



school of government

Department:
National School of Government
REPUBLIC OF SOUTH AFRICA

NSG ANNUAL OPERATIONAL PLAN 2015-2016

1. INTRODUCTION

The 21st October 2014, marked a year since the launch of the National School of Government, effectively replacing the Public Administration Leadership and Management Academy (PALAMA). The uncertainties of change in the build-up towards the launch of the NSG created a certain level of apprehension amongst the clientele as well as staff, and this influenced the institutional performance. However, the post-launch positioning of the NSG within the public service training and development space is resulting in a general uptake of the course and programme offerings. The effectiveness of the training being provided is reflected in the Public Service Commission report titled "Assessing the Effectiveness of Training provided by PALAMA in Improving Skills and Competencies of Public Service Leadership with a view to inform Curriculum Development by the National School of Government", which notes that there is relevance in the training offered and is aligned to learners' developmental needs and the objectives of their departments, and that the courses and programmes offered continuous promotion of professional ethics, group learning and innovation.

The business model of the NSG currently remains the same as was used in PALAMA in that it is a hybrid of in-house and outsourced functions to fulfil the mandate of training and development in the public service. The business model is also premised on training and development in the four streams of Leadership, Management, Administration and Induction. Learning and development programmes under these streams are based on a generic curriculum and a Functional Learning Area Framework, incorporating learning design principles including active and action learnings. Course offerings cover a variety of competency streams specific (but not exclusive) to the public service. Blended teaching modalities combining face-to-face and distance learning (through e-learning platforms) are currently being used.

1.1 Medium Term Strategic Framework (2014-2019)

The strategy and performance of the NSG is also aligned to the 2014-2019 Medium Term Strategic Framework (MTSF), which Cabinet approved on 23 July 2014. The MTSF contains detailed five-year implementation plans for the NDP, with targets, indicators, roles and responsibilities, and timeframes for the implementation of key actions. With regard to Outcome 12 (an efficient, effective and development-oriented public service), the NSG has to ensure that the issue of skills in the public service is addressed. In this regard, the National School of Government will contribute on sub-outcome 2 (a public service that is a career of choice) by ensuring that:

- ❖ Working with the DPSA, a formal graduate recruitment scheme is piloted to support departments in attracting and developing young talent (commencing 2016/17)
- ❖ Working with the DPSA, assessment mechanisms are used to build confidence in recruitment processes (commencing 2015/16)
- ❖ Mentoring and peer support mechanisms for senior managers are developed (commencing 2015/16)
- ❖ Capacity building is undertaken through learning and development interventions (commencing 2015/16)

1.2 Compulsory induction programme

The Public Service Co-ordinating Bargaining Council (PSCBC) Resolution 1 of 2012 provides that for pay progression, the qualifying period for first time participants (that is, new public servants) be extended from 12 to 24 months, and upon completion of this period, they will qualify for a pay progression annually. A Ministerial Directive on the implementation of the Compulsory Induction Programme (CIP) in the Public Service was subsequently issued which provides that the CIP is a one-year programme; departments set aside sufficient funding for learners attending CIP; and that the National School of Government develops the

curriculum and training material; appoints accredited training providers; and develops training schedules.

In the implementation of the CIP, the National School of Government identified certain challenges, including the current capacity and resources of the NSG (or its ability to source additional capacity and resources); as well as the fact that the public service does not have the requisite capacity for accredited training (especially moderator and assessor capacity) to handle the current intake of new learners – forcing the NSG to make use of external individual contractors; and the current information and communications technology (ICT) infrastructure that is not geared to handle the data and assessment evidence of learners of this magnitude.

This has resulted in a backlog in the rolling out of the five-module based programme, thus, requiring the NSG to consider a revision of the CIP implementation and a turn-around strategy to manage the backlogs.

The NSG has revised its strategy in terms of the delivery of the CIP, including a revision of the costs to train and the model of delivering the training.

1.3 Ministerial directive on compulsory capacity development, mandatory training days and minimum entry requirements for SMS

The Department of Public Service and Administration issued a Ministerial Directive to all national and provincial departments in relation to compulsory capacity development, mandatory training days and minimum entry requirements for senior management service (SMS). In terms of the directive, the following, inter alia, are prescribed:

- ❖ All SMS members must undergo relevant training to close identified development gaps as determined by a competency assessment and/or a performance assessment at specific performer level

- ❖ Every SMS member must spend a minimum of 18 days on a combination of generic and technical/professional training over a three year performance cycle
- ❖ Prescribed minimum entry requirements into SMS and movement within the SMS, including minimum qualifications, minimum years of service, pre-entry certificate into the SMS, and strengthened recruitment at SMS level
- ❖ Specific training for Heads of Department

