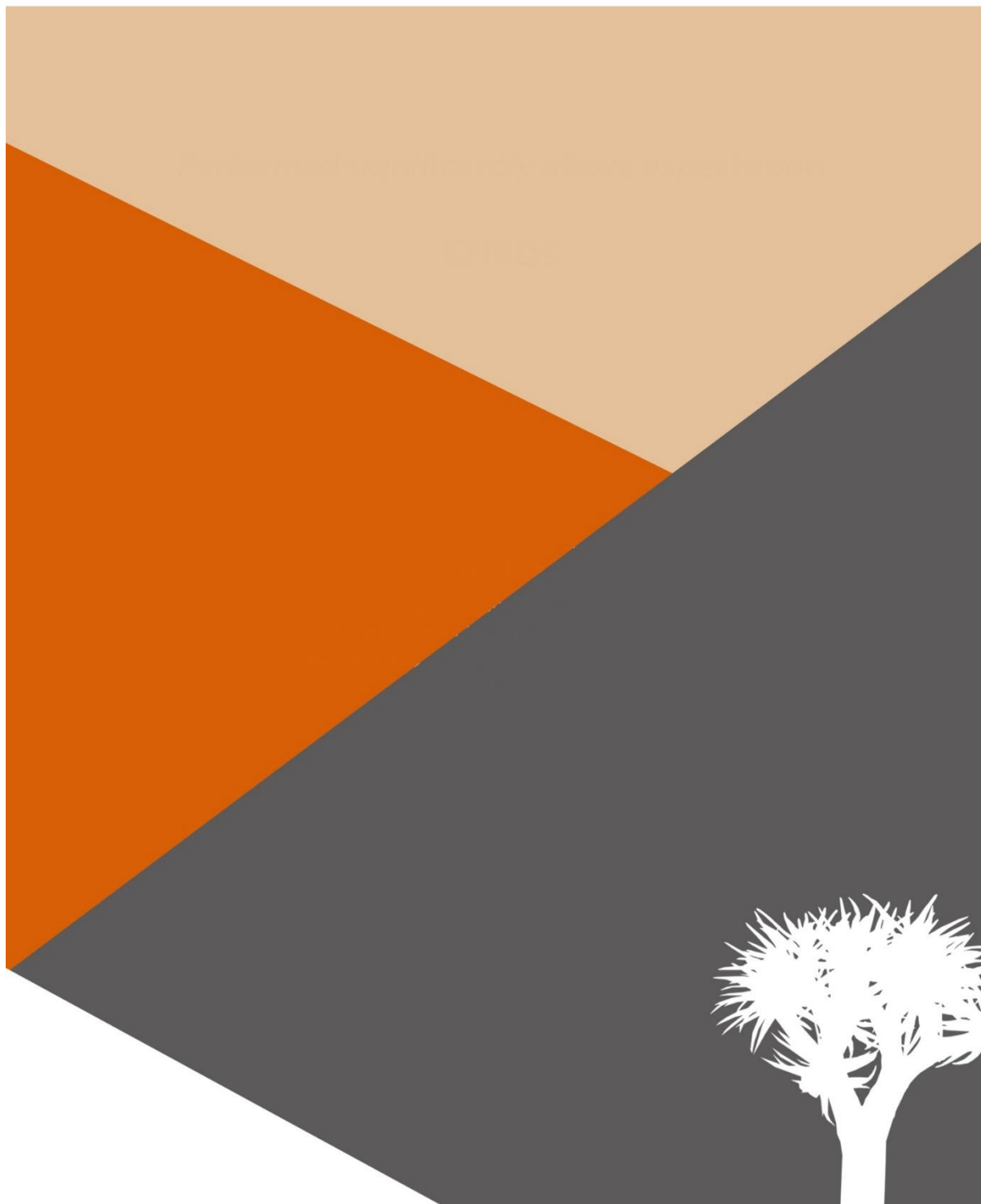


Annexure
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Province of the
Northern Cape
REPUBLIC OF SOUTH AFRICA



Technical Indicator Description

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1. ADMINISTRATION

1.1 Premier Support

Indicator Title	1.1.1 Number of Premier's statutory and political obligations met																			
Short Definition	This indicator assists the Premier to meet section 125 of the Constitution.																			
Purpose / Importance	Effective running of the Provincial Government in order to fulfil the electoral mandate, constitution mandate and Provincial Government imperatives and the 14 outcomes implementation.																			
Source / Collection of Data	<p>Supporting documentation for the 16 engagements are in the form of minutes, attendance registers, collaborating source documentation for existence of events such as travel and accommodation expenses, catering, venue and facilities etc. and photographs.</p> <p>This evidence will be obtained from relevant affected units such Aids Council, EXCO Secretariat, DG Support, Finance, Communication Services and others.</p>																			
Method of Calculation	<p>Number of engagements counted. The engagements are shown below (per quarter):</p> <table border="1" data-bbox="512 797 1489 1429"> <thead> <tr> <th data-bbox="512 797 991 875">Quarter 1 (total 5 Engagements)</th> <th data-bbox="991 797 1489 875">Quarter 2 (total 4 Engagements)</th> </tr> </thead> <tbody> <tr> <td data-bbox="512 875 991 954">3 x EXCO (Executive Council) (Outreach)</td> <td data-bbox="991 875 1489 954">3 x EXCO (Executive Council) (Outreach)</td> </tr> <tr> <td data-bbox="512 954 991 1032">1 x PCA (Provincial Council on Aids)</td> <td data-bbox="991 954 1489 1032">1 x PCA (Provincial Council on Aids)</td> </tr> <tr> <td data-bbox="512 1032 991 1111">1 x Budget Speech May/June</td> <td data-bbox="991 1032 1489 1111"></td> </tr> <tr> <td data-bbox="512 1111 991 1189"></td> <td data-bbox="991 1111 1489 1189"></td> </tr> <tr> <th data-bbox="512 1189 991 1267">Quarter 3 (total 3 Engagements)</th> <th data-bbox="991 1189 1489 1267">Quarter 4 (total 4 Engagements)</th> </tr> <tr> <td data-bbox="512 1267 991 1346">2 x EXCO (Executive Council) (Outreach)</td> <td data-bbox="991 1267 1489 1346">2 x EXCO (Executive Council) (Outreach)</td> </tr> <tr> <td data-bbox="512 1346 991 1424">1 x PCA (Provincial Council on Aids)</td> <td data-bbox="991 1346 1489 1424">1 x PCA (Provincial Council on Aids)</td> </tr> <tr> <td data-bbox="512 1424 991 1503"></td> <td data-bbox="991 1424 1489 1503">1 x State of the Province Address (SOPA)</td> </tr> </tbody> </table> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the average of validated output of all 4 quarters.</p>		Quarter 1 (total 5 Engagements)	Quarter 2 (total 4 Engagements)	3 x EXCO (Executive Council) (Outreach)	3 x EXCO (Executive Council) (Outreach)	1 x PCA (Provincial Council on Aids)	1 x PCA (Provincial Council on Aids)	1 x Budget Speech May/June				Quarter 3 (total 3 Engagements)	Quarter 4 (total 4 Engagements)	2 x EXCO (Executive Council) (Outreach)	2 x EXCO (Executive Council) (Outreach)	1 x PCA (Provincial Council on Aids)	1 x PCA (Provincial Council on Aids)		1 x State of the Province Address (SOPA)
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	1 x State of the Province Address (SOPA)																			
Data Limitations	None provided that the diary is managed properly. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not																			

	adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Effectiveness indicator
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Better functioning of the Provincial Government resulting in the fulfilment of the electoral mandate, constitution mandate and Provincial Government imperatives and the 12 outcomes implementation.
Indicator responsibility	Chief of Staff in Premier's Office

1.2 DG SUPPORT

1.2.1 Director General

Indicator Title	1.2.1.1 Compliance with the planning framework
Short Definition	This indicator refers to the department complying with the framework on performance information.
Purpose / Importance	To ensure that the Director General, as the Accounting Officer of the department provides/gives strategic direction and complies with legislation
Source / Collection of Data	The final approved Strategic Plan and Annual Performance Plan for the department will be the evidence of compliance for the Planning Framework. Furthermore, the documentary evidence for the submission of the aforementioned 2 (two) documents within the stipulated time frames will be available. (Should Strategic Plan be reviewed during 2017-18, the reviewed strategic plan for the current 2014-2019 government term of government will be evidence)
Method of Calculation	One (1) Strategic Plan and one (1) Annual Performance Plan <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4 th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4 th quarter.
Data Limitations	None. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	No
Desired performance	Compliance with the strategic planning framework.

Indicator Title	1.2.1.2 MPAT level obtained by the Office of the Premier on Governance and Accountability
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Short Definition	This indicator is an indication of the department complying fully with relevant legal/ regulatory requirements.
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Purpose / Importance	It gives an indication of the overall level attained by the OTP for MPAT- Key Performance Area number 2 thereby showing its ability to effectively manage its Governance and Accountability for achievement of departmental objectives as set out in departmental strategic and annual plans.
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Source / Collection of Data	Moderated DPME MPAT results report.
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Method of Calculation	<p>The steps in the assessment are as follows:</p> <ol style="list-style-type: none"> 1. Secondary data collection and first-round performance assessments by department; 2. A self-assessment conducted by the department and submission of data to DPME; 3. A validation process is done by DPME based on the completeness of the self-assessment and the data submitted; 4. A subject matter expert conducts an external moderation on the quality of the findings in the previous steps. The moderator, that is the Assessment Panel or subject experts, will review the information and in engagement with the respective department select its own assessment for each qualitative statement and comment where necessary. <p>The first score is based on secondary data inputs (e.g. Audit Reports), the next score is based on the results of the completed self-assessment questionnaire and the last (final) score is a moderated score which is the subject expert rating after consideration of secondary data analysis, the self-assessment score and evidence provided by the department.</p>
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The scores are colour-coded as in the figure below:

Level	Description	Level	Description
Level 1	Department is non-compliant with legal/regulatory requirements	Level 3	Department is fully compliant with legal/regulatory requirements
Level 2	Department is partially compliant with legal/regulatory requirements	Level 4	Department is fully compliant with legal regulatory requirements and is doing things smartly

A department that scores at Level 1 or Level 2 for a standard is non-compliant with the minimum legal prescripts in that management area and is performing poorly in terms of its management practices in that management area. On the other hand, a department that scores at Level 3 is compliant with the legal prescripts in that management area. A Level 4 department is compliant and operating smartly in terms of its management practices in that management area.

	<p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4th quarter.</p>
Data Limitations	<p>Inaccurate data and incomplete evidence as well as deficiencies in capturing and uploading of evidence and information for assessment/moderation can influence the score negatively</p> <p>Delays in issuing final scores by DPME will result in un-moderated results being reported. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.</p>
Type of Indicator	Qualitative Outcome
Calculation type	Non-Cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	No
Desired performance	Targeted performance (level 3)
Indicator responsibility	Senior Manager: DG Support

Indicator Title	1.2.1.3 Number of monthly minutes reflecting strategic decisions taken at Senior Management Level													
Short Definition	This indicator is an indication of decision making regarding strategy implementation.													
Purpose / Importance	To track progress on the strategic implementation in the organisation.													
Source / Collection of Data	<p>Inputs from the members / units on Office of the Premier specific matters. / Policy directives / guidelines from structures such as EXCO, FOSAD, DPSA, Treasury Compliance Prescripts contained in the PSA, PSR, SMS, PMDS etc.</p> <p>The evidence for the indicator will be attendance registers, minutes, and any other collaborating supporting documentation deemed appropriate.</p>													
Method of Calculation	<p>Number of minutes counted. The meetings are shown below (per quarter):</p> <table border="1"> <thead> <tr> <th>Quarter 1 (total 7 Strategic decisions meetings)</th> <th>Quarter 2 (total 7 Strategic decisions meetings)</th> </tr> </thead> <tbody> <tr> <td>3 x SMT (Senior Management Team)</td> <td>3 x SMT (Senior Management Team)</td> </tr> <tr> <td>3 x HOD (Head of Departments)</td> <td>3 x HOD (Head of Departments)</td> </tr> <tr> <td>1 x TMC (Top Management Committee)</td> <td>1 x TMC (Top Management Committee)</td> </tr> <tr> <td></td> <td></td> </tr> <tr> <th>Quarter 3 (total 5 Strategic decisions meetings)</th> <th>Quarter 4 (total 5 Strategic decisions meetings)</th> </tr> </tbody> </table>		Quarter 1 (total 7 Strategic decisions meetings)	Quarter 2 (total 7 Strategic decisions meetings)	3 x SMT (Senior Management Team)	3 x SMT (Senior Management Team)	3 x HOD (Head of Departments)	3 x HOD (Head of Departments)	1 x TMC (Top Management Committee)	1 x TMC (Top Management Committee)			Quarter 3 (total 5 Strategic decisions meetings)	Quarter 4 (total 5 Strategic decisions meetings)
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3 x SMT (Senior Management Team)	3 x SMT (Senior Management Team)													
3 x HOD (Head of Departments)	3 x HOD (Head of Departments)													
1 x TMC (Top Management Committee)	1 x TMC (Top Management Committee)													
Quarter 3 (total 5 Strategic decisions meetings)	Quarter 4 (total 5 Strategic decisions meetings)													

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	2 x HOD (Head of Departments)	2 x HOD (Head of Departments)
	1 x TMC (Top Management Committee)	1 x TMC (Top Management Committee)
	<p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>	
Data Limitations	Circumstances which demand a deviation from the SMT Plan based on performance of the source mentioned. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.	
Type of Indicator	Output	
Calculation type	Cumulative	
Reporting cycle	Quarterly	
New indicator	Yes	
Desired performance	All strategic decisions are successfully implemented.	
Indicator responsibility	Senior Manager: DG Support	

Indicator Title	1.2.1.4 Number of risk management documents approved by the Accounting Officer
Short Definition	This indicator is an indication of compliance with section 38 (a) (i) of the PFMA.
Purpose / Importance	To ensure that all risk and strategic documents are approved by the Accounting Officer.
Source / Collection of Data	Inputs from the HOD Forums Policy directives / guidelines from structures such as EXCO, FOSAD, DPISA, Treasury Compliance Prescripts contained in the PSA, PSR, SMS, PMDS etc. The evidence to the indicator will be the approved risk register, risk management policy and strategy, as well as any other collaborating supporting documentation deemed appropriate.
Method of Calculation	Number of approved risk management documents <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to

	agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 2 nd quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 2 nd quarter.
Data Limitations	Delay in approval of documents, consultation process delayed, quorum not formed during the consultation process. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (2nd Quarter)
New indicator	Yes
Desired performance	Compliance with the Risk Management Framework.
Indicator responsibility	Senior Manager: DG Support

