>Indicator title</b>                          | Number of procurement plan (PP) developed.   |
| <b>Short definition</b>                         | Departmental organized procurement .   |
| <b>Purpose/importance</b>                       | Is one of the primary functions of procurement with a potential to contribute to the success of local government operations and improved service delivery. |
| <b>Source/collection of data</b>                | Needs analysis.  |
| <b>Method of calculation&amp; evidence type</b> | Needs analysis register.<br>Evidence: procurement plan   |
| <b>Data limitations</b>                         | Correctness of the information.  |
| <b>Type of indicator</b>                        | Output.  |
| <b>Calculation type</b>                         | Non Cumulative.  |
| <b>Reporting cycle</b>                          | Annually.  |
| <b>New indicator</b>                            | No.  |
| <b>Desired performance</b>                      | Higher performance.  |
| <b>Indicator responsibility</b>                 | Molefi Machela   |

|   |  |
|---|--|
| <b>Indicator title</b>                          | Percentage of procurement spend on SMME's.   |
| <b>Short definition</b>                         | 70% targeted procurement spend on SMMEs on the most procured items, by value.                                      |
| <b>Purpose/importance</b>                       | It is one of the empowerment imperatives on public procurement, to redress the unfairness of past procurement laws |
| <b>Source/collection of data</b>                | Quarterly reports, expenditure reports   |
| <b>Method of calculation&amp; evidence type</b> | Quarterly 70% Reports  |
| <b>Data limitations</b>                         | Correctness of the information.  |
| <b>Type of indicator</b>                        | Output   |
| <b>Calculation type</b>                         | Cumulative   |

|                                 |   |
|---------------------------------|---|
| <b>Reporting cycle</b>          | Quarterly   |
| <b>New indicator</b>            | No.   |
| <b>Desired performance</b>      | Higher performance, a minimum of 70% spent on SMMEs |
| <b>Indicator responsibility</b> | Mr M Machela  |

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|--|---|
| <b>Indicator title</b>                           | Number of Infrastructure procurement strategy developed.  |
| <b>Short definition</b>                          | Development of sourcing strategies for identified infrastructure projects on a project basis  |
| <b>Purpose/importance</b>                        | Ensure a collaborative, structured and systematic approach to analyzing infrastructure spend, establishing demand and understanding market dynamics; using this information to acquire goods and services effectively; and supporting Department's service delivery objectives. |
| <b>Source/collection of data</b>                 | Completed infrastructure sourcing strategies  |
| <b>Method of calculation &amp; evidence type</b> | Number of actual infrastructure procurement strategy proposals completed against the planned number   |
| <b>Data limitations</b>                          | None  |
| <b>Type of indicator</b>                         | Successful implementation of developed sourcing strategies will Be realized over the medium to long term and should result in more designated groups participating in infrastructure projects   |
| <b>Calculation type</b>                          | Count – number of proposals concluded and accepted  |
| <b>Reporting cycle</b>                           | Annually and longer (depending on the contract period)  |
| <b>New indicator</b>                             | Yes   |
| <b>Desired performance</b>                       | For 2018-19, infrastructure sourcing strategy proposals developed and accepted  |
| <b>Indicator responsibility</b>                  | Mr M Machela  |

## FLEET AND ASSET MANAGEMENT

|  |  |
|--|--|
| <b>Indicator title</b>                           | Number of stocktaking reports compiled.                    |
| <b>Short definition</b>                          | Counting and verification of departmental assets.          |
| <b>Purpose/importance</b>                        | To have an accurate asset register.                        |
| <b>Source/collection of data</b>                 | Room lists are generated from the asset register on Logis. |
| <b>Method of calculation &amp; evidence type</b> | Manual count.<br>Evidence: Report                          |
| <b>Data limitations</b>                          | Incorrect description of assets .                          |
| <b>Type of indicator</b>                         | Output.  |
| <b>Calculation type</b>                          | Cumulative.  |
| <b>Reporting cycle</b>                           | Quarterly.   |
| <b>New indicator</b>                             | No   |

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|---------------------------------|---------------------|
| <b>Desired performance</b>      | Higher performance. |
| <b>Indicator responsibility</b> | Ms B Difoloko       |

