Letterhead

**MINUTES OF THE NATIONAL MANAGEMENT QUARTERLY PERFORMANCE REVIEW FOR PERIOD ENDED JUNE 2020/21 (Q1 )**

**ONLINE MEETING**

**DATE :13TH AUGUST 2020**

**CHAIRPERSON:NATIONAL COMMISSIONER**

**FACILITATOR**

RC GAUTENG (MS. TG MOLATEDI)

| **AGENDA ITEM** | **DISCUSSION** | **DECISIONS FOR Q1 (2020/21 )** | **RESPON-SIBILITY** | **TIMELINE** |
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| **OPENING AND WELCOME** | **OPENING AND WELCOME**  The facilitator for the 1st Quarter National Management Quarterly Performance Review Session, RC Gauteng opened the session and welcomed everyone in attendance. She acknowledged the presence of the officials and other representatives from the Ministry. The Facilitator requested the presenters to deliver a clear and concise presentation due to time constraints. | - | - | - |
| **ATTENDANCE** | **THE ATTENDANCE REGISTER WAS CIRCULATED. BELOW IS THE LIST OF ATTENDEES**   |  |  |  | | --- | --- | --- | |  | National Commissioner | Mr. A Fraser | |  | Chief Financial Officer | Mr D.K.N. Ligege | |  | CDC: Human Resources | ADV. M. Mashibini | |  | CDC: GITO | Ms. I. N. Mosupye | |  | CDC: Strategic Management | Mr. J Katenga | |  | CDC: Incarceration and Corrections | Mr. M. Thobakgale | |  | CDC: Remand detention | Ms. C. Ramulifho | |  | RC :Gauteng | Ms. T. G. Molatedi | |  | RC :FS/NC | Ms. S. Moodley | |  | RC:WC | Mr. D. J. Klaas | |  | RC: EC | Mr. P. Mbambo | |  | RC:LMN | Mr. T. Thokolo | |  | Acting RC: KZN | Ms. N. Mkhize | |  | DRC: EC | Ms. N.C. Dumbela | |  | DRC:LMN | Mr. R. Ndema | |  | Acting DRC : Gauteng | Mr. E. Khoza | |  | DC: Communication | Mr. L. Maistry | |  | DC: SPM | Ms. A. Naicker | |  | DC: Chief Audit Executive | Ms. N. Zondo | |  | DC: Applications management | Mr. J. Mekgwe | |  | DC: HRM | Mr. K. Mthombeni | |  | DC: HRD | Ms. L. Bond | |  | DC: FMA | Ms. N. Mareka | |  | DC: Personal Development | Ms. M. Plaatjies | |  | DC: Personal Corrections | Ms. T. Motlonye | |  | Acting DC: Health Care Services | Ms. R Booi | |  | Acting DC: Personal Wellbeing | Ms D. Makhuza | |  | Acting DC: Social Reintegration | Ms. Z. Mthethwa | |  | DIR: SPMM | Ms. N. E. Mafenya | |  | DIR: Professional Services | Ms. D Katenga | |  | DIR: Correctional Programme | Ms. Z Mosoma | |  | DIR: Code enforcement | Mr. P. Kilian | |  | DIR: Gender & Employment Equity | Ms. A. Bonani | |  | DIR: Community Liaison | Mr. H. Nesengani | |  | DIR: Administration | Mr. M. Makgaila | |  | DIR: Inspectorate | Ms. S. Matjele | |  | DIR: Risk Management | Mr. M. Taukobong | |  | DIR: COC Office | Mr. J. Somaru | |  | Regional Head: Development and Care KZN | Ms. J. Chonco | |  | Acting DIR: Security Management services | Mr. S. Naidoo | |  | DD: Strategic Planning and Management | Ms. M. Matumba | |  | DD: Executive Support | Mr. R. Govender | |  | DD: Policy Coordinator-SM | Ms. M. Lamola | |  | Ministry | Ms. C. Mobu | |  | Ministry | Mr. S. Mphahlele | |  | National Commissioners Office | Mr. T. Komane | |  | Admin Sec: COC Office | Ms. I. Mothiba | | - | - | - |
| **APOLOGIES** | **APOLOGIES WERE NOTED AS FOLLOWS**   |  |  |  | | --- | --- | --- | | 1 | ACT RC:KZN | Mr. J. G. Smalberger | | 2. | DC: IGR | Mr. S. Zikalala | | 3. | DC: SCM | Mr. L. Marumule | | - | - | - |
| **MINUTES OF PREVIOUS MEETING** | The minutes of the 2019/20 4th Quarter National Management Review Session were presented and confirmed as a true reflection and adopted without any amendments. The adoption of the Fourth Quarter (Q4) National Management Review Session minutes was supported by CDC HR, Advocate Mashibini and seconded by CDC Remand Detention Ms. Ramulifho.  The facilitator indicated that agenda item numbers 7.1 to 7.5 will be attended to during the next meeting which will be on 17 August 2020. | - | - | - |
| **PRESENTATION OF THE INTEGRATED DECISION REGISTER FOR Q1** | **DISCUSSIONS ON THE Q1 INTEGRATED DECISION REGISTER**  Progress on the decisions taken during the Q4 Review Session was provided by DC Strategic Planning and Management (DC: SPM). She indicated that a resolution was taken during Q4 Review session to consolidate decisions that are similar and remove those that have already been addressed or completed. She further indicated that decisions to be presented are still on-going. All decisions were flagged and branches presented progress. There were no inputs provided in line with progress provided by branches. | - | - | - |