1.2.2 Security & Records Management

Indicator Title	1.2.2.1 Number of units monitored to check compliance with Minimum Information Security Standards (MISS) in the Office of the Premier
Short Definition	This indicator is an indication of compliance with security, classification and referencing of documents.
Purpose / Importance	Compliance with the Minimum Information Security Standards (MISS) with regard to the management and classification of documentation.
Source / Collection of Data	Physical inspection questionnaire of the 16 units Photographs
Method of Calculation	4 units per quarter. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data Limitations	Non-classification of documents. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data

	sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	To ensure that documents and information are referenced as well as classified in units.
Indicator responsibility	Senior Manager: Security and Records Management

Indicator Title																																														
1.2.2.2 Number of Provincial events provided with security management support																																														
Short Definition	This is an indicator is an indication of the security management of major provincial events.																																													
Purpose / Importance	This indicator ensures that major provincial events and projects are properly co-ordinated by Office of the Premier with regards to security.																																													
Source / Collection of Data	The evidence for the indicator will be invitations, agendas, photographs, progress reports, as well as any other collaborating supporting documentation deemed appropriate.																																													
Method of Calculation	<p>Security co-ordination reports counted.</p> <p>The departments that will be coordinated and assisted in their event/projects include but are not limited to the ones as shown below (per quarter):</p> <table border="1"> <thead> <tr> <th></th> <th>EVENT</th> <th>DEPARTMENTS</th> </tr> </thead> <tbody> <tr> <td colspan="3">QUARTER 1</td> </tr> <tr> <td>1</td> <td>Solar panel street lighting</td> <td>Office of the Premier</td> </tr> <tr> <td>2</td> <td>Provincial Call to Action</td> <td>Office of the Premier</td> </tr> <tr> <td>3</td> <td>Women's Day preparation</td> <td>Office of the Premier</td> </tr> <tr> <td colspan="3">QUARTER 2</td> </tr> <tr> <td>4</td> <td>60th Anniversary Women's Day</td> <td>Office of the Premier / Sports, Arts & Culture</td> </tr> <tr> <td>5</td> <td>Exco Outreach Program</td> <td>Office of the Premier</td> </tr> <tr> <td colspan="3">QUARTER 3</td> </tr> <tr> <td>6</td> <td>International World Aids Day</td> <td>Office of the Premier / Health</td> </tr> <tr> <td>7</td> <td>International Anti-Corruption Day</td> <td>Office of the Premier</td> </tr> <tr> <td>8</td> <td>6 Days of Activism Campaign for No Violence Against Women and Children</td> <td>Office of the Premier</td> </tr> <tr> <td colspan="3">QUARTER 4</td> </tr> <tr> <td>9</td> <td>State Of The Province Address (SOPA)</td> <td>Office of the Premier</td> </tr> <tr> <td>10</td> <td>Government</td> <td>Office of the Premier / South African</td> </tr> </tbody> </table>		EVENT	DEPARTMENTS	QUARTER 1			1	Solar panel street lighting	Office of the Premier	2	Provincial Call to Action	Office of the Premier	3	Women's Day preparation	Office of the Premier	QUARTER 2			4	60th Anniversary Women's Day	Office of the Premier / Sports, Arts & Culture	5	Exco Outreach Program	Office of the Premier	QUARTER 3			6	International World Aids Day	Office of the Premier / Health	7	International Anti-Corruption Day	Office of the Premier	8	6 Days of Activism Campaign for No Violence Against Women and Children	Office of the Premier	QUARTER 4			9	State Of The Province Address (SOPA)	Office of the Premier	10	Government	Office of the Premier / South African
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	Security Audits (SAPS/SSA)	Police Services / Transport, Safety & Liaison, State Security Agency (SSA)(NIA-National Intelligent Agency)
	11 International Women's Day	Office of the Premier / Sports, Arts & Culture
	12 Human Rights Day	Office of the Premier / Sports, Arts & Culture
	13 World TB Day	Office of the Premier / Health
	<p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>	
Data Limitations	No data limitation. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.	
Type of Indicator	Output	
Calculation type	Cumulative	
Reporting cycle	Quarterly	
New indicator	Yes	
Desired performance	To ensure major provincial events and projects are satisfactorily coordinated on security matters.	
Indicator responsibility	Senior Manager: Security and Records Management	

Indicator Title	1.2.2.3 Percentage of staff screened for employment suitability
Short Definition	This indicator is an indication of compliance with DPSA regulations on appointments.
Purpose / Importance	This indicator ensures that all new staff are screened for employment suitability.
Source / Collection of Data	HRA was consulted on the number of potential posts to be filled in 2017/18 financial year after taking into account some factors associated with recruitment. The evidence of the indicator will be State Security Agency (SSA) reports, vetting reports from the appointed service provider, as well as any other collaborating supporting documentation deemed appropriate.
Method of Calculation	Percentage of all additional staff screened counted <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4 th quarter by a different team which is independent of the validating quarterly outputs. This internal control

	procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4 th quarter.
Data Limitations	The rate in which posts are being field The slow turnaround time of the State Security Agency. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	Yes
Desired performance	To ensure compliance with DPSA regulations on employee suitability.
Indicator responsibility	Senior Manager: Security and Records Management

Indicator Title	1.2.2.4 Number of departments monitored on the implementation of the anti-corruption framework
Short Definition	This indicator relates to the capacity development on anti-corruption capability.
Purpose / Importance	To ensure that provincial departments have functional anti-corruption units. Furthermore, this indicator ensures that departments are familiar with anti-corruption procedures.
Source / Collection of Data	Reports on provincial departments by Office of the Premier indicating that training on anti-corruption that was conducted to officials in departments, one-on-one awareness sessions to be held in departments, and any relevant supporting documentation.
Method of Calculation	Number of departments counted <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data Limitations	To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative

Reporting cycle	Quarterly
New indicator	Yes
Desired performance	To ensure that provincial departments comply with the Anti-corruption Strategy.
Indicator responsibility	Senior Manager: Security and Records Management

Indicator Title	
1.2.2.5 Report on anti-corruption cases resolved in the Northern Cape Provincial Administration	
Short Definition	This indicator refers to the coordination of anti-corruption in the provincial administration.
Purpose / Importance	This indicator assists the provincial administration on the status and progress regarding the resolution of anti-corruption cases.
Source / Collection of Data	Provincial departmental reports, reports of PSC (Public Service Commission).
Method of Calculation	Report on anti-corruption cases resolved <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4 th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4th quarter.
Data Limitations	Dependency on departments to provide reports. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	Yes
Desired performance	Anti-corruption report of cases resolved
Indicator responsibility	Senior Manager: Security and Records Management

1.2.3 Provincial Council on Aids - Secretariat

Indicator Title	
1.2.3.1 Number of reports on the functionality of the Provincial Council on AIDS	
Short Definition	This indicator refers to the secretariat support given to the Provincial Council on AIDS.
Purpose / Importance	This indicator assists in the strengthening of governance, coordination and institutional arrangements for the provincial HIV/AIDS responses.
Source / Collection of Data	The four quarterly reports include some of the following reporting items: - Meetings of the Provincial Council on Aids (PCA) and its substructures; namely, Civil society forum, Partner's forum; Inter departmental Committee;

	<ul style="list-style-type: none"> - Meetings of the District AIDS and Local AIDS Council's; and - Any issue regarding functionality of PCA at district and local levels that management may deem appropriate to report to the users. Agenda, Attendance register, and minutes
Method of Calculation	<p>Number of reports counted</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	None. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Effectiveness indicator
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	A functional Provincial Council on AIDS and its substructures.
Indicator responsibility	Unit Head, EXCO Secretariat, Accounting Officer and the Executing Authority

Indicator Title	1.2.3.2 Number of reports on the implementation of Provincial Strategic Plan on AIDS
Short Definition	This indicator refers to the tracking of progress on implementation of provincial strategic plans on Aids.
Purpose / Importance	This indicator assists in the strengthening of governance, coordination and institutional arrangements for the provincial HIV/AIDS responses.
Source / Collection of Data	The four quarterly progress reports on the implementation of Provincial Strategic Plan on AIDS.
Method of Calculation	<p>Number of reports counted</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>

Data Limitations	Reliance on tertiary information sources from PCA sectors. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Effectiveness indicator
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Sectors (Government, Business sector, Labour and Civil Society) meet their indicator requirements as per the M&E framework.
Indicator responsibility	Unit Head

1.3 EXCO Secretariat

Indicator Title	1.3.1 Number of reports on Executive Council engagements
Short Definition	This indicator assists the Premier to meet section 125 of the Constitution.
Purpose / Importance	This indicator assists in the provision of strategic, policy and operational support to the Executive Council through secretarial services, programme and decision management and implementation to enable Executive Council Clusters to function optimally.
Source / Collection of Data	The four quarterly reports may include the following reporting items: <ul style="list-style-type: none"> - Executive council meetings; and - Executive council outreach programmes. The evidence will be EXCO minutes, attendance registers, photographs during EXCO outreach and any other collaborating supporting documentation.
Method of Calculation	Number of reports counted <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data Limitations	None To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Fully supported EXCO council resulting in better decision making and

	decision implementation.
Indicator responsibility	Senior Manager: EXCO Secretariat

Indicator Title	1.3.2 Number of reports on Cluster engagements
Short Definition	This indicator assists the Premier to meet section 125 of the Constitution.
Purpose / Importance	This indicator assists in the provision of strategic, policy and operational support to the Executive Council through secretarial services, programme and decision management and implementation to enable Executive Council Clusters to function optimally.
Source / Collection of Data	The four quarterly reports may include the following reporting items: <ul style="list-style-type: none"> - Governance & Administration (G&A) cluster meetings; - Economic cluster meetings; and - Social cluster meetings.
Method of Calculation	Number of reports counted <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data Limitations	None To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Better functioning of the EXCO clusters resulting improved decision making and decision implementation.
Indicator responsibility	Senior Manager: EXCO Secretariat

1.4 Financial Management

Indicator Title	1.4.1 Compliance with financial accounting reporting requirements and relevant accounting legislation and prescripts (with no material findings)
Short Definition	This indicator is an indication that the Annual Financial Statements are in compliance with section 40 of the PFMA.
Purpose / Importance	This indicator contributes to positive audit outcomes in the achievement of Outcome 12 objectives.
Source / Collection of Data	The evidence will be 1 Audited Annual Financial Statements with no material audit restatements in compliance with section 40 (1) (b) of the PFMA.

	<u>In respect of preceding financial year.</u>
Method of Calculation	One Annual Financial Statement counted. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 1 st quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 1 st quarter.
Data Limitations	None To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Outcome
Calculation type	Non-Cumulative
Reporting cycle	Annually (1 st quarter)
New indicator	No
Desired performance	Compliance with relevant legislation and financially unqualified audit opinions with no material audit restatements.
Indicator responsibility	Chief Financial Officer

Indicator Title	1.4.2 Percentage of uncontested invoices paid within 30 days of receipt date
Short Definition	This indicator is an indication of compliance with the PMFA and the Treasury Regulations.
Purpose / Importance	This indicator contributes to positive audit opinion outcomes in the achievement of Outcome 12 objectives.
Source / Collection of Data	The evidence will be the monthly return to Provincial Treasury in the form of Instruction note 34.
Method of Calculation	Numerator: Number of unopposed invoices paid within 30 days per quarter Denominator: Total number of unopposed invoices received per quarter Calculation: Numerator divided by denominator multiplied by 100 <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters divided by 4..

Data Limitations	The availability and uptime of BAS system, LOGIS system and its accurate updating To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Outcome
Calculation type	Non-Cumulative
Reporting cycle	Quarterly
New indicator	Yes
Desired performance	100% of unopposed invoices paid within 30 days of receipt thereof
Indicator responsibility	Chief Financial Officer

Indicator Title	1.4.3 Compliance with budget management legislation and prescripts resulting in 98% annual budget spent for the preceding financial year
Short Definition	This indicator is an indication of the percentage departmental budget spent to its fullest capacity without under-spending. The norm is 2% on total budget for a particular year.
Purpose / Importance	Departments are allocated budgets to perform what their mandate requires. Under-spending on the annual budget could indicate that mandates/delivery were not fully realised. It contributes to effective departmental financial management and support services.
Source / Collection of Data	Adjustment Appropriation Act and Audited Annual Financial Statements.
Method of Calculation	<p>Numerator: Amount expended in a financial year as per the Annual Financial Statements, verified by the Auditor-General</p> <p>Denominator: Approved budget of the Department as per the Adjustments Appropriation Act</p> <p>Calculation: Numerator divided by denominator multiplied by 100</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 1st quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 1st quarter.</p>
Data Limitations	None. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Quantitative/output
Calculation type	Non-Cumulative
Reporting cycle	Annually in respect of preceding financial year (1 st Quarter).

New indicator	Yes
Desired performance	98% annual budget spent.
Indicator responsibility	Chief Financial Officer
Indicator Title 1.4.4 Compliance with asset management legislation, prescripts and framework (with no material findings)	
Short Definition	This indicator refers to how asset management compliance contributes to overall compliance with relevant legislation in the audit report.
Purpose / Importance	This indicator contributes to positive audit opinion outcomes in the achievement of Outcome 12 objectives.
Source / Collection of Data	Asset Register, Annual Audited Financial Statements.
Method of Calculation	Number of audited reports counted. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 1 st quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 1 st quarter.
Data Limitations	None To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Outcome
Calculation type	Non - Cumulative
Reporting cycle	Annually in respect of preceding financial year (1 st Quarter).
New indicator	Yes
Desired performance	Compliance with Asset Management Framework evidenced by no material external audit findings on assets.
Indicator responsibility	Chief Financial Officer

Indicator Title 1.4.5 Compliance with Supply Chain Management (SCM) legislation & prescripts evidenced by R Nil irregular expenditure incurred	
Short Definition	This indicator assists in how compliance with SCM processes will result in fully complied procurement system, contributing to a clean audit.
Purpose / Importance	This indicator contributes to positive audit opinion outcomes in the achievement of Outcome 12 objectives.
Source / Collection of Data	Annual Audited Financial Statements.
Method of Calculation	Number of audited reports counted <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 1 st quarter by a different team which is

	independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 1 st quarter.
Data Limitations	Units not following the proper procedures in terms of the PFMA and Treasury regulations. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Outcome
Calculation type	Non-Cumulative
Reporting cycle	Annually in respect of preceding financial year (1 st Quarter).
New indicator	Yes
Desired performance	Compliance with the SCM Framework evidenced by Nil Irregular expenditure incurred.
Indicator responsibility	Chief Financial Officer

Indicator Title	1.4.6 MPAT level attained for Financial management standards by OTP
Short Definition	This indicator refers to the score the Department obtains on the Financial management standards in the Financial Management key performance area of the Management Performance Assessment Tool (MPAT) as assessed by the Department of Planning Monitoring and Evaluation
Purpose / Importance	To ensure that financial management processes are practised at a standard and to ensure that the public resources are utilised efficiently and effectively.
Source / Collection of Data	Moderated DPME MPAT results report.
Method of Calculation	<p>The steps in the assessment are as follows:</p> <ol style="list-style-type: none"> 1. Secondary data collection and first-round performance assessments by department; 2. A self-assessment conducted by the department and submission of data to DPME; 3. A validation process id done by DPME based on the completeness of the self-assessment and the data submitted; 4. A subject matter expert conducts an external moderation on the quality of the findings in the previous steps. The moderator, that is the Assessment Panel or subject experts, will review the information and in engagement with the respective department select its own assessment for each qualitative statement and comment where necessary. <p>The first score is based on secondary data inputs (e.g. Audit Reports), the next score is based on the results of the completed self-assessment questionnaire and the last (final) score is a moderated score which is the subject expert rating after consideration of secondary data analysis, the self-assessment score and evidence provided by the department.</p>

The scores are colour-coded as in the figure below:

Level	Description	Level	Description
Level 1	Department is non-compliant with legal/regulatory requirements	Level 3	Department is fully compliant with legal/regulatory requirements
Level 2	Department is partially compliant with legal/regulatory requirements	Level 4	Department is fully compliant with legal regulatory requirements and is doing things smartly

A department that scores at Level 1 or Level 2 for a standard is non-compliant with the minimum legal prescripts in that management area and is performing poorly in terms of its management practices in that management area. On the other hand, a department that scores at Level 3 is compliant with the legal prescripts in that management area. A Level 4 department is compliant and operating smartly in terms of its management practices in that management area.