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|--|--|
| <b>Indicator title</b>                           | Number of movable asset disposal reports compiled.                                       |
| <b>Short definition</b>                          | Counting and verification of all departmental movable assets.                            |
| <b>Purpose/importance</b>                        | To have an accurate asset register.  |
| <b>Source/collection of data</b>                 | Room lists are generated from the asset register on Logis. GG schedule of leased assets. |
| <b>Method of calculation &amp; evidence type</b> | Manual count.<br>Evidence: Report  |
| <b>Data limitations</b>                          | Incorrect description of assets .  |
| <b>Type of indicator</b>                         | Output.  |
| <b>Calculation type</b>                          | Cumulative.  |
| <b>Reporting cycle</b>                           | Quarterly.   |
| <b>New indicator</b>                             | No   |
| <b>Desired performance</b>                       | Higher performance.  |
| <b>Indicator responsibility</b>                  | Ms B Difoloko  |

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|--|--|
| <b>Indicator title</b>                           | Number of facilities management plan (U-AMP) developed.              |
| <b>Short definition</b>                          | Manage departmental facilities (immovable assets)                    |
| <b>Purpose/importance</b>                        | Proper management and maintenance of immovable assets (buildings).   |
| <b>Source/collection of data</b>                 | Inspection reports and spot checks of all existing buildings         |
| <b>Method of calculation &amp; evidence type</b> | Simple count.<br>Evidence: Plan                                      |
| <b>Data limitations</b>                          | Immovable assets not properly maintained and not well accounted for. |
| <b>Type of indicator</b>                         | Output.  |
| <b>Calculation type</b>                          | Non cumulative   |
| <b>Reporting cycle</b>                           | Annually.  |
| <b>New indicator</b>                             | No.  |
| <b>Desired performance</b>                       | High performance.  |
| <b>Indicator responsibility</b>                  | Ms B Difoloko  |

|  |  |
|--|--|
| <b>Indicator title</b>                           | Number asset verification and vehicle inspection reports compiled                                    |
| <b>Short definition</b>                          | Counting and verification of all departmental movable assets (i.e. asset and vehicles)               |
| <b>Purpose/importance</b>                        | To have an accurate asset register.  |
| <b>Source/collection of data</b>                 | Room lists are generated from the asset register on Logis. GG schedule of government owned vehicles. |
| <b>Method of calculation &amp; evidence type</b> | Manual count.<br>Evidence: Report  |

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| <b>Data limitations</b>         | Incorrect and inaccurate departmental asset register. |
| <b>Type of indicator</b>        | Output.   |
| <b>Calculation type</b>         | Cumulative.   |
| <b>Reporting cycle</b>          | Quarterly.  |
| <b>New indicator</b>            | No  |
| <b>Desired performance</b>      | Higher performance.                                   |
| <b>Indicator responsibility</b> | Ms B Difoloko   |

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|--|---|
| <b>Indicator title</b>                           | Number of KCM reports compiled.                                     |
| <b>Short definition</b>                          | Monthly and quarterly PFMA compliance reports on internal controls. |
| <b>Purpose/importance</b>                        | Improve departmental key internal controls                          |
| <b>Source/collection of data</b>                 | Monthly and quarterly KCM annexures.                                |
| <b>Method of calculation &amp; evidence type</b> | Monthly and quarterly KCM annexures.                                |
| <b>Data limitations</b>                          | Weak internal controls  |
| <b>Type of indicator</b>                         | Output.   |
| <b>Calculation type</b>                          | Cumulative.   |
| <b>Reporting cycle</b>                           | Monthly and Quarterly.  |
| <b>New indicator</b>                             | No  |
| <b>Desired performance</b>                       | Higher performance.   |
| <b>Indicator responsibility</b>                  | Ms B Difoloko   |