| **QUARTERLY REPORTING PROCESS FOR THE 2020/21 FINANCIAL YEAR** | **Quarterly Reporting Process for the 2020/21 financial year (challenges with the Q1 Progress Report.)**  The CDC: Strategic Management outlined the reporting process for the 2020/21 financial year. It was indicated that the DPME has reviewed the reporting process for 2020/2021 financial year which was communicated to all Departments. It was further indicated that for 2020/21 financial year, Departments will no longer be reporting preliminary data at the end of the quarter. The data that is reported at the end of each quarter will be considered as final and must be validated at the time of reporting. He highlighted that the Department has already developed internal mechanisms to ensure that by end of 30 days, after the quarter, the performance information reported is validated, reliable and credible. It was further highlighted that Departments can only amend the performance information for the quarter at the end of the year when compiling the Pre-Audited Annual Report.  CDC: Strategic Management highlighted the challenges encountered with reporting process for Q1. It was indicated that the quarterly reporting template was issued on 01 July 2020 which took into consideration the 2020/21 APP as tabled on 08 May 2020 and the 2020/21 Revised APP tabled on 09 July 2020. The first quarter report was based on the APP that was tabled on 08 May 2020. The 2nd to 4th quarterly performance reports will be based on the Revised APP that was tabled on 09 July 2020.  He raised some concerns as some branches and regions did not submit their reports within the specified timeframes which compromised the quality of the report. He specifically indicated with concern that the last regional report was received late on 28 July 2020 and the last Branch Report was received late on 29 July 2020. He indicated that when compiling the report, there were several discrepancies that were identified by Strategic Management which could not be rectified due to the non-availability of officials. It was also noted that some Regional Policy Coordinators, Regional Indicator Coordinators and Indicator Owners at Head Office did not participate in the M&E Forum and as a result performance for those regions and branches could not be validated. He informed Management that some Branches and Regions submitted amendments to quarter one report after the due date of 31 July 2020 which could not be accommodated during submission of the report to stakeholders by 31st July 2020.  He informed Management that the new bed space total was finalized on 25 July 2020 and as a result the 2019/20 Annual Report and quarter four report as well as the 2020/21 quarter one report were recalculated on overcrowding with the new approved beds apace total of 120 567. The late finalization of the bedspace total also negatively impacted the reporting timelines | - | - | - |
| **OVERVIEW OF PERFORMANCE FOR QUARTER 1** | **OVERVIEW OF PERFORMANCE FOR QUARTER ONE BY CDC STRATEGIC MANAGEMENT**  The CDC: Strategic Management provided Management with an overview of departmental performance for Q1. The summary performance for Q1 of 2020/21 was standing at 55% (out of the 31 targets measured, 17 were achieved and fourteen (14) were not achieved). Regional achievements on the core business planned targets were reported as follows: LMN = 64%, FSNC =68%, KZN =73%, WC =64%, GP 59%, EC 73%.  **The targets that were not achieved during Q1 were for the following indicators**: Percentage of investigations completed for reported allegations; Approved integrated finance and SCM strategy; Percentage of Information Systems implemented as per the MISSTP; Percentage of inmates who escaped from correctional facilities; Percentage of correctional facilities and PPP's facilities inspected on the conditions and treatment of inmates; Percentage of inmates injured as a result of reported assaults in correctional facilities; Percentage of Remand Detainees (RDs) subjected to Continuous Risk Assessment (CRA); Percentage of sentenced offenders with CSPs who completed correctional programmes; Percentage of offenders participating in long occupational skills programmes; Percentage of offenders participating in TVET college programmes ; Percentage of inmates receiving spiritual care services; Offenders viral load suppression rate (at 12 months); Percentage increase of victims participating in Restorative Justice Programme and Percentage increase of offenders, parolees and probationers participating in Restorative Justice Programme.  He highlighted that out of the three MTSF indicators, the two violations targets were achieved whereas the target for the indicator of “Percentage increase of victims participating in Restorative Justice Programme” was not achieved. The non-achievement of the target was due to COVID-19 Lockdown Regulations as Restorative Justice programmes and Imbizos remained suspended and contact sessions with parolees/ probationers could not be conducted effectively. It was indicated that Restorative Justice processes will resume once the lockdown moves to alert level 2. CDC SM provided the areas where adjustments were made to the Q1 Report for record purposes, which will be included at the end of the financial year. There were no further discussions or inputs from the Management. | - | - | - |