Annual Performance Report (APR) annual aggregation process

The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4th quarter.

Data Limitations	The unmoderated, self-assessed scores will be used as a measure of importance. This will avert the risk of DPME delaying the issuing of moderated scores. Possible record management deficiencies which could cause delays in providing evidence that needs to be assessed. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Qualitative –although it refers to a number, the numbers refer to categories and values; outcome, effectives.
Calculation type	Non-cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	Yes
Desired performance	Targeted performance (level 3)
Indicator responsibility	Chief Financial Officer

Indicator Title	1.4.7 Financial management policies and Delegations reviewed.
Short Definition	The annual review of the departmental policy on financial management incorporates any changes in the legislative environment through amendments

	and additions to the existing policy. The process also reviews existing procedures and updates processes as required.
Purpose / Importance	Compliant financial management policies and procedures
Source / Collection of Data	National Treasury Circulars, Practice Notes and Guideline documents Provincial Treasury Instructions, Circulars and Guideline documents Engagements with line function through daily interactions and engagements
Method of Calculation	Simple count of updates (Cellular phones policy, Landline telephone policy, Stores Policy, Management of debt policy, Fruitless & wasteful expenditure policy, Irregular expenditure, policy, Petty Cash policy, Consumables management policy, Asset management policy, Supply chain management policy, Subsistence and travelling policy, Advance on service bonus policy, Transport policy, Unauthorised expenditure policy, Policy on library material, Policy statement on treasury regulations, Revenue policy) 17 Policies 1 Delegation register <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4 th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4 th quarter.
Data Limitations	Financial management policy documentation is subject to interpretation. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Qualitative
Calculation type	Non-cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	Yes
Desired performance	Compliance with legislation and to improve on performance (update with new legislation and approve all policies)
Indicator responsibility	Chief Financial Officer

2.1 Strategic Human Resource Management

2.1.1 Human Resource Administration

Indicator Title	2.1.1.1 Percentage of appointments made in critical vacant funded posts within a twelve (12) month period within the Office of the Premier
Short Definition	Indicates the number of appointments made within a twelve (12) month period from date of advert.
Purpose / Importance	It gives an indication of the number of appointments made within twelve (12) months from the date of advert
Source / Collection of Data	Verified and approved recruitment record/database reflecting:

	<ul style="list-style-type: none"> • Advert • Appointment letter (Offer of employment) • Acceptance of employment • Appointment on PERSAL (Assumption of duty)
Method of Calculation	<p>Numerator: Number of posts advertised Denominator: Number of posts filled Calculation: Numerator/Denominator x 100</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4th quarter.</p>
Data Limitations	Reliability depends on accuracy of recruitment record based on the correct and regular capturing/updating of the database/record and loading of information on the PERSAL system. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Quantitative output
Calculation type	Non-cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	No
Desired performance	Higher than targeted performance is desirable
Indicator responsibility	Senior Manager: Human Resource Administration

Indicator Title	2.1.1.2 Average percentage of funded vacant posts on PERSAL (vacancy rate) within the Northern Cape Provincial Administration
Short Definition	It gives an indication of the vacancy rate within the Northern Cape Provincial Administration (NCPA), and thereby the effectiveness and efficiency of recruitment practices/processes and ability of all Provincial departments (individually and collectively) to comply with the prescribed 10% vacancy rate and maintain adequate staffing levels.
Purpose / Importance	It gives an indication of the vacancy rate within the NCPA and thereby the effectiveness and efficiency of recruitment practices/processes and ability of all Provincial departments (individually and collectively) to comply with the prescribed 10% vacancy rate and maintain adequate staffing levels to achieve their objectives. It also indicates the extent to which the OTP effectively co-ordinate, guides and supports departments to improve in this regard.
Source / Collection of Data	Primary source

	<p>Consolidated report reflecting average vacancy rate for each of the 12 Provincial departments as at end of the reporting cycle.</p> <p>Secondary source: Relevant Persal Reports</p>
Method of Calculation	<p>Numerator Calculate the sum of the all the average vacancy rates of the 12 Provincial Departments as at end of the reporting cycle</p> <p>Denominator The number of provincial departments within the NCPA = 12</p> <p>Calculation Numerator/Denominator x 100</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR calculation is the same as the 4th quarter calculation. This means 4th quarter validation output with the same as APR output divided by 4.</p>
Data Limitations	Reliability depends on accuracy of data based on correct and timely loading/updating of information on the PERSAL System. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	No
Desired performance	Better actual performance of 10% vacancy rate across all Provincial departments within the NCPA is desirable.
Indicator responsibility	Senior Manager: Human Resource Administration

Indicator Title	2.1.1.3 Number of new Provincial Human Resource Administration (HRA) policies developed and approved
Short Definition	Indicator refers to the number of new HRA policies developed and approved for the province to standardise processes and guide departments accordingly.
Purpose / Importance	It indicates the number of new policies to be developed as governance instruments to guide and strengthen level of standardised and common/consistent practice and conduct in the 2 identified areas across all Departments within the NCPA. It also indicates the extent to which the Office of the Premier effectively coordinates, guides and supports departments to improve in this regard.
Source / Collection of Data	Actual approved new provincial policies

	<ol style="list-style-type: none"> 1. Recruitment and Selection Policy 2. Special Leave Policy
Method of Calculation	<p>Count every new transversal Provincial Human Resource Administration policy that has been approved as at the end of the reporting cycle</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4th quarter.</p>
Data Limitations	<p>The accuracy of the data depends on the extent of research done regarding trends and new developments, sufficient consultation and comprehensiveness of the data/information captured/recorded. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.</p>
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	No
Desired performance	Higher than targeted performance is desirable
Indicator responsibility	Senior Manager: Human Resource Administration

Indicator Title	2.1.1.4 Number of existing approved Departmental Human Resource (HR) Policies reviewed
Short Definition	Indicator refers to existing approved Departmental Human Resource Administration (HRA) policies reviewed.
Purpose / Importance	It indicates the number of existing Office of the Premier policies to be reviewed and therefore Office of the Premier's efforts to update/amend its governance instruments to ensure current relevance and compliance/consistency with new developments and legislation
Source / Collection of Data	<p>Policy register (records of reviews)</p> <p>Actual revised Office of the Premier policies:</p> <ol style="list-style-type: none"> 1. Leave of Absence Policy and 2. Special Leave Policy
Method of Calculation	<p>Count every existing OTP Human Resource Administration policy that has been reviewed as at the end of the reporting cycle</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4th quarter by a different team which is independent of the validating quarterly outputs. This internal control</p>

	procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4 th quarter.
Data Limitations	The accuracy of the data depends on the extent of research done regarding trends and new developments/legislation, sufficient consultation and comprehensiveness of the data/information captured/recorded. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	No
Desired performance	On target
Indicator responsibility	Senior Manager: Human Resource Administration

Indicator Title	2.1.1.5 % of Leave captured on PERSAL
Short Definition	Indicator refers to the number of received approved leave forms captured at the end of the reporting period
Purpose / Importance	To indicate the extent of leave and attendance management within the Office of the Premier to ensure accuracy and timely capturing of leave and therefore reliable leave records
Source / Collection of Data	Primary source: Leave Register
Method of Calculation	<p>Numerator Number of received approved leave forms captured at the end of the reporting period.</p> <p>Denominator Number of approved leave forms received by HRA at the end of the reporting period.</p> <p>Calculate Numerator/denominator x 100.</p> <p><u>Annual Performance Report (APR) /annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be an average of all 4 quarterly validated outputs divided by 4.</p>
Data Limitations	Reliability depends on the accuracy of Leave Registers and Persal reports based on faithful submission of approved leave forms, adequate controls for movement of leave forms and correct loading of information on the Persal system/ updating of their records. To avoid any ambiguity pertaining validity,

	accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Leave forms submitted timeously to the HRA Directorate
Indicator responsibility	Senior Manager: Human Resource Administration

2.1.2 Efficiency Services

Indicator Title	2.1.2.1 Number of Northern Cape Departments supported in the implementation of Business Process Modelling
Short Definition	This is the number of departments within the Northern Cape Provincial Administration that are provided with support in the implementation of Business Process Modelling (mapping of business processes and development of standard operating procedures (SOP's)).
Purpose / Importance	It gives an indication of Office of the Premier's efforts to support Provincial departments (including the Office of the Premier and excluding The Legislature) to be able to map business processes and develop SOP's. The indicated support can be provided through information sharing and capacity building workshops, written communication and feedback, as well as meetings.
Source / Collection of Data	Agendas, attendance registers and minutes of workshops, engagements, and meetings; documentation to departments guiding on the implementation of Business Process Modelling.
Method of Calculation	Counting of Number of Departments <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4 th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. In the event that a specific department is supported more than one quarter, the department will only be counted as one department and the end of the reporting cycle. APR output will be the sum of all validated departments of all 4 quarters.
Data Limitations	Readiness and capacity of provincial departments to participate and provide accurate data, on time/reliance on external service recipients for providing of information, in time. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.

Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	No
Desired performance	On target.
Indicator responsibility	Senior Manager: Efficiency Services

Indicator Title	2.1.2.2 Number of Northern Cape Provincial Departments supported on the implementation of the Directive on Public Administration and Management Delegations
Short Definition	This is the number of departments within the Northern Cape Provincial Administration that are provided with support, to facilitate their implementation of the Directive on Public Administration and Management Delegations, 2014, as issued by the Minister of Public Service and Administration.
Purpose / Importance	It gives an indication of the level of support provided by the Office of the Premier towards strengthening Northern Cape Provincial Departments (including the Office of the Premier as department and excluding The Legislature) in complying with the legislative framework governing HR delegations (specifically the Directive on Public Administration and Management delegations). The indicated support can be provided through information sharing and capacity building workshops, written communication, as well as meetings with delegations systems administrators and officials with delegated responsibilities.
Source / Collection of Data	Agendas, attendance registers and minutes of workshops, engagements and meetings; documentation to departments guiding on the implementation of the Directive on Public Administration and Management Delegations
Method of Calculation	Counting of Number of Departments, from relevant available evidence. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 2 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. In the event that a specific department is supported more than one quarter, the department will only be counted as one department and the end of the reporting cycle. APR output will be the sum of all validated departments of all 4 quarters
Data Limitations	Readiness and capacity of provincial departments to participate and provide accurate data, on time/reliance on external service recipients for providing of information, in time. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative

Reporting cycle	Bi-Annually (2 nd and 4 th Quarter)
New indicator	Yes
Desired performance	On target.
Indicator responsibility	Senior Manager: Efficiency Services

Indicator Title	
2.1.2.3 Number of Northern Cape Provincial Departments supported on the implementation of the Directive on changes to Organisational Structures	
Short Definition	This is the number of departments within the Northern Cape Provincial Administration that are provided with support interventions, to facilitate their implementation of the Directive on changes to organisational structures, 2015, as issued by the Minister of Public Service and Administration.
Purpose / Importance	It gives an indication of the level of support provided by the Office of the Premier towards strengthening provincial departments (including the Office of the Premier as department and excluding The Legislature) in complying with the legislative framework governing Organisational Design (OD), in particular the 2016 Directive on changes to Organisational Structures. The described support can be provided through workshops, formal advice and feedback to departments (as part of the formal consultation process), Job Evaluation Panel sittings, as well as meetings with organisational design practitioners and departmental management.
Source / Collection of Data	Agendas, attendance registers and minutes of workshops, engagements and Job Evaluation Panel sittings; documentation to departments guiding on the implementation of the Directive on changes to Organisational Structures; Organisational Design reports, which deal with functional structures, organisational functionality assessment, service delivery models, post changes and consultation; Job Evaluation submissions.
Method of Calculation	Counting of Number of Departments, from relevant available evidence. The four (4) identified departments for 2017/18, based on requests from the particular departments and existing capacity, are: <ul style="list-style-type: none"> • Office of the Premier • Social Development • Environment and Nature Conservation • Transport, Safety and Liaison <p><u>Annual Performance Report (APR) /annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. In the event that a specific department is supported more than one quarter, the department will only be counted as one department and the end of the reporting cycle. APR output will be the sum of all validated departments of all 4 quarters</p>
Data Limitations	Readiness and capacity of provincial departments to participate and provide accurate data, on time/reliance on external service recipients for providing of information, in time. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of

	Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	Yes
Desired performance	On target.
Indicator responsibility	Senior Manager: Efficiency Services

Indicator Title	2.1.2.4 Number of Northern Cape provincial departments supported on the implementation of the Directive on Human Resource Planning
Short Definition	This is the number of departments within the Northern Cape Provincial Administration that are provided with support, to facilitate their implementation of the amended Directive on the Development and Reporting on Human Resources Plans in the Public Service, 2014, as issued by the Minister of Public Service and Administration.
Purpose / Importance	It gives an indication of the extent and reach of the support provided by the Office of the Premier towards strengthening of provincial departments (including the Office of the Premier as department and excluding The Legislature) in complying with the legislative framework governing Human Resources (HR) Planning, in particular the Directive on HR Planning. The described support can be provided through workshops, formal advice and feedback to departments, as well as meetings with management and functionaries responsible for HR Planning.
Source / Collection of Data	Agendas, attendance registers and minutes of workshops, engagements and meetings; documentation to departments guiding on the implementation of the Directive on HR planning, which include HR capability assessments, HR plans, HR planning assessments and HR plan implementation progress reports.
Method of Calculation	Counting of Number of Departments, from relevant available evidence. <u>Annual Performance Report (APR) /annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 2 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. In the event that a specific department is supported more than one quarter, the department will only be counted as one department and the end of the reporting cycle. APR output will be the sum of all validated departments of all 4 quarters
Data Limitations	Readiness and capacity of provincial departments to participate and provide accurate data, on time/reliance on external service recipients for providing of information, in time. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.

Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Bi-Annually (2 nd and 4 th Quarter)
New indicator	Yes
Desired performance	On target.
Indicator responsibility	Senior Manager: Efficiency Services

2.1.3 Labour Relations

Indicator Title	2.1.3.1 Number of reports on the average number of days taken to resolve disciplinary, grievance and dispute cases by Provincial Departments
Short Definition	The Office of the Premier is responsible for analysing and consolidating signed off reports from Provincial Departments for submission to the Department of Public Service and Administration.(DPSA)
Purpose / Importance	Analyse and consolidate reports from provincial departments to monitor on timeframes taken to finalise disciplinary, grievances and disputes by departments.
Source / Collection of Data	Reports from Provincial Departments on all misconduct, grievances and disputes cases.
Method of Calculation	<p>One (1) provincial consolidated report per quarter</p> <p><u>Annual Performance Report (APR) annual aggregation process</u></p> <p>The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR.</p> <p>APR will be the sum of all 4 quarters.</p>
Data Limitations	None. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	Yes
Desired performance	On target
Indicator responsibility	Senior Manager: Labour Relations

Indicator Title	2.1.3.2 Number of reports on Northern Cape Chamber activities
Short Definition	<p>Reports developed by the Office of the Premier in relation to meetings, policies and related matters consulted between organised labour and the state in the capacity as employer.</p> <p>The Northern Cape Chamber has been established in terms of the Labour</p>

	Relations Act.
Purpose / Importance	To develop a report for the correct implementation of the chamber (PSCBC, GPSSBC, ELRC, and PHSDSBC) resolutions as agreed between organised labour and employer.
Source / Collection of Data	Notice, Agenda, Minutes and Attendance Registers.
Method of Calculation	One (1) Consolidated report per quarter <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR will be the sum of all 4 quarters.
Data Limitations	None. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	On targets
Indicator responsibility	Senior Manager: Labour Relations

Indicator Title	2.1.3.3 Number of Labour Relations awareness and Promotion programmes conducted in the Office of the Premier.
Short Definition	Number of awareness programmes held on the disciplinary code, code of conduct, abscondment, grievance procedure and sexual harassment policy conducted in the Office of the Premier.
Purpose / Importance	To indicate the number of awareness programmes in pursuit of sound labour relations, harmony and stability in the workplace for improved productivity and service delivery. These awareness programmes held within the Office of the Premier would include: Disciplinary Code: Quarter 1 Code of Conduct: Quarter 2 Abscondment: Quarter 3 Grievance Procedure: Quarter 4 Sexual Harassment Policy: Quarter 4
Source / Collection of Data	Notice and schedules. Attendance Registers of Labour Relations awareness sessions conducted on the approved Labour Relations programmes.
Method of Calculation	The number of Labour Relations awareness programmes conducted per quarter.

	<p><u>Annual Performance Report (APR) annual aggregation process</u></p> <p>The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR.</p> <p>APR will be the sum of all programmes relating to the 4 quarters.</p>
Data Limitations	To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	On targets
Indicator responsibility	Senior Manager: Labour Relations

2.1.4 Employee Health and Wellness

Indicator Title	2.1.4.1 Number of Employee Health & Wellness (EH&W) approved behaviour change communication programmes implemented in the Office of the Premier
Short Definition	A count of knowledge and behaviour changing communication message delivered.
Purpose / Importance	Indicates the number of evidence based EH&W behaviour change communication programmes implemented by the Office of the Premier in pursuit of individual employee and organizational health, safety and wellness. The programme list are as follows: <ul style="list-style-type: none"> • Health and Productivity BCC Programme • Wellness BCC Programme • SHERQ BCC Programme
Source / Collection of Data	Primary source: <ul style="list-style-type: none"> • Reports on implementation of EH&W behaviour change communication programmes as at end of reporting cycle • Attendance Registers of EH&W behaviour change communication sessions conducted.
Method of Calculation	Calculate the sum of all EH&W behaviour change communication programmes implemented as at end of reporting cycle <p><u>Annual Performance Report (APR) annual aggregation process</u></p> <p>The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and</p>

	complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR will be the sum of all 4 quarters
Data Limitations	Under/over counting due to misinterpretation of indicator. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Higher actual performance is desirable
Indicator responsibility	Senior Manager: Employee Health and Wellness

Indicator Title	2.1.4.2 Number of employees using workplace occupational health services with Office of the Premier
Short Definition	A count of the departmental employees that access the health services at the Office of the Premier facility.
Purpose / Importance	Indicates to what extent employees use the EH&W workplace occupational health services other than behaviour change communication programmes on offer within the Office of the Premier.
Source / Collection of Data	EH&W Reports
Method of Calculation	Calculate the sum of all employees who used/accessed/benefitted from workplace occupational health services as at end of reporting cycle. <u>Annual Performance Report (APR) /annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR will be the sum of all 4 quarters
Data Limitations	Under/over counting due to human error. Refusal due to fear/ unwillingness to disclose based on confidentiality /stigmatization considerations. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Higher actual performance is desirable
Indicator responsibility	Senior Manager: Employee Health and Wellness

2.1.5 Diversity Management

Indicator Title	
2.1.5.1 Report on the number of departments assessed on Employment Equity	
Short Definition	Measures compliance within Provincial Departments in terms of Employment Equity Targets, namely race, disability and gender as set by government.
Purpose / Importance	To indicate compliance with the legislative and policy prescripts regulating Employment Equity within the Northern Cape Provincial Administration in terms of achieving and maintaining a diverse workforce that reflects the provincial demographics in terms of race, gender and disability across all its departments.
Source / Collection of Data	Primary sources: <ul style="list-style-type: none"> • Departmental Employment Equity Reports submitted to Department of Labour • PERSAL Reports
Method of Calculation	One (1) consolidated report <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4 th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4 th quarter.
Data Limitations	Deficiencies in record keeping, capturing and compilation of reports. To ensure accuracy, validity and completeness of the reported outcomes, underlying supporting documents/evidence must accompany reports from departments. Source documents will enable OTP to validate claims in the reports from departments. In the absent of source documents, accuracy, validity, completeness of the output will not be ascertained. When most of the actual validated outputs are zero from departments, it will then be meaningless to compute the provincial output.
Type of Indicator	Output
Calculation type	Non-cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	No
Desired performance	Improved performance in the number of departments with Employment Equity targets.
Indicator responsibility	Chief Director: Human Resource Management

Indicator Title	
2.1.5.2 Number of Diversity programmes implemented within the Office of the Premier	
Short Definition	Measures the number of Diversity programmes implemented within Office of the Premier.
Purpose / Importance	To indicate the number of approved structured Diversity awareness programmes implemented by the Office of the Premier in pursuit of improved diverse workplace culture of tolerance, respect, sensitivity and understanding

	for improved productivity and service delivery.
Source / Collection of Data	Agendas, Invitations, Programmes and attendance registers. Programmes could include: 1. Cultural Diversity Event/ Heritage Day 2. Workers Day 3. Training on Policies - Employment Equity Policy - Change Management 4. Human Rights Day
Method of Calculation	Number of Diversity programmes implemented as at the end of reporting cycle <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR will be the sum of all 4 quarters
Data Limitations	None. To ensure accuracy, validity and completeness of the reported outcomes, underlying supporting documents/evidence must accompany reports from departments. Source documents will enable OTP to validate claims in the reports from departments. In the absent of source documents, accuracy, validity, completeness of the output will not be ascertained. When most of the actual validated outputs are zero from departments, it will then be meaningless to compute the provincial output.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Improved awareness on Diversity Management
Indicator responsibility	Chief Director: Human Resource Management

2.2 Strategic Human Capital Development

2.2.1 Human Resource Development and Transversal Coordination

Indicator Title	2.2.1.1 Number of unemployed youth benefitting from skills development programmes within the Northern Cape province
Short Definition	Consolidated report reflecting the number of unemployed youth placed in development programmes for the period April 2017- March 2018.
Purpose / Importance	Indicates the number of unemployed youth placed in an Artisanship (A), Internship (I) Learnership (L) WIL and Bursaries (B) program by different stakeholders across the province.
Source / Collection of Data	A consolidated report to the Director General indicating the no of unemployed youth placed in development programs by various stakeholders. Artisan registration and completions- letter of award/registration form or statement or results Learnership - Letter of award/database from stakeholders Internship - Letter of award/database from stakeholders

	WIL- Letter of award/database from stakeholders Bursaries- Letter of award/database from stakeholder
Method of Calculation	Calculate the sum of intake by counting all artisans, bursaries, interns, learners, WIL learners within the province at the end of the reporting period. <u>Annual Performance Report (APR) /annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4 th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4 th quarter.
Data Limitations	Rely on stakeholders to submit their data timeously. To ensure accuracy, validity and completeness of the reported outcomes, underlying supporting documents/evidence must accompany reports from departments. Source documents will enable OTP to validate claims in the reports from departments. In the absent of source documents, accuracy, validity, completeness of the output will not be ascertained. When most of the actual validated outputs are zero from departments, it will then be meaningless to compute the provincial output
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	No
Desired performance	Improvement of skills levels in the Northern Cape province
Indicator responsibility	Senior Manager : HRS&TC

Indicator Title	2.2.1.2 Number of reports indicating training initiatives in the Northern Cape Provincial Administration
Short Definition	Consolidated report from Office of the Premier's reflecting the number of officials benefitting from training initiatives in provincial departments.
Purpose / Importance	A skilled and capable workforce to improve service delivery in the Provincial Administration.
Source / Collection of Data	Office of the Premier's consolidated report indicating the number of employees trained in provincial departments.
Method of Calculation	Count the number of consolidated reports reflecting the number of employees that have attended training initiatives in departments in the preceding quarter. <u>Annual Performance Report (APR) /annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR will be the sum of all 4 quarters

Data Limitations	Reliance on departments to submit accurate and detailed data. To ensure accuracy, validity and completeness of the reported outcomes, underlying supporting documents/evidence must accompany reports from departments. Source documents will enable OTP to validate claims in the reports from departments. In the absent of source documents, accuracy, validity, completeness of the output will not be ascertained. When most of the actual validated outputs are zero from departments, it will then be meaningless to compute the provincial output
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Building capacity of employees in provincial departments
Indicator responsibility	Senior Manager: HRS&TC

Indicator Title	2.2.1.3 Number of reports indicating compliance by Provincial departments with the submission of HRD Plans
Short Definition	Report on compliance by provincial departments in terms of Human Resource Development (HRD) legislative framework
Purpose / Importance	It indicates the extent to which the Provincial Administration complies with the HRD Legislative Framework.
Source / Collection of Data	Consolidated report to the Director General reflecting compliance by departments(WSP, HRD Implementation Plan & HRD Monitoring Reports
Method of Calculation	Count the number of consolidated reports indicating compliance by departments on the submission of Departmental HRD Plans. Annual Performance Report (APR) /annual aggregation process The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 2 nd quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 2 nd quarter
Data Limitations	None submission of HRD Plans by departments to the DPSA and line function SETAs by said due dates. To ensure accuracy, validity and completeness of the reported outcomes, underlying supporting documents/evidence must accompany reports from departments. Source documents will enable OTP to validate claims in the reports from departments. In the absent of source documents, accuracy, validity, completeness of the output will not be ascertained. When most of the actual validated outputs are zero from departments, it will then be meaningless to compute the provincial output
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (2 nd Quarter)
New indicator	Yes
Desired performance	Improved monitoring on compliance by departments against HRD Plans

Indicator responsibility	Senior Manager: HRS&TC
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2.2.1.4 Number of Provincial Transversal Human Resource Development forums/structures coordinated	
Indicator Title	2.2.1.4 Number of Provincial Transversal Human Resource Development forums/structures coordinated
Short Definition	To strengthen coordination implementation of Human Resource Development initiatives in the province.
Purpose / Importance	It indicates the number of formalised structures that are in place and functional for effective coordination, monitoring and evaluation of Human Resource Development interventions across internal and external role-players and functions with specific reference to the Provincial Skills Development Forum and the Human Resource Development & Employee Performance Management Forum.
Source / Collection of Data	Notices, Agenda, Attendance registers & Minutes of all meetings held by the Forums
Method of Calculation	Calculate the number of structures/forums coordinated and divide by 4 <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data Limitations	Availability & attendance levels of all members/parties. Availability & attendance levels of all members/ parties Deficiencies in record keeping. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Human Resource Development Forums meet on a quarterly basis and report on Human Resource Development initiatives.
Indicator responsibility	Senior Manager: HRS&TC

2.2.2 Performance Management and Capacity Development

2.2.2.1 Number of employees benefitting from Human Resources Development initiatives within Office of the Premier	
Indicator Title	2.2.2.1 Number of employees benefitting from Human Resources Development initiatives within Office of the Premier
Short Definition	Indicates the number of all Office of the Premier employees (Level 1 to 12 and SMS) who benefited from training and capacity development interventions, Compulsory Induction Programme (CIP) and bursaries aimed at addressing the workforce skills and capacity needs/gaps for achievement

	of departmental objectives as set out in departmental strategic and annual plans.
Purpose / Importance	Improved service delivery and performance through skills development initiatives within Office of the Premier.
Source / Collection of Data	<ul style="list-style-type: none"> • Approved submission on Bursaries awarded • Training attendance registers (If attendance registers are not available, copies of certificates of the training attended or any other proof that training was attended).
Method of Calculation	<p>Count all employees of Office of the Premier that have attended training interventions, including CIP and those that have been awarded bursaries.</p> <p><u>Annual Performance Report (APR) /annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of all validated quarterly outputs.</p>
Data Limitations	External service providers and units within OTP not supplying the Office with attendance registers, proof of attendance or certificates. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Increased number of employees capacitated.
Indicator responsibility	Senior Manager: PM&CD

Indicator Title	2.2.2.2 Number of unemployed youth benefitting from youth development programmes within the Office of the Premier to enhance employability (Interns & WIL)
Short Definition	Number of unemployed youth enlisted by the Office of the Premier in terms of Internships and Work Integrated Learning (WIL) programmes.
Purpose / Importance	Indicates the number of unemployed youth enlisted by the Office of the Premier in compliance with HRD policy framework to ensure unemployed graduates and students are offered experiential learning opportunities in pursuit of Outcome 5 skilled and capable workforce and enhanced employment prospects for the youth.
Source / Collection of Data	Database on interns and WIL appointments made.
Method of Calculation	<p>Count of enlisted interns and WIL appointees at Office of the Premier</p> <p><u>Annual Performance Report (APR) /annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each</p>