In terms of the directive, a requirement for entry into the SMS is a successful completion of the Senior Management Leadership Programme with either the NSG or a higher education institution accredited with the NSG. The dates of implementation of this directive are as follows:

- ❖ Compulsory training and mandatory training – 1 April 2016
- ❖ Pre-entry requirement for SMS – 1 April 2017
- ❖ All other aspects of the directive – 1 April 2015

2. BACKGROUND

This operational plan sets out the NSG's commitments during the current financial year, it is the plan to be used as a transitional process into the school. The Operational plan provides details to the 2014/15 Annual Performance Plan expanding on targets covered in the latter. The development of this plan is therefore based on the strategic objectives and outputs as outlined in the 2014/15–2018/19 strategic plan and 2014/15 Annual plan.

Performance audit and verifications will also be based on the implementation of this plan as a document that also provides a framework for the Annual Performance Agreement for the Senior Management Staff within the school.

Official sign-off

It is hereby certified that this Operational Plan:

- Was developed by management of the National School of Government (NSG) in line with the Annual Performance Plan 2015/16
- Accurately reflects the performance targets which NSG will endeavour to achieve given the resources made available in the budget for 2015/16.



Ms Mandisa Tshikwatamba
Branch Head: Corporate Management

Date 14/08/2015



Ms P Mkwanazi
Chief Financial Officer

Date: 19/08/2015

Prof Richard M Levin
Principal
Date:

PROGRAMME 1: ADMINISTRATION

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Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
<ul style="list-style-type: none"> Strategic objectives Implement effective policies, strategies and plans annually that comply with legislation, good corporate governance principles and improve organisational performance standards 									
Performance monitoring reports developed and assessed per quarter, and submitted to the executive authority by target date	Performance monitoring reports developed on a quarterly basis and submitted to the executive authority, DPME and National Treasury by 31 March 2016	Late submission to MPSA; NT and DPME	C/D: Strategic Planning and ICT Management	Validation, quality assurance and consolidation of performance reports	Submit report by 31st July 2015 and validated data by 31st August 2015	Submit report by 31st October 2015 and validated data by 30th November 2015	Submit report by 31st January 2016 and validated data by 29th February 2016	Submit report by 30th April 2016 and validated data by 31st May 2016	The achievement of performance can be validated through: approved submission and reports
Systems in place towards unqualified or clean audit report issued by the Auditor-General annually	Unqualified or clean audit report issued by the Auditor-General annually		Internal Audit		Undertake internal audit projects in line with Internal Audit (IA) Plan	Undertake internal audit projects in line with IA Plan	Undertake internal audit projects in line with IA Plan Compilation of the Management Improvement Plans	Undertake internal audit projects in line with IA Plan Follow up with management on the implementation of AG's recommendations	The achievement of performance can be validated through: audit report
Percentage of NSG employees trained and developed to upskill competencies measured quarterly	Up- skill competencies of 80% of employees to match organisational Competency Framework by 31 March 2016		C/D: Corporate Services		20% of employees upskilled to match organisational Competency Framework	20% of employees upskilled to match organisational Competency Framework	20% of employees upskilled to match organisational Competency Framework	20% of employees upskilled to match organisational Competency Framework	The achievement of performance can be validated through: attendance register
Service delivery plans developed and monitored on quarterly basis to ensure service delivery improvement	Develop and implement new three year Service Delivery Improvement Plan(SDIP)	Delays in the approval of the plan	CD: Strategic Planning and ICT		Draft SDIP for consultation	Approved SDIP for implementation	Approved Services Charter and Standards in line with SDIP	Approved Complaints Handling Management Policy in line with SDIP	

ADDITIONAL TARGETS (INCLUDING BREAK DOWN OF 21 POLICIES)

BRANCH: CORPORATE MANAGEMENT									
Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
Organisational strategic framework and performance plan developed and implemented by target date	Develop and table 5-year Strategic Plan; Annual Performance Plan and Annual report in accordance with guidelines	Delays in the finalisation of plans and approval could impact on the timely tabling constitution of the plans in Parliament	CD: Strategic Planning and ICT	Annual Report to Parliament by 30 August 2015	Draft Annual Report 2013/14 submitted to Auditor –General by 31 May 2015	Annual Report submitted to Minister and National Treasury and Tabled in Parliament 1st drafts of Strategic Plan and Annual Performance Plan	2nd drafts of Strategic Plan and Annual Performance Plan	Table Strategic Plan and Annual Performance Plan in Parliament	The achievement of performance can be validated through: (i) approved strategic plan (ii) annual performance plan and (iii) reports of the planning sessions
Organisational communication strategy, policy and plans developed and implemented by target date	Develop and implement a communication strategy and corporate identity manual ODA Policy and SOP approved	Delays in approval process. Inadequate capacity and funding	CD: ISP & C	Design proposed CI manual, consultation with stakeholders	Approved Implementation plan of the NSG Communication Policy by 31 July 2015 ODA Policy and operating procedures approved by end August 2015	Approved implementation Plan of the Communication Strategy by 30 September 2015 Approved Languages Policy for the NSG	Approved NSG CI Manual by 31 September 2015 Guideline on roll out of International Training developed by December 2015	Approved Web strategy by 31 March 2016	The achievement of performance can be validated through: the new and existing departmental policies, SOPs and Strategies developed, reviewed, and approved