| **SUMMARY PRESENTATION OF AREAS OF UNDER-ACHIEVEMENT BY REGIONS**  **FS/NC** | **PRESENTATION BY RC FS/NC ON TARGETS NOT ACHIEVED DURING Q1**  The FS/NC Region did not achieve the targets on seven indicators which are: Percentage of sentenced offenders subjected to correctional programmes per year; Percentage of inmates who escaped from correctional facilities; Percentage of inmates injured as a result of reported assaults in correctional facilities; Percentage of offenders participating in long occupational skills programmes; Percentage of inmates receiving spiritual care services ; Percentage increase of victims participating in Restorative Justice Programme; and Percentage increase of offenders, parolees and probationers participating in Restorative Justice Programme.  The RC highlighted the root causes for non-achievement of targets as the gross negligence of officials; gang activities; searches not conducted effectively; aggressive behaviour of offenders; insufficient staff and impact of Covid-19 Disaster Management Regulations: Lockdown level limitations (compliance with social distancing requirements). The FS/NC Region is currently sensitising officials and offenders on the implementation of security policies on a continuous basis and profiling of gangs. She indicated to Management that once things get to normal (when the lockdown levels are further lowered) there will be an improvement in performance. She raised some concerns on the method of calculation for RJ indicators which should be reviewed as it reflects poorly on performance as it is currently reported. Taking into consideration that all Regions did not achieve their targets is an indication that something needs to be done. She indicated that the method of calculation does not give a true reflection of achievement. The facilitator advised all regions to present their reports so that the issues raised can be collectively discussed. | - | - | - |
| **LMN** | **PRESENTATION BY LMN ON TARGETS NOT ACHIEVED DURING Q1**  The DRC LMN presented the targets not achieved for the LMN Region. He listed the targets that were not achieved for the following indicators: Percentage of sentenced offenders subjected to correctional programmes per year; Percentage of offenders participating in TVET College Programmes; Percentage of offenders participating in long occupational skills programmes; Percentage of inmates receiving spiritual care services; Percentage of inmates receiving psychological care services; Offenders viral load suppression rate (at 12 months); Percentage increase of victims participating in Restorative Justice Programme; and Percentage increase of offenders, parolees and probationers participating in Restorative Justice Programme. He cited the restrictions imposed during COVID-19 lockdown as the main contributing factor for the non –achievements of targets in the Rehabilitation and Social Reintegration programmes. | - | - | - |
| **WC** | **PRESENTATION BY WC ON TARGETS NOT ACHIEVED DURING Q1**  The RC Western Cape presented the targets that were not achieved by the region during quarter one for the following indicators: Percentage of inmates who escaped from Correctional Facilities; Percentage of inmates injured as a result of reported assaults in correctional facilities; Percentage of offenders participating in TVET College Programmes; Percentage of inmates receiving spiritual care services; Offenders viral load suppression rate (at 12 months); Percentage of inmates screened for diabetes; Percentage increase of victims participating in Restorative Justice Programme and Percentage increase of offenders, parolees and probationers participating in Restorative Justice Programme.  The RC informed Management that due to COVID 19 regulations, correctional programmes that were planned to be rendered were placed on hold, all the trainings were put on hold, all TVET Colleges were closed, Restorative Justice programmes and Imbizos remained suspended and as a result contact sessions with victims could not be conducted during lockdown period. However he highlighted that all programmes will resume once the lockdown regulations are eased. | - | - | - |
| **KZN** | **PRESENTATION BY KZN ON TARGETS NOT ACHIEVED DURING Q1**  The Acting RC: KZN, Ms Mkhize, presented the targets that were not achieved by the region which were for the indicators: Percentage of sentenced offenders with CSPs who completed correctional programmes; Percentage of offenders participating in TVET College Programmes; Percentage of inmates receiving spiritual care services; Percentage of inmates receiving psychological care services; Percentage increase of victims participating in Restorative Justice Programme and Percentage increase of offenders, parolees and probationers participating in Restorative Justice Programme.  She highlighted that the impact of COVID-19 contributed significantly to the non-achievement of the targets planned for quarter one as there were limited or no movement by offenders and those rendering services which negatively affected performance. All group work was suspended due to the national lockdown restrictions. She further mentioned that KZN is currently experiencing a peak in the number of COVID-19 infections and it is expected that the numbers will increase more than initially anticipated, which will pose a further challenge in achieving of the set APP targets in the region. | - | - | - |