	<p>performance indicator of the 1st quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR.</p> <p>APR will be all interns and WILs who were still on contract at the Office of the Premier for a part of the financial year.</p>
Data Limitations	None supply of inters and WIL by the respective SETA's. To ensure accuracy, validity and completeness of the reported outcomes, underlying supporting documents/evidence must accompany reports from departments. Source documents will enable OTP to validate claims in the reports from departments. In the absent of source documents, accuracy, validity, completeness of the output will not be ascertained. When most of the actual validated outputs are zero from departments, it will then be meaningless to compute the provincial output
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (1 st Quarter)
New indicator	No
Desired performance	Youth provided with workplace experience
Indicator responsibility	Senior Manager: PM&CD

Indicator Title	2.2.2.3 Percentage of employees within the Office of the Premier who are compliant with the submission of Performance Agreements in terms of Performance Management Systems
Short Definition	To indicate compliance in terms of the submission of Performance Agreements in terms of Performance Management Systems in the Office of the Premier for all employees.
Purpose / Importance	To manage performance within the Office of the Premier and identify relevant developmental areas to enhance performance and service delivery.
Source / Collection of Data	<p>Primary Source:</p> <ul style="list-style-type: none"> • PERSAL report indicating number of performance agreements submitted. • Consolidated report on Number of Performance Agreements concluded by 31 May annually, excluding those on suspension, maternity, incapacity, extended, sick, study leave, new appointments and dispute cases.
Method of Calculation	<p>Numerator: Sum of fully compliant employees on Levels 1 to 12 and SMS in terms of the submission of Performance Agreements for the current cycle 2017/18; excluding those on suspension, maternity, incapacity, extended, sick, study leave, new appointments and dispute cases.</p> <p>Denominator: Total Office the Premier staff population required to submit PA's excluding those on suspension, maternity, incapacity, extended, sick, study leave, new appointments and dispute cases.</p> <p>Calculation: Numerator/Denominator x 100</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 1st quarter by a different team which is independent of the validating quarterly outputs. This internal control</p>

	procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 1 st quarter
Data Limitations	Incomplete record keeping, capturing and compilation of reports. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (1 st Quarter)
New indicator	No
Desired performance	Compliance with the submission of Performance Agreements for Levels 1 to 12 and SMS within the Office of the Premier
Indicator responsibility	Senior Manager: PM&CD

Indicator Title	2.2.2.4 Annual performance evaluation session co-ordinated for the Heads of Departments (HODs)
Short Definition	The co-ordination of HOD evaluations, rendering of secretariat and administrative support to the HOD evaluation panel. To further ensure compliance with legislative framework within the NCPA and thereby the Office of the Premier's ability to effectively coordinate the management of HOD performance.
Purpose / Importance	To ensure coordination of HOD annual evaluation sessions by rendering of secretariat and administrative support to the HOD evaluation panel responsible for the effective evaluation and management of HOD performance aligned to the cabinet resolution on Performance Management and Development System for HOD's.
Source / Collection of Data	Notices, Agenda and Attendance register
Method of Calculation	Count by adding every HOD evaluation session coordinated for the province. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 3 rd quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 3 rd quarter
Data Limitations	To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually(3 rd Quarter)
New indicator	Yes
Desired performance	Evaluation session to take place.
Indicator responsibility	Senior Manager: PM&CD

2.3 Legal Services

Indicator Title	2.3.1 Number of structured programmes to minimize legal risks against the Northern Cape Provincial Departments and Municipalities
Short Definition	The pro-active and preventative management of legal risk in the Province.
Purpose / Importance	Indicates the programmes that will be implemented as a proactive, preventative measure to minimize the Northern Cape Provincial Administration's and Municipalities' exposure to financial, legal and reputational risks. These include 1. Mediation; 2. Training; 3. Legal Advisory Notes.
Source / Collection of Data	Attendance Registers or Minutes of Mediation sessions. Attendance Registers or course material of Training interventions. Copies of Legal Advisory Notes distributed/ circulated.
Method of Calculation	Count the number of programmes or interventions conducted <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4 th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output is the same as 4 th quarter validated output
Data Limitations	Demand Driven area, subject to cooperation by Departments and Municipalities. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	Yes
Desired performance	Legal Risks minimized
Indicator responsibility	Chief State Law Advisor

Indicator Title	2.3.2 Number of quarterly reports on legal matters resolved
Short Definition	Drafting of a report that encompasses different types of legal matters, that may include legal opinions, contracts, legislation and litigation management.
Purpose / Importance	Indicates the number of reports on the type of legal matters drafted by the Office of the Chief State Law Advisor to ensure legal compliance.
Source / Collection of Data	Quarterly Reports on the legal matters resolved, which may include legal opinions, contracts, legislation and litigation management.
Method of Calculation	Number of quarterly reports submitted <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree /

	<p>compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR.</p> <p>APR output will be the sum of all 4 quarterly reports</p>
Data Limitations	Demand Driven; Needs cooperation from Departments and Municipalities. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	Yes
Desired performance	All legal instruments and decisions are legally compliant.
Indicator responsibility	Chief State Law Advisor

Indicator Title	2.3.3 Number of legal support agreements signed and implemented with State Attorney, Northern Cape Departments and Municipalities
Short Definition	The signing of legal support agreements with the State Attorney, Northern Cape Departments and Municipalities to ensure effective coordination of legal services.
Purpose / Importance	To formalise the support given to Departments and Municipalities. Emphasis will be for Departments and Municipalities that do not have legal advisors and the State Attorney that is required to sign a cooperation agreement with Premier.
Source / Collection of Data	Legal support agreements (MOUs) to be entered into with the State Attorney, municipalities and departments.
Method of Calculation	<p>Count the number of MOUs.</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4th quarter</p>
Data Limitations	Departments and Municipalities not cooperating with signature of agreements. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-

	determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	Yes
Desired performance	Structured coordination of legal support
Indicator responsibility	Chief State Law Advisor

2.4 Information Communication Services

2.4.1 Information Technology and Infrastructure

Indicator Title	2.4.1.1 Number of departmental ICT documents (Policies, Charters, Plans Frameworks, Manual and Strategies) reviewed
Short Definition	Indicates the review ICT documents in the Office of the Premier
Purpose / Importance	Measures the number of approved and/or revised Departmental Corporate Governance of Information Communication Technology (CGICT) policies & Charters, ICT Plans, Implementation Plans and Operational Plans as prescribed by the CGICT Policy Framework for the Public Service and in accordance with the CGITC assessment standard & checklist issued by DPSA. Also measures approved and/or revised Departmental IT Documents (policies, strategies and plans, manuals)
Source / Collection of Data	<ul style="list-style-type: none"> • Corporate Governance of ICT Policy – Quarter 1 • Corporate Governance of ICT Charter – Quarter 1 • ICT Operational Plan – Quarter 1 • ICT Plan – Quarter 2 • ICT Implementation Plan – Quarter 2 • Two (2) additional ICT documents (policies, strategies and plans, manuals) reviewed – Quarter 3 & 4 <p>Seven (7) ICT documents (policies, strategies and plans, manuals) reviewed.</p>
Method of Calculation	Count each fully compliant document. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR validation will be a sum of all departments that have all the 7 documents cited under source/ collection of data
Data Limitations	Poor/insufficient alignment of departmental IT documents to required. National compliance. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output

Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	Yes
Desired performance	On target performance
Indicator responsibility	Senior Manager: Information Communication Technology

Indicator Title	2.4.1.2 Number of Departmental services, e-enabled, based on the Service Delivery Model
Short Definition	Implementation of e-enabled systems
Purpose / Importance	<p>Measures the number of departmental services that have been e-enabled to enhance service delivery and access. Also indicates the extent of Office of the Premier ICT Unit's efforts & ability to provide effective and efficient ICT Software solutions that simplify and automate manual based business processes to promote usage by citizens, business and government and as such improve service delivery and the lives of citizens.</p> <p>Management of coordination of the Thusong Service Centre Programme in the Northern Cape.</p>
Source / Collection of Data	<ul style="list-style-type: none"> • Departmental service, e-enablement project plans developed by Office of the Premier ICT unit read and cross referenced to Departmental ICT Plans. • Project Implementation Progress and Closeout Reports reflecting successful e-enablement of services. • Thusong Service Centre quarterly report.
Method of Calculation	<p>Count every service that has been e-enabled as at the end of the reporting cycle.</p> <p><u>Annual Performance Report (APR) annual aggregation process</u></p> <p>The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 2 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be a sum of all departments supported during the year.</p>
Data Limitations	Poor/insufficient understanding of business of departments on part of ICT units. To ensure accuracy, validity and completeness of the reported outcomes, underlying supporting documents/evidence must accompany reports from departments. Source documents will enable OTP to validate claims in the reports from departments. In the absent of source documents, accuracy, validity, completeness of the output will not be ascertained.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Bi-Annually (2 nd & 4 th Quarter)
New indicator	No
Desired performance	Higher actual performance is desirable.
Indicator responsibility	Senior Manager: Information Communication Technology

Indicator Title	2.4.1.3 Number of provincial workshops hosted on information security and privacy protection responsibilities
Short Definition	ICT capacity and skills building
Purpose / Importance	Measures the number of internal ICT workshops organised and facilitated by the PGITO/Office of the Premier ICT Unit for provincial departments in the Northern Cape province to build capacity/ empower government ICT practitioners within the Northern Cape Provincial Administration to keep up with latest development and technologies.
Source / Collection of Data	Report of provincial ICT workshops hosted. Attendance registers and presentations.
Method of Calculation	Count every workshop conducted at the end of the reporting period. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 2 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of workshops hosted during the year.
Data Limitations	Unavailability of/inaccurate/incomplete records. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Bi-Annually (2 nd & 3 rd Quarter)
New indicator	No
Desired performance	Higher actual performance is desirable
Indicator responsibility	Senior Manager: Information Communication Technology

Indicator Title	2.4.1.4 Number of Government Committee and Forums provided with strategic IT advice
Short Definition	Indicate specialized ICT advice provided to Strategic Forums.
Purpose / Importance	Indicates the number of Government Committee and Forums provided with strategic IT advice.
Source / Collection of Data	Quarterly Report on advice provided to the following forums: <ul style="list-style-type: none"> • CFO Forum • Audit Committee • HOD Forum (This report will include minutes and presentations)
Method of Calculation	Count number of forums provided with specialized ICT advice. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree /

	compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of all 4 quarterly outputs.
Data Limitations	Unavailability of/inaccurate/incomplete records. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Higher actual performance is desirable
Indicator responsibility	Senior Manager: Information Communication Technology

Indicator Title	2.4.1.5 Average turnaround time in days for resolving Helpdesk calls and service requests from Departments
Short Definition	Management of ICT Hardware and Software support
Purpose / Importance	Measures the average turnaround time in days to finalise requests and calls logged related to ICT faults reported to the Office of the Premier ICT Unit and IT Service Desk by users across all provincial departments. It further indicates the level of services provided by the Office of the Premier ICT Unit and IT Service Desk to provide efficient problem and incident management to effectively and efficiently manage and resolve IT related problems and service requests reported by users, thereby contributing to effective service delivery by client departments.
Source / Collection of Data	Call Logging System and IT Service Desk system reports extracted from the database of requests reported/ calls logged reflecting date & time received; date and time resolved and closed and the period in days taken to resolve/ close the request/call.
Method of Calculation	<p>Numerator: Sum of minutes taken to resolve each request/call (SumofMinutes = CloseDateTime – CreateDateTime)</p> <p>Denominator: Total number of requests reported/calls logged</p> <p>Calculation: Numerator/Denominator Convert calculation result from minutes to days to get an average turnaround time for resolving Helpdesk calls.</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control</p>

	procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR will be an average of outputs for all 4 quarters divided by 4.
Data Limitations	Non availability of system due to power outages and cuts. Unavailability of/Inaccurate/incomplete records and deficiencies in capturing and uploading of system can influence the data negatively. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Impact
Calculation type	Non-cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Higher actual performance is desirable
Indicator responsibility	Senior Manager: Information Communication Technology

Indicator Title	2.4.1.6 Average percentage ICT network uptime and availability maintained
Short Definition	Management of computer network.
Purpose / Importance	Measures the average percentage uptime & availability of the Local Area Network (LAN) & Wide Area Network (WAN) for a 24 hour x 7 per weekday service and reliability and availability of the network infrastructure in order to provide better connectivity to systems and applications for the Office of the Premier. It is also indicative of the extent of successful monitoring by Office of the Premier ICT Unit to ensure network uptime and availability is maintained according to the SITA Service Level Agreement (SLA). Uptime is the amount of time when the network is available for users to utilise but excludes scheduled downtime for maintenance.
Source / Collection of Data	SITA NMS (Network Management System) & Network infrastructure availability Reports: <ul style="list-style-type: none"> • Router Switch Reports; • LAN Interface Reports; and • WAN Interface Reports.
Method of Calculation	<p>LAN UPTIME Add the levels of Availability of the Router/Switch Reports for the three months (quarter) and calculate (Total “Availability” of the 3 months divided by 3) the average for the quarter.</p> <p>WAN UPTIME Add the levels of Availability of both the LAN Interface Reports and the WAN Interface Reports for the three months (quarter) and calculate (Total “Availability” of the 6 Reports divided by 6) the average for the quarter.</p> <p>Please note Envisaged Network upgrades will affect the calculation method above for the WAN uptime due to the fact that, no WAN Interface Report will be available</p>

	<p>from quarter 2 onwards as follows:</p> <p>LAN UPTIME Add the levels of Availability of the Router/Switch Reports for the three months (quarter) and calculate (Total “Availability” of the 3 months divided by 3) the average for the quarter.</p> <p>WAN UPTIME Add the levels of Availability of both interfaces (interface 0/0 and 0/1) on the LAN Interface Reports for the three months (quarter) and calculate the average for the quarter. Month 1 = Interface 0/0 + Interface 0/1 Month 2 = Interface 0/0 + Interface 0/1 Month 3 = Interface 0/0 + Interface 0/1 Quarter Average = (Month 1+Month 2+Month 3) divided by 6</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output is an average of the 4 quarters outputs divided by 4.</p>
Data Limitations	No specific limitation. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Higher actual performance is desirable
Indicator responsibility	Senior Manager: Information Communication Technology

Indicator Title	2.4.1.7 Number of provincial departmental websites reviewed
Short Definition	Website development assistance to departments
Purpose / Importance	Measures the number of provincial departments with active Websites reviewed by OTP to ensure that websites are aligned and standardized to GCIS Minimum website content requirements. It also indicates the extent of effective monitoring of provincial Websites by Office of the Premier.
Source / Collection of Data	Website review report (Content Assessment, Server Status Assessment)
Method of Calculation	Count number of reviewed NCPG departmental websites. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree /

	compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 2 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of the updated intranet and internet websites for the year.
Data Limitations	No specific limitation. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c. When most of the actual validated outputs are zero from departments, it will then be meaningless to compute the provincial output. Therefore zero will be awarded overall.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Bi-Annually (2 nd & 4 th Quarter)
New indicator	No
Desired performance	Higher actual performance is desirable.
Indicator responsibility	Senior Manager: Information Communication Technology