## CORPORATE SERVICES

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| <b>Indicator title</b>                           | Number of HIV Testing Services (HTS) rendered.   |
| <b>Short definition</b>                          | To conduct 2 HTS campaigns so as to determine the health status of employees.  |
| <b>Purpose/importance</b>                        | To refer the infected and affected employees for treatment and support.  |
| <b>Source/collection of data</b>                 | Reports from the Service Provider.   |
| <b>Method of calculation &amp; evidence type</b> | Guided by HIV testing policy guideline, National Strategic Plan (NSP) and creating organisational culture of self-care.<br><br>Post campaign reports and event schedules |
| <b>Data limitations</b>                          | Some information might not be accurate   |
| <b>Type of indicator</b>                         | Output   |
| <b>Calculation type</b>                          | Cumulative.  |
| <b>Reporting cycle</b>                           | Bi-annually.   |
| <b>New indicator</b>                             | No   |
| <b>Desired performance</b>                       | HTS conducted  |

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|---------------------------------|---------------------------------------|
| <b>Indicator responsibility</b> | Deputy Director: EHWP Ms. LGB. Molefe |
|---------------------------------|---------------------------------------|

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| <b>Indicator title</b>                           | Number of Health Risk Assessments (HRA) conducted.   |
| <b>Short definition</b>                          | To conduct 2 HRA campaigns so as to identify and support employees who are chronically ill.  |
| <b>Purpose/importance</b>                        | To refer employees for treatment and support to the relevant service provider  |
| <b>Source/collection of data</b>                 | Reports from the Service Provider  |
| <b>Method of calculation &amp; evidence type</b> | Guided by Health and Productivity Management (HPM) policy<br>National Strategic Plan (NSP) and creating organisational culture of self-care<br>Post campaign reports and event schedules |
| <b>Data limitations</b>                          | None   |
| <b>Type of indicator</b>                         | Output   |
| <b>Calculation type</b>                          | Cumulative.  |
| <b>Reporting cycle</b>                           | Bi-annually.   |
| <b>New indicator</b>                             | No   |
| <b>Desired performance</b>                       | HRA conducted  |
| <b>Indicator responsibility</b>                  | Assistant Director: EHW (Ms. L.GB.Molefe)  |

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|--|--|
| <b>Indicator title</b>                           | Number of Gender Equality Strategic Framework Plan submitted.  |
| <b>Short definition</b>                          | The planning of departmental programmes and projects in line with Gender Equality Strategic Framework (GESF) |
| <b>Purpose/importance</b>                        | Ensure empowerment and advancement of women through gender mainstreaming strategies                          |
| <b>Source/collection of data</b>                 | GESF Implementation Plan   |
| <b>Method of calculation &amp; evidence type</b> | DPSA Guideline requires GESF Plan as well as timely submission.<br>Evidence = Implementation Plan.           |
| <b>Data limitations</b>                          | None   |
| <b>Type of indicator</b>                         | Output based   |
| <b>Calculation type</b>                          | Non-cumulative   |
| <b>Reporting cycle</b>                           | Annually   |
| <b>New indicator</b>                             | No   |
| <b>Desired performance</b>                       | GESF activities coordinated  |
| <b>Indicator responsibility</b>                  | Deputy Director: Gender, Youth and Disability  |

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| <b>Indicator title</b>  | Number of Gender Equality Strategic Framework Report submitted.                       |
| <b>Short definition</b> | Reporting on Departmental campaigns of the Gender Equality Strategic Framework (GESF) |

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| <b>Purpose/importance</b>                        | Ensuring empowerment of women through Gender mainstreaming  |
| <b>Source/collection of data</b>                 | GESF Implementation report  |
| <b>Method of calculation &amp; evidence type</b> | DPSA Guideline requires GESF reports as well as timely submission.<br>Evidence = Implementation report. |
| <b>Data limitations</b>                          | None  |
| <b>Type of indicator</b>                         | Output based  |
| <b>Calculation type</b>                          | Non-cumulative  |
| <b>Reporting cycle</b>                           | Bi-Annually   |
| <b>New indicator</b>                             | No  |
| <b>Desired performance</b>                       | GESF activities coordinated   |
| <b>Indicator responsibility</b>                  | Deputy Director: Gender, Youth and Disability   |