| **Gauteng** | **PRESENTATION BY GAUTENG ON TARGETS NOT ACHIEVED DURING Q1**  In his presentation, the Acting DRC Gauteng, Mr Khoza, highlighted that out of 22 targets, 13 were achieved while 9 targets were not achieved during quarter one. The targets not achieved for the following indicators: Percentage of inmates who escaped from correctional facilities; Percentage of overcrowding in correctional facilities in excess of approved bedspace capacity; Percentage of sentenced offenders subjected to correctional programmes per year; Percentage of offenders participating in short occupational skills Programmes; Percentage of inmates receiving spiritual care services; Percentage of inmates receiving psychological care services; Offenders viral load suppression rate (at 12 months); Percentage increase of victims participating in Restorative Justice Programme and Percentage increase of offenders, parolees and probationers participating in Restorative Justice Programme.  On the non-achievement of the escape target, he indicated that the region experienced sporadic incidences of escapes of foreign nationals due to uncertainty brought on by the lockdown regulations. He added that there were limited personnel to fully monitor offenders at night during the lockdown. In the KMII RD facility inmates that escaped were in quarantine cells. The management areas that contributed to the non-achievement are Baviaanspoort and Kgoši Mampuru II. Going forward the region intends to intensify the implementation of the escape prevention plan, ensure that sufficient personnel are deployed in high risk units and improve on security intelligence in identified units. The Acting DRC further mentioned that the impact of the COVID-19 regulations contributed significantly to the non-achievement of targets in the Rehabilitation and Social Reintegration Programmes. He indicated that the easing of lockdown regulations will allow offenders to engage in recreational activities, skills courses and normal school or studies. As soon as the lockdown is lifted, bail protocols will be monitored and offenders that have reached minimum detention period and have completed rehabilitation programmes will be prioritised by CMCs. | - | - | - |
| **EC** | **PRESENTATION BY EC ON TARGETS NOT ACHIEVED DURING Q1**  The RC Eastern Cape presented on areas of non-achievement for the region. He highlighted that the region did not achieve the targets on the following indicators: Percentage of inmates injured as a result of reported assaults in correctional facilities; Percentage of overcrowding in correctional facilities in excess of approved bedspace capacity; Percentage of inmates receiving spiritual care services; Percentage ofinmates receiving psychological care services; Percentage increase of victims participating in Restorative Justice Programme and Percentage increase of offenders, parolees and probationers participating in Restorative Justice Programme. He highlighted that most of the targets not achieved are common across all regions and this is attributed to the impact of COVID-19 regulations which limited the delivery of rehabilitation programmes due to National Disaster Management Act. On the overcrowding targets he indicated that Mthatha and East London Management Areas are way above the threshold set by the Saldanha Judgment with 83% and 62% respectively. Amathole, Sada and St Albans are also above 38%. | - | - | - |
| **MANAGEMENT COMMENTS** | The DC SPM provided clarity and comments on issues of concerns raised by Management. In response to the issue of targets not allocated to regions and targets without numerator and denominator, she indicated that a meeting with indicator owners were held with regard to breakdown of targets. It was recommended that not all targets with percentage should have a numerator and denominator as some targets are difficult to predetermine. She highlighted that once the Department publishes the APP with numerator, denominator as well as a percentage, when AGSA conducts its audit, they will review all the three specified elements which may put the Department at risk for more findings. In certain cases, distributing the same percentage equally across all levels is ideal and it will be only during reporting where numerators and denominators will be reflected to inform the actual performance. During the meeting, indicator owners were advised to communicate to regions the requirements for percentages and/or actual numbers and ensure that this gets implemented accordingly.  