Indicator Title	2.4.1.8 Number of reviewed Office of the Premier websites
Short Definition	Website development at Office of the Premier
Purpose / Importance	Measures the number of OTP active websites reviewed, aligned and standardized to GCIS Minimum website content requirements. This is to ensure that the Office of the Premier has its own departmental website to be updated with posts that are informative of accurate Office of the Premier specific contact details, leadership and management, services, work, activities and developments.
Source / Collection of Data	Website review report (Content Assessment, Server Status Assessment)
Method of Calculation	Count number of reviewed Office of the Premier websites. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 2 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of the internet websites for the year.
Data Limitations	No specific limitation. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output

Calculation type	Cumulative
Reporting cycle	Bi-Annual (1 st & 3 rd Quarter)
New indicator	No
Desired performance	Higher actual performance is desirable.
Indicator responsibility	Senior Manager: Information Communication Technology

Indicator Title	2.4.1.9 Number of Departments supported through the PGITOC (Provincial Government Information Technology Officers Council) Forum
Short Definition	Provincial ICT information sharing and ICT guidance.
Purpose / Importance	Management of IT governance as well as, overall IT for the Office of the Premier and the Northern Cape Provincial Departments on the following: <ul style="list-style-type: none"> ▪ ICT Hardware ▪ ICT Networks ▪ ICT Software
Source / Collection of Data	PGITOC <ul style="list-style-type: none"> ▪ E-Mail Invitations to all Departments ▪ Agenda ▪ Minutes ▪ Attendance Register
Method of Calculation	Count number of departments supported by way of consolidation of invites, minutes, and attendance registers. <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of all 4 quarterly outputs.</p>
Data Limitations	Non-Attendance of Departmental GITO's. Absence of electronic copies of minutes and other related documents. To ensure accuracy, validity and completeness of the reported outcomes, underlying supporting documents/evidence must accompany reports from departments. Source documents will enable OTP to validate claims in the reports from departments. In the absent of source documents, accuracy, validity, completeness of the output will not be ascertained. When most of the actual validated outputs are zero from departments, it will then be meaningless to compute the provincial output
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Quarterly
New indicator	Yes
Desired performance	Twelve (12) of Departments provided with technical support services.
Indicator responsibility	Senior Manager: Information Communication Technology

2.4.2 Communication

Indicator Title	2.4.2.1 Number of reports on Media Communications on Executive Council Outreach programmes
Short Definition	Communication services rendered to EXCO Outreach programmes.
Purpose / Importance	Indicates the number of media statements and articles/opinions issued on the work and decisions of EXCO to ensure that the citizens of the province are updated and in keeping with new developments regarding provincial policies and priority delivery areas.
Source / Collection of Data	Quarterly Provincial Communications Report. Record of/and physical media clippings of media statements and articles issued. Database of all EXCO outreaches undertaken and Feedback Reports
Method of Calculation	Count number of reports on media statements and articles/opinions issued as at the end of reporting cycle. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data Limitations	No specific limitation. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Better informed citizens in the province
Indicator responsibility	Chief Director: Communications Services

Indicator Title	2.4.2.2 Number of Strategic Speeches drafted for the Premier
Short Definition	Drafting of speeches to be delivered by Premier
Purpose / Importance	Indicates the number of strategic policy speeches (SOPA, Budget Speeches, Commemorative Days speeches) to be delivered by the Premier drafted to ensure content is of acceptable standard and quality, factual and consistent/in keeping with Government Communications Strategy & MTSF.
Source / Collection of Data	Record of Speeches drafted.
Method of Calculation	Count number of Speeches drafted as at the end of reporting cycle <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree /

	compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data Limitations	None. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Acceptable standard and quality.
Indicator responsibility	Chief Director: Communications Services

Indicator Title	2.4.2.3 Number of reports on media coverage on the Programme of Action of the NCPA
Short Definition	Media coverage of the Programme of Action of the Northern Cape Provincial Government.
Purpose / Importance	Indicates the weekly media coverage related to the Programme of Action across all 12 departments through articles, statements, opinions, letters, and advertisements in print and electronic media. It indicates the extent to which the Office of the Premier is able to coordinate all provincial departments to ensure effective, timely and coherent communication.
Source / Collection of Data	Quarterly Provincial Communications Reports. Record of media articles, statements, opinions, letters and advertisements indicating media coverage by NCPA (12 departments).
Method of Calculation	Number of reports on media coverage on the Programme of Action across 12 departments (count every page occupied) as at end of the reporting period. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data Limitations	Technological constraints, in accessibility of electronic media voice clips and inaccurate reports/information from Provincial departments. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not

	adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Weekly coverage on the Programme of Action on NCPA.
Indicator responsibility	Chief Director: Communications Services

Indicator Title	
Indicator Title	2.4.2.4 Percentage of Presidential Hotline cases resolved
Short Definition	Management of Provincial Presidential Hotline service.
Purpose / Importance	Indicates the extent of resolution of cases and complaints reported by the Public to the Presidential Hotline by all 12 Departments and Municipalities in the Northern Cape thereby increasing the NCPA & Municipal responsiveness and accountability to citizens.
Source / Collection of Data	Presidential Hotline reports
Method of Calculation	Provincial score in % attained by the Northern Cape for resolution of reported cases as reported by the Presidency as at end of reporting period. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be on the average of all the validated outputs
Data Limitations	Over/under reporting. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Higher actual performance would be desirable
Indicator responsibility	Chief Director: Communications Services

Indicator Title	
Indicator Title	2.4.2.5 Improved percentage Customer Satisfaction Index
Short Definition	Indicates the improvement in customer satisfaction with the responses and outcome of cases and complaints reported to the Presidential Hotline by all 12 Departments and Municipalities.
Purpose / Importance	Indicates the extent of improvement in customer satisfaction with the responses and outcome of cases and complaints reported to the Presidential Hotline by all 12 Departments and Municipalities in the Northern Cape thereby increasing the NCPA & Municipal responsiveness and accountability

	to citizens
Source / Collection of Data	Presidential Hotline reports
Method of Calculation	<p>Provincial score in % attained by the Northern Cape according to the customer satisfaction index as reported by the Presidency at end of the reporting period.</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be on the average of all the validated outputs</p>
Data Limitations	Over/under reporting. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Impact /Outcome
Calculation type	Non-cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Higher actual performance would be desirable
Indicator responsibility	Chief Director: Communications Services

Indicator Title	2.4.2.6 Number of Communication Forum meetings convened
Short Definition	Meetings of Provincial Communication Forum (PCF) convened.
Purpose / Importance	<p>Indicates the number of Communications Forum convened by Office of the Premier to guide and coordinate a coherent communication system. The Provincial Communications Forum comprises of the following:</p> <ul style="list-style-type: none"> • Office of the Premier • GCIS • SALGA • All other departments.
Source / Collection of Data	Agenda, Minutes and Attendance registers
Method of Calculation	<p>Count PCF meetings as at the end of the reporting period.</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output is the sum of all Forums</p>

	undertaken during the financial year
Data Limitations	Minutes only signed off within the following quarter once approved. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	To ensure coherence in government communication system.
Indicator responsibility	Chief Director: Communications Services

2.5 Programme Support

Indicator Title	2.5.1 Percentage of Programme 2 Quarterly Performance Reports submitted timeously
Short Definition	To track the submission, consolidation and first line verification of Programme 2 Quarterly Performance Reports submitted.
Purpose / Importance	Measures the effectiveness and efficiency of management/programme support, accountability and coordination systems within the Office of the DDG: Institutional Development (Programme 2).
Source / Collection of Data	<ul style="list-style-type: none"> • Programme 2 Quarterly Performance Reports submitted timely. Units namely: <ul style="list-style-type: none"> • Human Resource Management • Efficiency Services • Labour Relations • Employee Health and Wellness • Diversity Management • Human Resource Development and Transversal Co-ordination • Performance Management and Capacity Development • Legal Services • Information Technology and Infrastructure • Communication Services • Programme Support
Method of Calculation	<p>Numerator: The number of Consolidated Programme 2 Performance Reports submitted to Policy and Planning Units as at the end of the reporting period.</p> <p>Denominator: Number of Consolidated Programme 2 Performance Reports due for submission as at end of reporting cycle. The total sum is 11 units within Programme 2.</p> <p>Calculation : Numerator/ Denominator x100</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control</p>

	procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of outputs (plans) for the financial year divided by 4.
Data Limitations	Late submission of quarterly reports from Institutional Development units. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Submission of quality and validated (1 st line verification) Programme 2 Quarterly Performance Reports
Indicator responsibility	Deputy Director General: Institutional Development

Indicator Title	2.5.2 Number of Governance and Administration (G&A) Technical Clusters meetings convened
Short Definition	Number of Governance and Administration (G&A) Technical Cluster meetings convened and held to support the Cluster and EXCO Clusters.
Purpose / Importance	It indicates the number of Technical Clusters meetings convened in support of G& A Cluster and Executive Council (EXCO) Cluster. The main purpose being to ensure that matters referred to the G&A Cluster and EXCO have been sufficiently canvassed and processed at a technical/administrative level to ensure informed decision-making at EXCO level.
Source / Collection of Data	Notice, Agenda, Minutes and Attendance registers of the G&A Technical Cluster meetings held. Terms of Reference.
Method of Calculation	All G&A Technical Cluster meetings held as at the end of the reporting period. Annual Performance Report (APR) annual aggregation process The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated outputs for all 4 quarters.
Data Limitations	Availability & attendance of all members. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output

Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Matters referred to EXCO Cluster for informed decision making.
Indicator responsibility	Deputy Director General: Institutional Development

Indicator Title	
2.5.3 Percentage of Outcome 12 Provincial Programme of Action (POA) targets achieved	
Short Definition	Percentage of quarterly targets achieved in the Outcome 12 Provincial Programme of Action by service delivery partners.
Purpose / Importance	This indicates the extent to which progress is made in building an efficient, effective and development-oriented Public Service within the Northern Cape province by measuring actual collective performance against planned targets by all stakeholders and role-players across all sectors, and as such the realisation of Vision 2030 as espoused in the National Development Plan.
Source / Collection of Data	Consolidated Outcome 12 Reports as at the end of each quarter based on input/reports from all Outcome 12 delivery partners on sub-outcomes for which they are responsible.
Method of Calculation	<p>Numerator: Number of Outcome 12 POA targets fully achieved as at end of reporting cycle</p> <p>Denominator: Total Number of Targets planned as per the Outcome 12 POA for the performance cycle</p> <p>Calculation: Numerator/ Denominator x 100</p> <p>The reporting period relates to the previous quarter due to the fact that the POA is only required after the submission of the Quarterly Performance Report information.</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the average of all 4 quarterly validated outputs divided by 4.</p>
Data Limitations	<p>Under/over reporting /non submission/incomplete documentation and unverified information may lead to inaccuracies in reports.</p> <p>Ambiguous/poorly designed Outcome & sub-outcome indicators/ outputs/ activities and targets.</p> <p>Deficiencies in record keeping, capturing and compilation of reports. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c. When most of the actual validated outputs are zero from departments, it will then be</p>

	meaningless to compute the provincial output. Therefore zero will be awarded overall.
Type of Indicator	Qualitative Outcome
Calculation type	Non-cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Reports received from all Outcome 12 stakeholders per quarter
Indicator responsibility	Deputy Director General: Institutional Development

Indicator Title	2.5.4 Percentage of Outcome 5 Provincial Programme of Action (POA) targets achieved
Short Definition	Percentage of quarterly targets achieved in the Outcome 5 Provincial Programme of Action by service delivery partners.
Purpose / Importance	This indicates the extent to which progress is made in building a skilled and capable workforce within the province by measuring actual collective performance against planned targets by all stakeholders and role-players across all sectors.
Source / Collection of Data	Consolidated Outcome 5 Reports as at end of each quarter based on input/reports from all Outcome 5 service delivery partners on sub-outcomes for which they are responsible.
Method of Calculation	<p>Numerator: Number of Outcome 5 POA targets fully achieved as at end of reporting cycle</p> <p>Denominator: Total Number of Targets planned as per the Outcome 5 POA for the performance cycle</p> <p>Calculation: Numerator/ Denominator x 100 %</p> <p>The reporting period relates to the previous quarter due to the fact that the POA is only required after the submission of the Quarterly Performance Report information.</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the average of all 4 quarterly validated outputs divided by 4.</p>
Data Limitations	<p>Under/over reporting /non submission/incomplete documentation and unverified information may lead to inaccuracies in reports.</p> <p>Ambiguous/poorly designed Outcome & sub-outcome indicators/outputs/ activities and targets.</p> <p>Deficiencies in record keeping, capturing and compilation of reports. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c. When</p>

	most of the actual validated outputs are zero from departments, it will then be meaningless to compute the provincial output. Therefore zero will be awarded overall.
Type of Indicator	Qualitative Outcome
Calculation type	Non-cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Reports received from all Outcome 5 stakeholders per quarter
Indicator responsibility	Deputy Director General: Institutional Development

Indicator Title	2.5.5 Number of Programme 2 meetings convened
Short Definition	Counts the number of functional Programme 2 Management/Co-ordination Structures convened and held.
Purpose / Importance	It indicates the number of formalised structures that are in place and functional for effective coordination, monitoring and evaluation of Programme 2 functions. The meeting structures include amongst others: <ul style="list-style-type: none"> • Institutional Development Executive Branch Meetings • Institutional Development Extended Branch Meetings • Institutional Development General Branch Meetings • APP Review Sessions • Outcome 12 Implementation Forums • Outcome 5 Implementation Forums • Programme 2 Risk Management Meetings • Unit meetings
Source / Collection of Data	Notice, Agenda, Minutes and Attendance registers of all Programme 2 Management/Coordination Structure meetings held.
Method of Calculation	Programme 2 Management/Coordination Structure meetings held as at the end of the reporting period. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data Limitations	Availability & attendance of all members. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	On target

Indicator responsibility	Deputy Director General: Institutional Development
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Programme 3: Governance & Strategic Management