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| <b>Indicator title</b>                           | Number of Job Access Strategic Framework Plan submitted.  |
| <b>Short definition</b>                          | The planning of departmental programmes and projects in line with Job Access Strategic Framework (JASF).                            |
| <b>Purpose/importance</b>                        | To ensure inclusion of persons with disabilities in all design, planning, implementation and monitoring of policies and programmes. |
| <b>Source/collection of data</b>                 | Approved JASF Plan.   |
| <b>Method of calculation &amp; evidence type</b> | DPSA Guideline requires annual plan on JASF as well as timely submission.<br>Evidence = Implementation Plan.                        |
| <b>Data limitations</b>                          | None  |
| <b>Type of indicator</b>                         | Output based  |
| <b>Calculation type</b>                          | Non-cumulative  |
| <b>Reporting cycle</b>                           | Annually  |
| <b>New indicator</b>                             | No  |
| <b>Desired performance</b>                       | JASF activities coordinated   |
| <b>Indicator responsibility</b>                  | Deputy Director: Gender, Youth and Disability   |

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|---------------------------|--|
| <b>Indicator title</b>    | Number of Job Access Strategic Framework Report submitted to DPSA  |
| <b>Short definition</b>   | Reporting of departmental programmes and projects in line with Job Access Strategic Framework.                             |
| <b>Purpose/importance</b> | Reporting on innovative interventions that seek to introduce measures which departments need to put in place to ensure the |



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|  | public service is accessible, accommodating and inclusive of people with disabilities.                           |
| <b>Source/collection of data</b>                 | Approved JASF reports.   |
| <b>Method of calculation &amp; evidence type</b> | DPSA Guideline requires annual report on JASF as well as timely submission.<br>Evidence = Implementation report. |
| <b>Data limitations</b>                          | None   |
| <b>Type of indicator</b>                         | Output based   |
| <b>Calculation type</b>                          | Non-cumulative   |
| <b>Reporting cycle</b>                           | Annually   |
| <b>New indicator</b>                             | No   |
| <b>Desired performance</b>                       | JASF activities coordinated  |
| <b>Indicator responsibility</b>                  | Deputy Director: Gender, Youth and Disability  |

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| <b>Indicator title</b>                           | Number of Youth accord Plan developed.   |
| <b>Short definition</b>                          | The National Youth Accord Plan aims to facilitate, coordinate and mainstream youth programmes within the department (both internally and externally).                      |
| <b>Purpose/importance</b>                        | To give effect to specific mandates in respect of the coordination of programmes focusing on youth.  |
| <b>Source/collection of data</b>                 | Approved Youth Implementation Plan.  |
| <b>Method of calculation &amp; evidence type</b> | Guided by the National Youth Policy 2015-2020, the department is required to submit an annual plan on YAP as well as timely submission.<br>Evidence = Implementation plan. |
| <b>Data limitations</b>                          | None   |
| <b>Type of indicator</b>                         | Output   |
| <b>Calculation type</b>                          | Non-cumulative   |
| <b>Reporting cycle</b>                           | annually   |
| <b>New indicator</b>                             | No   |
| <b>Desired performance</b>                       | YAP activities coordinated   |
| <b>Indicator responsibility</b>                  | Deputy Director: Gender, Youth and Disability  |

|                                  |   |
|----------------------------------|---|
| <b>Indicator title</b>           | Number of Youth accord report developed.  |
| <b>Short definition</b>          | The National Youth Accord Report aims to report on the facilitation and mainstreaming of youth programmes within the department (both internally and externally). |
| <b>Purpose/importance</b>        | To report on the specific mandates implemented in respect of the programmes and projects focusing on youth.   |
| <b>Source/collection of data</b> | Approved Youth Implementation Report.   |

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| <b>Method of calculation &amp; evidence type</b> | Guided by the National Youth Policy 2015-2020, the department is required to submit bi-annual reports on YAP as well as timely submission.<br>Evidence = Implementation reports. |
| <b>Data limitations</b>                          | None   |
| <b>Type of indicator</b>                         | Output   |
| <b>Calculation type</b>                          | Non-cumulative   |
| <b>Reporting cycle</b>                           | Bi-annually  |
| <b>New indicator</b>                             | No   |
| <b>Desired performance</b>                       | YAP activities coordinated   |
| <b>Indicator responsibility</b>                  | Deputy Director: Gender, Youth and Disability  |