The DC SPM informed Management that the indicator for RJ on victims is an MTSF indicator and during the review of the APP, Departments were not allowed to make changes on the MTSF targets. During the JCPS Cluster meeting which was attended by the Minister, it was agreed that this indicator should measure the percentage increase of victims. During the M&E forum which was attended by policy coordinators, indicator owners including regional indicator owners, the method of calculation was thoroughly explained. A circular will be sent out to regions to further clarify and unpack the method of calculation to show how to calculate the increase.  She further highlighted that the Department tabled two APPs for 2020/21 financial year. The first one was tabled in parliament on 08 May 2020. Due to outbreak of COVID-19, Departments were again requested to revise their tabled APPs and take into consideration the COVID-19 impact. Based on these new developments the revised APP was tabled in Parliament on 09 July 2020. In terms of reporting, the DPME informed Departments that they should use the old APP which was tabled on 08 May 2020 to inform the quarter one report and for quarter two up to quarter four, Departments should use the revised APP which was tabled on 09 July 2020. She indicated that although performance is low during quarter one, it is anticipated that there will be improvement at the end of final year when the Department reports on the adjusted APP.  She requested branches and regions to submit presentations on time as there have been some differences that were noted in their presentations which should have been avoided if presentations reached Strategic Management on time. | - | - | - |
| **SUMMARY PRESENTATION OF AREAS OF UNDER-ACHIEVEMENT BY BRANCHES**  **ADMINISTRATION** | **PRESENTATION BY DIU ON TARGET NOT ACHIEVED DURING Q1**  The Director Code Enforcement, Mr Kilian, presented on the target not achieved during the first quarter for the indicator: “Percentage of investigations completed for reported allegations”. He highlighted that DIU planned to finalize 17% of investigations during Q1; however this was not possible due to the impact of the COVID-19 nationwide lockdown in April and May 2020 which resulted in 0% performance. Only 2.5% of investigations were finalised during quarter one. In June 2020 the lockdown was relaxed to level 3 which made it possible for investigations to be pursued, noting that those investigations are subject to availability of *inter alia* officials which still posed a challenge.  Unfortunately with the kind of function (fieldwork) that DIU performs, there are no alternatives that can be implemented. Investigating officers should be more careful of their surroundings and strictly adhere to health and safety regulations. With precautionary measures taken, investigating officers have commenced with their field work even though they experience challenges in securing appointments with witnesses/officials or alleged transgressors. Unavailability of venues to conduct interviews and the restrictions of the COVID-19 pandemic were also cited as a challenge. | - | - | - |
| **PRESENTATION BY GITO ON TARGET NOT ACHIEVED DURING Q1**  The CDC GITO, Ms Mosupye, presented on the target for the indicator: “Percentage of information systems implemented as per the MISSTP” which was not achieved during the first quarter. She highlighted that all training ceased from 23 March 2020 due to the national lockdown (alert level 5) and as a result no travelling was allowed and no accommodation was available as hotels were closed. However sites will be reprioritized where officials are able to travel without requiring accommodation.  She further indicated that a consultative and comprehensive methodology was applied in the development of the MISSTP. The first step was to define the framework for the MISSTP report and get agreement with the client and stakeholders. The aim of the framework is to guide the capturing of information and development of outputs for the report. She indicated that the next step is to collect, collate and process information available from existing reports and policy documents. | - | - | - |
| **INCACERATION AND CORRECTIONS** | **PRESENTATION BY SECURITY OPERATION ON TARGETS NOT ACHIEVED DURING Q1**  The Acting Director Security Operations, Mr Naidoo, presented the two targets that were not achieved during the first quarter for the indicators: Percentage of inmates who escaped from correctional facilities and Percentage of inmates injured as a result of reported assaults in correctional facilities. The under achievement was due to non-adherence to security policies and procedures, possible negligence by officials and idleness of inmates due to lockdown regulations during the COVID-19 period. Continuous monitoring and implementation of the security policies and procedures will be maintained to ensure improvement going forward. | - | - | - |