3.1 Inter Governmental Relations

Indicator Title	3.1.1 Number of consolidated reports on the Intergovernmental Fora in the province
Short Definition	Refers to the reports consolidated from the different Intergovernmental fora in terms of the relations and disputes between different spheres of government and state-owned entities.
Purpose / Importance	To promote and facilitate effective intergovernmental relations between the different spheres of government. Intergovernmental forums serve as consultative platforms to discuss and resolve disputes amongst departments and municipalities.
Source / Collection of Data	<p>Consolidated Quarterly Report approved by the Deputy Director-General</p> <ul style="list-style-type: none"> • Premier's Intergovernmental Forum held quarterly <ul style="list-style-type: none"> ○ (Invites, Agendas, Attendance Registers, Minutes and Resolution Matrices) • Technical PIGF Forum held quarterly <ul style="list-style-type: none"> ○ (Invites, Agendas, Action List and Attendance Registers)
Method of Calculation	<p>Numeric count of 1 consolidated report per quarter</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	Co-operation of provincial departments and municipalities to participate and provide accurate data and reports, on time. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	One consolidated report per quarter
Indicator responsibility	Senior Manager: IGR Unit

Indicator Title	3.1.2 Number of International engagements facilitated by the Office of the Premier
Short Definition	Facilitation refers to the application of note verbale of the out- and inbound diplomatic missions by the province. This in line with Outcome 11 of the Provincial and National Priorities.
Purpose / Importance	To provide support to inbound and outbound international missions,

	diplomacy and image building initiatives, as well as municipal international relations in order to promote the provincial interest.
Source / Collection of Data	<p>Outbound missions:</p> <ul style="list-style-type: none"> • Approved Executive Council Memorandum • Approved Director-General Memorandum • Note Verbale from DIRCO (Not applicable to SADC countries, e.g. Namibia) • Report on the international and diplomatic missions <p>Inbound missions:</p> <ul style="list-style-type: none"> • Notice/ invitations from visiting mission
Method of Calculation	<p>Numeric count of all international missions, diplomacy initiatives and Municipal international relations exercises facilitated per quarter</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as the 4th quarter validated output</p>
Data Limitations	No proper schedules and plans from departments. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	No
Desired performance	Successful facilitation of International engagements by OTP
Indicator responsibility	Senior Manager: IGR Unit

Indicator Title	3.1.3 Number of Provincial Official Donor Assistance (ODA) committee meetings convened
Short Definition	Facilitate the provincial engagements relating to the sourcing of donor funding for the province.
Purpose / Importance	To Official Donor Assistance(ODA) in pursuance of provincial and municipal development
Source / Collection of Data	<p>Number of ODA meetings convened quarterly.</p> <ul style="list-style-type: none"> - Invites, agenda, minutes, attendance registers and resolution matrices of Provincial ODA Meetings - Concept Note on ODA
Method of Calculation	<p>Numeric count of provincial committee meetings held per quarter</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree /</p>

	compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data Limitations	Irregular attendance of meetings by members. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Four (4) quarterly ODA committee meetings held
Indicator responsibility	Senior Manager: IGR Unit

Indicator Title	3.1.4 Number of official government events supported with protocol service by the Office of the Premier
Short Definition	Refers to Official Protocol and diplomatic services rendered by the IGR on all official national, provincial and ceremonial events hosted by the Premier
Purpose / Importance	To provide strategic and effective protocol services to provincial government and ceremonial events as well as national events hosted by the province
Source / Collection of Data	Official Provincial Government Events Calendar Notice/Invitation Programme of the event
Method of Calculation	Sum of all events where protocol services were rendered in the Province per quarter <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data Limitations	None. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c
Type of Indicator	Output
Calculation type	Cumulative

Reporting cycle	Quarterly
New indicator	No
Desired performance	Successfully supported events
Indicator responsibility	Senior Manager : IGR Unit

3.2.1 Provincial Service Delivery Programmes Monitoring and Evaluation

Indicator Title	3.2.1.1 Number of quarterly reports on the co-ordination of Provincial Monitoring and Evaluation
Short Definition	A consolidated report on the programmes and activities executed relating to the Provincial Co-ordination of the M & E functions within the Provincial Administration and Local Government.
Purpose / Importance	To highlight quarterly progress on the co-ordination of the M&E functions, the challenges and recommendations.
Source / Collection of Data	Four (4) consolidated quarterly reports approved by the DDG: P3 <ul style="list-style-type: none"> ○ M & E Forum meeting held quarterly <ul style="list-style-type: none"> - Notice of meeting - Attendance Register - Minutes ○ Development and implementation of the Provincial M & E Framework <ul style="list-style-type: none"> - Consultation sessions with departments and District Municipalities - Minutes of consultation sessions - Attendance Register of consultation sessions ○ M & E Workshops co-ordinated by DPME / DPMSA/ NSG <ul style="list-style-type: none"> - DPME notice - Attendance Register - Minutes of meeting
Method of Calculation	One (1) consolidated quarterly report count for one (1) <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	In year budget reprioritisation, Workshops dependent on DPME processes. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Same as per the quarterly targets
Indicator responsibility	Unit Head: Provincial Service Delivery Intervention Programmes M&E

Indicator Title	3.2.1.2 Number of quarterly reports on implementation of evaluations within the Province
Short Definition	A consolidated report on the implementation of evaluations on activities carried out by provincial departments as per the DPME Evaluation Framework.
Purpose / Importance	To coordinate the implementation of evaluations and plans by provincial departments in accordance with DPME Evaluation Framework.
Source / Collection of Data	<p>Four (4) consolidated quarterly reports approved by the DDG: P3</p> <p>Primary Source: Approved Evaluation Plans of provincial departments</p> <p>Supporting Evidence: A quarterly analysis report on the co-ordination of the implementation of Evaluation Plans across the provincial departments. Report to include the following:</p> <ul style="list-style-type: none"> ○ Status of Departmental evaluation plans by departments <ul style="list-style-type: none"> ▪ Signed/approved evaluation plan for departments ▪ Status of implementation of the Evaluation Plan ▪ Status of improvement plan ▪ Implementation of recommendations ○ Provincial Evaluation Plan ○ Establish evaluation committees <ul style="list-style-type: none"> ▪ Working groups ▪ Steering Committee ▪ Provincial Steering Committee ○ Support provided to departments to conduct evaluations
Method of Calculation	<p>One (1) consolidated quarterly report count for one (1)</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	<p>In year budget reprioritisation</p> <p>Capacity of departments to conduct evaluations</p> <p>Improvement plans are dependent on evaluation conducted by departments</p> <p>Non finalisation of evaluation plans by provincial departments To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.</p>
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No

Desired performance	Same as per quarterly targets
Indicator responsibility	Unit Head: Provincial Service Delivery Intervention Programmes M & E

Indicator Title	
3.2.1.3 Number of quarterly reports on the implementation of Frontline Service Delivery Monitoring Programme	
Short Definition	A consolidated report on Frontline Service Delivery Monitoring which entail base-line, feedback and improvement monitoring and verification meetings at service delivery facilities as per the Joint Annual Plan for FSD.
Purpose / Importance	To instil the culture of self-monitoring in departments so that improvements to the quality of service delivery is realised.
Source / Collection of Data	<p>Four (4) consolidated quarterly reports approved by the DDG: P3 Primary Source: Joint Annual Plan for FSD for the 2017/18 financial year Supporting Evidence as per the annual schedule roll out:</p> <ul style="list-style-type: none"> • Baseline Monitoring <ul style="list-style-type: none"> ○ Provincial and National Annual Plans ○ Questionnaires ○ Dashboard reports • Feedback Sessions <ul style="list-style-type: none"> ○ Dashboard reports ○ Invitation letters ○ Attendance Registers ○ Development of Improvement plans • Improvement Monitoring Meetings <ul style="list-style-type: none"> ○ Monitoring of Improvement plans ○ Invitation letters ○ Attendance Registers • Improvement Verifications <ul style="list-style-type: none"> ○ Verification of Improvement Plans ○ Attendance Registers
Method of Calculation	<p>One consolidated FSDM report counts for one (1)</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	In year budgetary re-prioritisation. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly

New indicator	No
Desired performance	Same as the quarterly targets
Indicator responsibility	Unit Head : Provincial Service Delivery Intervention Programmes M & E

Indicator Title	3.2.1.4 Number of quarterly reports on the implementation of the Citizen Based Monitoring Programme
Short Definition	A consolidated report on the coordination of Citizen Based Monitoring which entail the implementation and monitoring of commitments by the selected sector departments as per the Annual Schedule for CBM.
Purpose / Importance	To coordinate the implementation of CBM in accordance with CBM Framework
Source / Collection of Data	<p>Four (4) consolidated quarterly reports approved by the DDG: P3 Primary Source: Annual 2017/18 Schedule for CBM Supporting evidence in accordance with annual schedule of engagement with municipalities:</p> <ul style="list-style-type: none"> ○ Introduction/launch of CBM <ul style="list-style-type: none"> - Consultation sessions with departments and Municipalities - Minutes of consultation sessions - Attendance Register of consultation sessions ○ Survey <ul style="list-style-type: none"> - Survey is administered - Community and staff are surveyed - Survey feedback is summarised in a report ○ Survey response <ul style="list-style-type: none"> - Focus groups from each department/facility discuss survey report and explore the core reasons for the problems or challenges - Management and staff work out what to do and agree on agree on actions - Facility draws up a commitment charter - Community meeting to amend and adopt commitment charter. ○ Monitoring Commitments <ul style="list-style-type: none"> - Commitment charter is distributed in the community and displayed in the facility. - Departments monitor and report on progress to OTP and DPME ○ Assessment/Evaluation report of CBM <ul style="list-style-type: none"> ● Consolidated assessment/evaluation report on CBM
Method of Calculation	<p>One consolidated CBM report counts for one (1)</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	In year budgetary re-prioritisation. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted

	Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Same as the quarterly targets
Indicator responsibility	Unit Head: Provincial Service Delivery Intervention Programmes M & E

Indicator Title	3.2.1.5 Number of reports on interventions across departments towards performance improvement of the Management Performance Assessment Tool (MPAT)
Short Definition	A consolidated report on the monitoring of the implementation Management Performance Assessment Tool.
Purpose / Importance	To improve management practices and performance within the administration
Source / Collection of Data	<p>Four (4) consolidated quarterly reports approved by the DDG: P3</p> <p>Primary Source:</p> <ul style="list-style-type: none"> • Departmental Improvement Plans • MPAT Self-assessment scores, and final results as provided by DPME <p>Supporting Evidence:</p> <ul style="list-style-type: none"> ○ Monitoring Sessions (Quarter 1) <ul style="list-style-type: none"> - Monitoring of the compliance register - Attendance Registers - Performance improvement sessions - Report on the performance improvement sessions - Attendance register - Invitation letters ○ Information Sessions (Quarter 1) ○ Reports on the status of MPAT evidence submission (Quarter 2) ○ Assessment Report on the status of self-assessment concluded in the 2nd quarter (Quarter 3) ○ Analysis of the improvement plans (Quarter 3) ○ Report on the status of challenge period (Quarter 4)
Method of Calculation	<p>One consolidated report counts for one (1)</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	In year budgetary re-prioritisation. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted

	Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Same as the quarterly targets
Indicator responsibility	Unit Head: Provincial Service Delivery Intervention Programmes M & E

Indicator Title	3.2.1.6 Number of quarterly reports on the monitoring of the War on Poverty Programme
Short Definition	A consolidated report on the monitoring of the performance of the referrals of the War on Poverty Programme.
Purpose / Importance	To ensure services that are identified are delivered by district and departments
Source / Collection of Data	<p>Four (4) consolidated quarterly reports approved by the DDG: P3</p> <p>Primary Source:</p> <ul style="list-style-type: none"> ○ Quarterly District War Room meetings. <ul style="list-style-type: none"> - Notice of meeting - Attendance Register - Minutes ○ Quarterly Provincial War Room meetings. <ul style="list-style-type: none"> - Notice of meeting - Attendance Register - Minutes <p>Supporting evidence:</p> <ul style="list-style-type: none"> ○ Compile quarterly analysis report on the performance of districts and departments of the referrals of the WOP programme. ○ Submit quarterly Memorandum to the Technical Cluster on the WOP programme.
Method of Calculation	<p>One consolidated WOP report counts for one (1)</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	In year budgetary re-prioritisation. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output

Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Same as the quarterly targets
Indicator responsibility	Unit Head: Provincial Service Delivery Intervention Programmes M & E

3.2.2 Sub Programme: Provincial Performance Information Monitoring and Evaluation

Indicator Title	
3.2.2.1 Number of consolidated quarterly assessment reports on Provincial Performance Information	
Short Definition	Refers to the consolidated assessment and reporting of quarterly performance of departments in the Provincial administration: <ul style="list-style-type: none"> as per their approved APP's and Quarterly outputs as per QPR model.
Purpose / Importance	<ul style="list-style-type: none"> To report on the Quarterly Performance of departments as per the DPME reporting requirements. (QPR Guidelines, Framework for SP and APP, Treasury Instructions) To establish performance progress against departmental plans and targets linked to the financial year.
Source / Collection of Data	<p>Primary source: Approved departmental APP, QPR Model, Departmental narrative reports</p> <p>Supporting evidence:</p> <ul style="list-style-type: none"> QPR Workshop Minutes, Agenda, Attendance Register (1st Q) 17/18 QPR Circular (1st Q) Signed off letter on submission of QPR of provincial departments issued to DPME (each quarter) Acknowledgement letter to HOD's signed by DG for each quarter (each Quarter) 17/18 QPR Assessment of provincial departments (each quarter) <p><i>NB: Quarter reports relates to the Previous quarter.</i></p>
Method of Calculation	<p>One consolidated assessment report counts for one (1)</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	Non submission of quarterly narrative reports by provincial departments as per regulated dates. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative

Reporting cycle	Quarterly
New indicator	No
Desired performance	Four (4) consolidated reports
Indicator responsibility	Unit Head: Provincial Performance Information M & E

Indicator Title	
3.2.2.2 Number of consolidated assessment reports on the Draft Annual Performance Plans of Provincial Departments	
Short Definition	Refers to the consolidated assessment report of Departmental first and second draft APPs submitted in accordance with policy and regulatory frameworks.
Purpose / Importance	To guide and support departments and ensure compliance to regulatory frameworks (QPR Guidelines, Framework for SP and APP, Treasury Instructions)
Source / Collection of Data	<p>Primary source: 1st and 2nd Draft APP of departments, customised indicators</p> <p>Supporting evidence: Letter to DPME signed by the DG on the submission of 1st and 2nd draft Annual Performance Plans Letter to DPME signed by the DG on the submission of the assessment of the draft Annual Performance Plans Assessment reports of APP submissions by provincial departments (draft 1 APP (Q3) and draft 2 APP (Q4))</p>
Method of Calculation	<p>One consolidated assessment report counts for one (1)</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 2 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 2 quarters.</p>
Data Limitations	<p>Non submission of first and second draft APPs Late submission of draft APP's by departments. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.</p>
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Bi-Annually (3 rd and 4 th Quarter)
New indicator	No
Desired performance	Consolidated assessment reports of 13 departments
Indicator responsibility	Unit Head: Provincial Performance Information M&E

Indicator Title	
3.2.2.3 Number of consolidated quarterly performance assessment reports on the Implementation of the Provincial Programme of	