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|--|---|
| <b>Indicator title</b>                           | Number of posts evaluated.  |
| <b>Short definition</b>                          | Evaluate vacant and filled posts in the Department  |
| <b>Purpose/importance</b>                        | To evaluate the posts in order to determine the salary level before they can be advertised and filled |
| <b>Source/collection of data</b>                 | Job evaluation interviews with relevant Manager/ Supervisor<br>Provincial JE Strategy                 |
| <b>Method of calculation &amp; evidence type</b> | Job evaluation report available   |
| <b>Data limitations</b>                          | Information from the relevant Manager regarding the post might not be sufficient nor relevant         |
| <b>Type of indicator</b>                         | Output  |
| <b>Calculation type</b>                          | Non-cumulative  |
| <b>Reporting cycle</b>                           | Monthly   |
| <b>New indicator</b>                             | No  |
| <b>Desired performance</b>                       | Salary levels of posts determined   |
| <b>Indicator responsibility</b>                  | Ms. N. Mopeli (Deputy Director: OD)   |

|                                  |  |
|----------------------------------|--|
| <b>Indicator title</b>           | Number of organisational structure developed.  |
| <b>Short definition</b>          | Develop the organisational structure of the Department   |
| <b>Purpose/importance</b>        | To develop the organisational structure that is in line with the strategy and mandates of the Department |
| <b>Source/collection of data</b> | Mandates of the Department<br>Interviews with SMS members  |

|  |   |
|--|---|
|  | Desktop research  |
| <b>Method of calculation &amp; evidence type</b> | Organisational structure available  |
| <b>Data limitations</b>                          | Information from the SMS members regarding the organisational structure might not be sufficient |
| <b>Type of indicator</b>                         | Output  |
| <b>Calculation type</b>                          | Non-cumulative  |
| <b>Reporting cycle</b>                           | Annually  |
| <b>New indicator</b>                             | No  |
| <b>Desired performance</b>                       | Organisational structure available  |
| <b>Indicator responsibility</b>                  | Ms. N. Mopeli (Deputy Director: OD)   |

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|--|---|
| <b>Indicator title</b>                           | Number of reports on health and safety inspections conducted.   |
| <b>Short definition</b>                          | To conduct 2 Bi-annual health and safety inspections in all departmental institutions                       |
| <b>Purpose/importance</b>                        | To ensure a safe environment  |
| <b>Source/collection of data</b>                 | SHERQ Officer conduct OHS inspection in all departmental institutions                                       |
| <b>Method of calculation &amp; evidence type</b> | Guided by OHS Act no 83 of 1993<br><br>Reports from the OHS Officer or<br>Reports from Department of Labour |
| <b>Data limitations</b>                          | None  |
| <b>Type of indicator</b>                         | Output.   |
| <b>Calculation type</b>                          | Cumulative.   |
| <b>Reporting cycle</b>                           | Bi-annually.  |
| <b>New indicator</b>                             | No  |
| <b>Desired performance</b>                       | OHS inspection conducted  |
| <b>Indicator responsibility</b>                  | Deputy Director: EHWP (Ms. L.GB. Molefe)  |

|  |  |
|--|--|
| <b>Indicator title</b>                           | Number of workshops on change management conducted.  |
| <b>Short definition</b>                          | Coordinating the workshops on change management.   |
| <b>Purpose/importance</b>                        | To equip employees with the requisite knowledge and skills   |
| <b>Source/collection of data</b>                 | Attendance registers   |
| <b>Method of calculation &amp; evidence type</b> | By counting the number of employees who attended the workshops. Attendance registers to serve as evidence type       |
| <b>Data limitations</b>                          | The number of workshop attendees might be under-stated due to none-capturing of attendee's details on the registers. |
| <b>Type of indicator</b>                         | Output   |
| <b>Calculation type</b>                          | Non-cumulative   |
| <b>Reporting cycle</b>                           | Bi-annually  |

|                                 |   |
|---------------------------------|---|
| <b>New indicator</b>            | Yes   |
| <b>Desired performance</b>      | 2 workshop sessions on change management conducted. |
| <b>Indicator responsibility</b> | Deputy Director: HRD (Mr M Segopa)                  |