| **REHABILITIATION PROGRAMME**  **PRESENTATION BY PERSONAL CORRECTIONS ON TARGET NOT ACHIEVED DURING Q1**  The DC Personal Corrections, Ms Motlonye, presented on the target for the indicator: “Percentage of sentenced offenders with CSPS who completed correctional programmes” which was not achieved during the first quarter. She indicated that the target was not achieved as facilitation of correctional programmes was negatively impacted by the lockdown regulations which were implemented due to COVID-19 regulation. She added that the facilitation of programmes will be improved once the lockdown levels are lowered. | - | - | - |
| **PRESENTATION BY PERSONAL DEVELOPMENT ON TARGETS NOT ACHIEVED DURING Q1**  The DC Personal Development, Dr Plaatjies, presented on the two targets that were not achieved during the first quarter for the indicators: “Percentage of offenders participating in long occupational skills programmes” and “Percentage of offenders participating in TVET college programmes”. She indicated that although targets on the two indicators were not achieved it should be noted that on the reviewed APP the targets for quarter one were reviewed from 80% to 0% as it was anticipated that due to the COVID-19 restrictions of movement the Skills Training Programmes could not delivered. The recovery plans received from Department of Education will assist the regions to achieve their target. She further indicated that Personal Development will be able to deliver the Skills Training Programmes during quarter two since the National Lockdown Regulations have been eased. | - | - | - |
| **PRESENTATION BY PERSONAL WELLBEING ON TARGET NOT ACHIEVED DURING Q1**  The Acting DC Personal Wellbeing, Ms Makhuza, presented on the quarter one target that was not achieved for the indicator: Percentage of inmates receiving spiritual care services”. She indicated that during quarter one spiritual care workers were not allowed to render any programmes to inmates due to COVID-19 regulations. She informed Management that performance is dependent on the service providers coming to the centres and rendering the services, however during alert level 5 the correctional centres were not accessible to render those services which led to the target not achieved. Once the lockdown levels are eased there will be improvement in terms of performance. | - | - | - |
| **CARE** | **PRESENTATION BY CARE ON TARGET NOT ACHIEVED DURING** **Q1**  The Acting DC Health Care Services, Ms Booi, presented on the quarter one performance for the indicator “Offenders with viral load suppression rate (12 months)” which was underachieved. It was indicated that out of the five (5) indicators within the Care programme, only one (1) was not achieved. The target for quarter one was 90%, however performance as recorded at 84% for the quarter. The reason for underachievement was due to inmates leaving the centres before the viral load is monitored and also due to inmates not adhering to the prescribed treatment. Healthcare workers will conduct continuous monitoring and refer offenders to a Multi-Disciplinary Team for comprehensive counselling. Effective monitoring of offenders on ART will be accelerated. | - | - | - |
| **REMAND DETENTION** | **PRESENTATION BY REMAND DETENTION ON TARGET NOT ACHIEVED DURING Q1**  The CDC Remand Detention, Ms Ramulifho, presented on areas of underperformance. She reported that the indicator on CRA was not achieved due to interdependent functionality and COVID-19 regulations (particularly alter level 5). One of the management areas which contributed to underachievement was the Johannesburg Management Area as there were limited personnel due to COVID-19 restrictions. She further indicated that during the review of the APP the Branch reduced the target from 60% to 40%. | - | - | - |
| **COMMUNITY CORRECTIONS** | **SOCIAL REINTEGRATION**  **PRESENTATION BY COMMUNITY CORRECTIONS ON TARGET NOT ACHIEVED DURING Q1**  The Acting DC Social Reintegration, Ms Mthethwa, took note of concerns raised by the regions on the method of calculations of the two Restorative Justice indicators which were not achieved during quarter one. She indicated that due to COVID-19 Regulations, Restorative Justice programmes and Imbizos remained suspended and contact sessions with parolees/ probationers could not be conducted effectively. Restorative Justice processes will resume when the country moves to alert level 2. She further advised regions to explore the use of audio visual, bigger venues where people will maintain social distancing as well as to review and update the victims’ database. | - | - | - |