Action	
Short Definition	Refers to the consolidated quarterly assessment of quarterly performance by provincial departments against the approved Provincial Programme of Action (POA)
Purpose / Importance	To establish progress in the Province on POA progress, and to identify challenges and remedial measures relating to implementation.
Source / Collection of Data	<p>Consolidated progress report on the implementation of the Provincial Programme of Action for each quarter.</p> <ul style="list-style-type: none"> • Quarterly Memo to G & A Technical cluster. • Quarterly POA performance analysis presentations at Cluster Meetings attended • Quarterly EXCO MEMO
Method of Calculation	<p>One consolidated POA Narrative Report counts for one (1)</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	<p>Non submission of quarterly POA reports by provincial department. Non-functional implementation Forums Technical Cluster meetings not being held according to annual schedule. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.</p>
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	4 consolidated performance reports
Indicator responsibility	Unit Head: Provincial Performance Information M & E

3.3 Provincial Policy Management

3.3.1 Special Programmes

Indicator Title	3.3.1.1 Number of Departments assessed for Special Programmes responsive strategies
Short Definition	<p>Identify departmental strategies to be assessed for their Special Programmes Rights and their Moral Regeneration sensitiveness (strategies include: Policies, plans, reports and programmes).</p> <ul style="list-style-type: none"> • <u>Special Programmes includes the following offices:</u> Office on the Rights of the Child Office on the Status of Persons with Disabilities Office on the Status of Women

	<p>Moral Regeneration Movement</p> <ul style="list-style-type: none"> • Target Groups refers to Gender, Women, Children and Persons with disabilities • Responsive strategies Strategies that takes into account the rights of target groups and the inclusion of the objectives of the charter of positive values.
Purpose/Importance	To ensure that all Government strategies address the needs of Target Groups in a disaggregated manner and promotes the Charter of Positive Values in service delivery.
Source/collection of Data	<p>Primary source: Quarterly reports on the number of departments assessed.</p> <p>Secondary source: Departmental Strategic Plans Departmental Annual APP Plans</p>
Method of calculation	<p>One (1) consolidated report per quarter</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data limitations	Lack of cooperation and buy-in from Departments. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	Yes
Desired Performance	All twelve departmental strategies assessed.
Indicator responsibility	Senior Manager: Special Programmes

Indicator Title	3.3.1.2 Number of District Municipalities assessed for Special Programmes responsive Integrated Development Plans
Short Definition	<p>Identify district Municipal Integrated Development Plans to be assessed for their Special Programmes Rights and their Moral Regeneration sensitiveness (strategies include: policies, plans, reports and programmes).</p> <ul style="list-style-type: none"> • <u>Special Programmes includes the following offices:</u> Office on the Rights of the Child Office on the Status of Persons with Disabilities Office on the Status of Women Moral Regeneration Movement

	<ul style="list-style-type: none"> • <u>Target Groups</u> refers to Gender, Women, Children and Persons with disabilities • <u>Responsive strategies</u> Strategies that take into account the rights of target groups and the inclusion of the objectives of the charter of positive values.
Purpose/Importance	To ensure that District Municipal Integrated Development Plans address the needs of Target Groups in a disaggregated manner and promotes the Charter of Positive Values in service delivery.
Source/collection of Data	Number of District Municipality assessment reports per quarter
Method of calculation	<p>Primary source: Quarterly assessment reports on the number of District Municipalities assessed</p> <p>Secondary source: District Municipality Integrated Development Plans</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data limitations	Lack of cooperation and buy-in from District Municipalities. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	Yes
Desired Performance	All five District Municipal strategies assessed
Indicator responsibility	Senior Manager: Special Programmes

Indicator Title	3.3.1.3 Number of Special Programmes Forums convened
Short Definition	Counts the number of Special Programme forums convened.
Purpose/Importance	Refers to number of Special Programme Forum meetings convened as part of Office of the Premiers co-ordinating function.
Source/collection of Data	Programmes, Notice, Agenda, Minutes, Attendance Registers
Method of calculation	<p>Simple count of forums convened.</p> <p><u>Special Programmes Forums:</u> ORC: Provincial Children's Rights Committee OSPD: Provincial Disability Rights Committee OSW: Gender Machinery & Senior Women Managers Forum MRM: Provincial MRM Forum</p>

	<u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data limitations	Non-attendance of Municipal and Departmental focal points. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	Yes
Desired Performance	Five (5) forums established and strengthened
Indicator responsibility	Senior Manager: Special Programmes

Indicator Title	3.3.1.4 Number of Advocacy Programmes coordinated
Short Definition	Programmes calling for the recognition, promotion and protection of the rights of targeted groups and rebuilding the moral fibre.
Purpose/Importance	The indicator aims at empowering, commemorating and sensitising Government and Society on the rights of Target Groups and restoring the moral fibre.
Source/collection of Data	Primary source: Programmes, Notice and Agenda Secondary source: Minutes, Attendance Registers, Media Clips, Photographs
Method of calculation	Simple count of Advocacy programmes held, which include: <u>CAPACITY BUILDING:</u> ORC: Provincial Training on Children’s Rights mainstreaming OSPD: Provincial Training on Disability Rights mainstreaming and White Paper on the Rights of Persons with Disabilities OSW: Provincial Training on Gender Rights mainstreaming MRM: Training on the Charter of Positive Values <u>CELEBRATING COMMEMORATIVE DAYS:</u> ORC: International Children’s Day, Day of the African Child, National Children’s Day, Provincial Children’s Rights Legislature sitting and Children’s Day OSPD: Disability Rights Awareness month (DRAM) OSW: Women’s Day, 16 Days of Activism on no violence against Women and Children and International Women’s Day MRM: Moral Regeneration Month <u>Annual Performance Report (APR) annual aggregation process</u>

	The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data limitations	Lack of co-operation from all stakeholders. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	Yes
Desired Performance	Effective co-ordination of advocacy programmes.
Indicator responsibility	Senior Manager: Special Programmes

3.3.2 Policy Coordination Research and Development

Indicator Title	3.3.2.1 Number of quarterly performance reports submitted in line with prescribed timeframes
Short Definition	Quarterly reports indicating progress against planned targets as set in the Departmental Annual Performance Plan.
Purpose / Importance	To ensure compliance to regulatory frameworks (QPR Guideline, Strategic Plan and Annual Performance Plan Framework, Framework for Managing Programme Performance Information)
Source / Collection of Data	Primary source: Approved Quarterly Performance Reports (Q1, Q2, Q3 and Q4) Secondary source: E-mail from Provincial Performance Information Management Unit acknowledging receipt
Method of Calculation	One consolidated narrative report counts for one (1) <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data Limitations	None. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of

	Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Approved quarterly performance reports submitted timeously
Indicator responsibility	Executive Manager: Policy and Planning

Indicator Title	3.3.2.2 Number of Annual Performance Plan tabled as per legislated deadlines
Short Definition	Departmental APP submitted in accordance with policy and regulatory frameworks
Purpose / Importance	To ensure compliance to regulatory frameworks (Strategic Plan and Annual Performance Plan Framework)
Source / Collection of Data	Primary source: Approved Annual Performance Plan tabled (Q4) Secondary source: E-mail or letter from Provincial Performance Information Management Unit acknowledging receipt
Method of Calculation	Approved Annual Performance Plan tabled <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4 th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4 th quarter.
Data Limitations	None. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non- cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	No
Desired performance	Approved Annual Performance Plan tabled timeously
Indicator responsibility	Executive Manager: Policy and Planning

3.3.3 Development Planning

Indicator Title	3.3.3.1 Number of advisory memorandums submitted to Executive Council on the progress of the PGDP
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Short Definition	<ul style="list-style-type: none"> To Provide Strategic Advice to Executive Council on the progress of the PGDP Advice on SPLUMA implementation and Government priorities
Purpose / Importance	To provide advice to political principals to facilitate decisions making on issues that requires expert opinion and advice
Source / Collection of Data	<p>Primary:</p> <ul style="list-style-type: none"> Provincial Planning Forum (PGDP) National SPLUM Forum NSDF Technical Working Groups Technical Cluster meetings <p>(Invite, Agenda, Minutes, Attendance register and presentations)</p> <p>Secondary:</p> <p>Executive Council signed Memorandums</p>
Method of Calculation	<p>Verification of Advisory Memorandums - Number of signed advisory Memorandums technical cluster/cluster and EXCO</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	<p>Postponement of Executive Council Meetings</p> <p>Late approval of memorandums by Clusters. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.</p>
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Produce 4 Quarterly advisory Memorandums to EXCO for resolution.
Indicator responsibility	Senior Manager: Development Planning

Indicator Title	3.3.3.2 Number of research assignments completed by 31 March 2018
Short Definition	Research assignments completed and approved
Purpose / Importance	OTP is using the results of research to inform its work. Research results to be presented at Provincial Planning Forum
Source / Collection of Data	<p>Research reports completed</p> <p>Research reports completed and approved</p> <ul style="list-style-type: none"> ➤ Governance model for the Northern Cape ➤ Government procurement and SMME

	Provincial Consultations Questionnaires
Method of Calculation	Simple count of research assignments completed by the end of the financial year <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 4 th quarter by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the same as validated output of the 4 th quarter.
Data Limitations	Governance model for the NC <ul style="list-style-type: none"> Confidentiality with regard to the Cluster System Government procurement and SMME <ul style="list-style-type: none"> Treasury current procurement systems No approved provincial SMME Fragmented information in relation to SMME's. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Non-Cumulative
Reporting cycle	Annually (4 th Quarter)
New indicator	Yes
Desired performance	Two Research assignments completed and submitted by 31 March 2018
Indicator responsibility	Senior Manager: Development Planning

3.4 Programme Support

Indicator Title	3.4.1 No of departments with approved service delivery charter within the Provincial Administration
Short Definition	Number of departments that have approved service delivery charter within the Northern Cape Provincial Administration.
Purpose / Importance	This indicator ensures that the provincial departments have approved service delivery charters.
Source / Collection of Data	Copies of approved service delivery charters from four departments in the provincial administration. The target will be four targets in 2017/18 financial year as a start.
Method of Calculation	Simple count of departments that have approved service delivery charter in the provincial administration. <u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is

	independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.
Data Limitations	Departments not submitting reports. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	Yes
Desired performance	Quarterly reports submitted timeously
Indicator responsibility	Deputy Director General: Governance and Strategic Management

Indicator Title	3.4.2 Number of Batho Pele forums convened
Short Definition	Number of Batho Pele meetings coordinated
Purpose / Importance	To create learning platform for departments across the three spheres through their Batho Pele Coordinators. To share initiatives, experiences and lessons learnt during the implementation process geared towards improving service delivery
Source / Collection of Data	<ul style="list-style-type: none"> • Batho Pele Forum • Meeting Schedule/Notices • Agenda • Attendance Register • Minutes • Presented Presentations from Departments and Office of the Premier • Resolutions
Method of Calculation	<p>Number of Batho Pele meeting held per quarter</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	Departments not attending the Batho Pele Forums. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.

Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Batho Pele meetings held per quarter
Indicator responsibility	Deputy Director General: Governance and Strategic Management

Indicator Title	
3.4.3 Number of reports on the Service Delivery Improvement Plans (SDIP) within the Northern Cape Provincial Administration	
Short Definition	Number of SDIP developed
Purpose / Importance	Strengthening the co-ordination, collaboration and facilitation of the institutionalization of service delivery improvement planning
Source / Collection of Data	<ul style="list-style-type: none"> ❖ Report on the implementation of SDIP ❖ Approved SDIP's by all Provincial Departments ❖ Follow Up Meetings with Departments ❖ Meeting Schedule/Notices ❖ Annual Reports 2016/17 ❖ Attendance Register ❖ Minutes ❖ Resolutions
Method of Calculation	<p>Number of Progress report per quarter</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	Non submission of SDIP by Provincial Departments. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	Progress report per quarter
Indicator responsibility	Deputy Director General: Governance and Strategic Management

Indicator Title	
3.4.4 Number of programme support engagements	
Short Definition	Counts the number of functional Programme 3 engagements held
Purpose / Importance	It indicates the number of engagements undertaken to ensure the effective coordination, monitoring and evaluation of Programme 3 functions. The

	<p>meeting structures include amongst others:</p> <ul style="list-style-type: none"> • Governance and Strategic Management Executive Branch Meetings • Governance and Strategic Management General Branch Meetings • APP Review Sessions • Outcome 11 Implementation Forums • Programme 3 Risk Management Meetings • Programme 3 Unit meetings
Source / Collection of Data	<p>The reports will include the following:</p> <p>Agenda, Minutes and Attendance registers of all Programme support engagements.</p>
Method of Calculation	<p>All Programme support engagements reports submitted at the end of the reporting period</p> <p><u>Annual Performance Report (APR) annual aggregation process</u> The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of all 4 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of all 4 quarters.</p>
Data Limitations	<p>Non /Late/a Incomplete submission by the Executive Managers and Senior Managers of the Units. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.</p>
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Quarterly
New indicator	No
Desired performance	To produce 4 programme support reports per annum
Indicator responsibility	Deputy Director General: Policy and Governance

Indicator Title	3.4.5 Number of reports on the implementation of the MPAT Improvement Plan for KPA 1
Short Definition	Respective monitoring done in line with the Strategic Plan and Annual Performance Plan Framework
Purpose / Importance	To ensure that the OTP units implement the Strategic Plan and ensure that the APP is aligned to the requirements of the Strategic Plan and APP Framework
Source / Collection of Data	<p>Primary source: Consolidated information for the Improvement Plan Evidence submitted to MPAT co-ordinator for moderation under KPA 1</p>
Method of Calculation	<p>Consolidated report</p> <p><u>Annual Performance Report (APR) annual aggregation process</u></p>

	The first step to be performed during the annual aggregation will be to agree / compare the portfolio of evidence (POE) to the validated output per each performance indicator of the 2 quarters by a different team which is independent of the validating quarterly outputs. This internal control procedure ensures that all the information in the APR is accurate, valid and complete. Should there be any discrepancies that are detected when performing the aforementioned internal control procedures, appropriate disclosures will be made in the APR. APR output will be the sum of validated output of the 2 quarters.
Data Limitations	The goals that do not speak to the mandate of the Office of the Premier The objectives that are not aligned to the goals Indicators which are not clear and aligned to the SMART principle. To avoid any ambiguity pertaining validity, accuracy and completeness issues as it pertains to the actual achievements of the target, zero will be awarded to actual output when the submitted Portfolio of Evidence (POE) is not adequate/insufficient/inconsistent to the pre-determined requirements of this TID as documented under data sources, method of calculation e.t.c.
Type of Indicator	Output
Calculation type	Cumulative
Reporting cycle	Bi-Annually (1st and 2nd Quarters)
New indicator	No
Desired performance	Higher actual performance is desirable
Indicator responsibility	Deputy Director General: Governance and Strategic Management