| **MANAGEMENT COMMENTS** | The CDC Incarceration and Corrections advised that a quarter to quarter analysis should be considered to conduct a comparative analysis of performance from the previous financial year and performance of the current financial year to determine how COVID-19 has impacted service delivery. The comments by respective managers were noted and assistance will continue to be provided to regions. He requested clarity on who drives performance at regions as it is important for Head Office to design programmes and monitor the implementation thereof. This will make it easier for the Department to identify hotspots areas and pay more attention in the areas that require improvement. He further expressed concerned about DCS facilities which are not conducive for the facilitation of programmes as the infrastructure is old and in a state of disrepair.  In his response the CDC Strategic Management indicated that analysis of performance information is done year to year, the challenge during this quarter was the abnormality of the situation due to the impact of COVID-19. A good example is the comparison of the previous performance of 89% with the current one of 55%. However he indicated that comparative analysis will be provided on a quarterly basis going forward.  The CDC SM further indicated that the APP was revised taking into consideration the current circumstances and the use of alternative mode of delivery particularly where the Department can innovate.  On the question of who will drive performance at the regions, the CDC SM indicated that the Department has developed a Service Delivery Model during the last financial year and the principle is to have centre of excellence and theatre of operations across regions. Implementation will be at the coal face and the development of norms and standards at the centre of excellence which will also be supporting implementation.  The RC Eastern Cape provided comments on the presentation made by the Acting Director Security Operations. He indicated that security indicators put the Department under scrutiny by the public hence providing detailed and adequate corrective action is important. He indicated that reasons provided for non-achievement should be considered because even if all those interventions are put in place the Department continues to see many escapes and injuries within DCS facilities. He advised that it is time for the Department to start interrogating these approaches since there is still no improvement despite the implementation of the identified interventions. The Department has been struggling with these two indicators for some time, even prior to the COVID-19 outbreak. Continuous monitoring and other corrective measures highlighted may not be enough. There are issues of infrastructure and offenders versus officials’ ratios which should also be taken into consideration during reporting particularly when the Department presents to Portfolio Committee. It is important to always provide adequate responses to outsiders as this is an area of interest. Early detection or warning is critical and intelligent gathering plays a big role in this regard. He added that it is crucial to ensure that officials are capacitated in this regard.  The RC Western Cape recommended an analysis be conducted on the inmate population by Strategic Management and the branch Incarceration and Corrections as this is the first time that the Department has a higher number of RDs than sentenced offenders within the correctional facilities. It is critical to interrogate the implication of having more RDs than offenders overall for the country.  The CDC SM commented that in order to take the process forward on conducting the analysis of offender population indicator owners within branches should ensure that this analysis are conducted. | - | - | - |
| **Q1 DEPARTMENTAL FINANCIAL PERFORMANCE** | **PRESENTATION BY FINANCE ON Q1 DEPARTMENTAL FINANCIAL PERFORMANCE**  The CFO, Mr Ligege, handed over to DC: FMA Ms Mareka to present the department’s financial performance for quarter one. The focus of the presentation was on the Summary of the Preliminary National State of Expenditure up to 30 June 2020; Summary of the Preliminary National State of Expenditure per programme up to 30 June 2020; Summary of the Preliminary National State of Expenditure per economic classification up to 30 June 2020; Summary of Preliminary Departmental Revenue up to 30 June 2020 and COVID-19 Regional State of Expenditure perGFS up to 30 June 2020. The DC FMA provided a summary overview of the state of expenditure per programme which shows that the year-to-date expenditure of the Department as at 30 June 2020 was R5, 754 billion (21.47%) against the spending plan of R6, 646 billion (24.80%) resulting in R892 million underspending of the projected expenditure.  **SUMMARY OF THE NATIONAL STATE OF EXPENDITURE PER PROGRAMME FOR THE YEAR TO DATE : 30 JUNE 2020**  She highlighted that the process on reprioritisation and amendment to the spending plan in line with COVID-19 was finalised and submitted to National Treasury. The Budget Committee resolved that Branch HR must clean up PERSAL so as to ensure a credible database for reconciliation with the HRBP tool which will inform the Compensation of Employees Budget. This project of aligning PERSAL to HRBP tool was anticipated to be finalised by 30 June 2020. The report from HR is still outstanding. A follow-up is being made with HR. The permanent funded establishment as published in 2020 ENE was reported to be 5,678 against permanent PERSAL establishment of 6,806 resulting in a variance of 1,128 posts. | - | - | - |
| **MANAGEMENT COMMENTS** | In response to the cleaning up of Persal, the DC HRM highlighted that HR met with Finance to address the alignment of the HRBP tool and Persal. He indicated that subsequent to this a Persal report was received from National Treasury to analyse trend on compensation of employees. A total of 4 300 vacant posts will be considered for abolition so that there is alignment of the HRBP tool and Persal and appointment of contract posts will need to be reviewed. The completion of this process will be finalised by end of quarter two.  On the matter relating to the over expenditure of PPEs and the abolishing vacant posts, the CDC Remand Detention recommended that a workshop should be conducted to ensure a collective understanding on the challenge of over expenditure. She further advised that in order for regions and branches to better manage expenditure, there should be a breakdown of areas that contributed to over expenditure so that branches and regions can identify areas of improvement going forward.  She raised some concerns on the abolishment of vacant posts specifically as this may lead to losing key positions that are critical in driving service delivery in the Department. Regions have been presenting challenges in terms of capacity and looing posts may have further service delivery implications for the Department. She advised HR to engage with Management before finalising the process of abolishment so that this gets interrogated to avoid abolishing core positions. | **Decision 1 of Q1 (2020/21) Review session:**  Persal clean-up to be finalised by end of quarter two | HR | 30 September 2020 |
| **PRESENTATION BY ICC ON PROGRESS MADE TO IMPLEMENT AUDIT ACTION PLANS** | **PRESENTATION BY ICC ON PROGRESS MADE TO IMPLEMENT AUDIT ACTION PLANS**  During his presentation the DC ICC, Mr Motaung, provided a progress reportsummarising the implementation of the 2018/19 financial year audit action plans. It was indicated that the Department has implemented 60% (122/204) of the audit findings raised and 40% (82/204) of the findings are in progress. The findings reported as in progress relates to instances were Management have implemented some of the audit action plan activities per tracking register, however, these activities are only considered as implemented when all activities, without exception, gets finalized.  He added that AGSA issued an Interim Management Report for 2019/20 financial year comprising of a total of 105 findings on regularity audits and the Audit of Pre-Determined Objectives. These findings are normally dealt with or cleared during the final audit process and any outstanding matters/findings are incorporated into the final audit report.  The following measures were put in place to improve areas of audit qualifications   * Issuing of circulars and directives to guide the relevant officials on operational issues to be implemented or maintained to address audit outcomes ; * In respect of Performance Information, the Department constituted the Bed Space Task Team to oversee re-measuring of accommodation, revising of the G309 forms and recapturing of the G309 forms on the Accommodation Determination System (ADS). * In respect of Irregular Expenditure, the Department finalized the process of reviewing the entire population of payments from 01 April 2019 to 31 March 2020 to ensure completeness of disclosure in the Annual Financial Statements. | - | - | - |
| **MANAGEMENT COMMENTS** | The CDC RD wanted to know if the Department has an operation clean audit team made up of Regions and Branches as a mechanism to address issues of Audit. In his response the DC ICC: indicated that DCS has measures in place which are driven by the Finance Branch. There is a platform where audit issues are discussed.  The DC SPM emphasised the importance of submitting the reports on time and requested respective regional and branch heads to assist in ensuring that regions and branches adhere to reporting timelines. This will make it easier for the Department to submit credible reports to stakeholders within the specified timeframes. | - | - | - |
| **WAY FORWARD** | **WAY FORWARD BY CDC STRATEGIC MANAGEMENT**  The CDC SM highlighted the items that were differed to next Monday which are: Integrated HR Strategy, Finance and SCM Strategy, MISSTP Plan, Self-Sufficiency Strategy and Social Reintegration Framework. The purpose of the meeting is to provide in-depth feedback to the NC on progress to date on the identified strategies/ frameworks. He informed Management that a guideline/ template will be circulated to relevant Branches to provide the minimum information required. The final presentation should be submitted by end of business the following day. | - | - | - |
|  | **MEETING WAS ADJOURNED** |  |  |  |