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Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation																								
<p>Increased MPAT rating and unqualified audit on performance information by target date</p> <table border="1" style="margin: 10px 0;"> <thead> <tr> <th colspan="4">MPAT 1.3</th> </tr> <tr> <th>Level 4</th> <th>Level 3</th> <th>Level 2</th> <th>Level 1</th> </tr> </thead> <tbody> <tr> <td style="background-color: green;">15%</td> <td style="background-color: yellow;">42%</td> <td style="background-color: orange;">21%</td> <td style="background-color: red;">21%</td> </tr> </tbody> </table> <table border="1" style="margin: 10px 0;"> <thead> <tr> <th colspan="4">MPAT 1.4</th> </tr> <tr> <th>Level 4</th> <th>Level 3</th> <th>Level 2</th> <th>Level 1</th> </tr> </thead> <tbody> <tr> <td style="background-color: green;">18%</td> <td style="background-color: yellow;">21%</td> <td style="background-color: orange;">45%</td> <td style="background-color: red;">15%</td> </tr> </tbody> </table>	MPAT 1.3				Level 4	Level 3	Level 2	Level 1	15%	42%	21%	21%	MPAT 1.4				Level 4	Level 3	Level 2	Level 1	18%	21%	45%	15%	MPAT results with overall score not less than 4,90% of scores at level 4	Should the MPAT scores remain or drop as assessed in MPAT 1.3, then the levels of performance and compliance within the institution is impacted upon.	Sub-Dir: Internal Audit	<ul style="list-style-type: none"> Verify the evidence loaded onto the MPAT system for accuracy and validity. Ensure that the department complies with set dates for submission. Develop and Monitor Improvement Plan. 	Implement Improvement plan based on MPAT 1.4 (2014)	Implement improvement plan based on MPAT 1.4 (2014)	Undertake MPAT assessment 1.4 (2014)	Implement improvement plan based on MPAT 1.4 (2014)	The achievement of performance can be validated through: published MPAT results
MPAT 1.3																																	
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Level 4	Level 3	Level 2	Level 1																														
18%	21%	45%	15%																														
Number of policies developed/reviewed and implemented	21 policies to be developed/reviewed and implemented	8 Corporate Services, 2 International Special Projects and Communication, 5 Finance, 2 Legal Directorate , 1 ICT, 1 TPP, 1 Strategic planning and ICT																															
An average of 15 new policies, strategies and plans developed or reviewed based on a rolling policy plan for Corporate Management.	15 Policies and SOPs (Corporate Management) to be developed reviewed and implemented an advocacy sessions held	Delays in the approval of policies could compromise the compliance to certain statutes of the country	Corporate Services (HRM&D)	Conduct a desktop research, bench mark document drafting and workshops	4 policies, 1 strategy and 2 SOPs drafted and consultations held 2 Policies approved and implemented	<ul style="list-style-type: none"> 4 Policies approved 1 strategy approved 2 SOPs developed and approved 3 SOPs drafted and in consultation 	<ul style="list-style-type: none"> 2 Policies approved 3 SOPs approved 	All approved policies and SOPs approved	The achievement of performance can be validated through: Approved Policies																								
70% of MPAT results with overall score not less than 3 2014/15 baseline	<ul style="list-style-type: none"> Approved compliance calendar developed by 31 May 2016 		CD: Corporate Services	HRM&D statutory plans and reports compiled and	Approved compliance Calendar	10 HRM& reports due before or on 30 June 2016	10 HRM&D reports due before or on 30 June 2016	18	The achievement of performance can be																								

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Performance Indicator			Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation	
Score	2014/15	2015/16 Target	<ul style="list-style-type: none"> 90 % compliance with the approved compliance calendar 			submitted within prescribed timelines	10 HRM&D reports due before and on 30 June 2016	1 Logistics and Facilities Management report	1 Logistics and Facilities Management report		validated through: Approved Policies	
4	0	0										
3	27%	72%										
2	64%	28%										
1	9%	0						Logistics and Facilities Management SHERQ reporting done	1 Logistics and Facilities Management Report			
Reduced percentage vacancy rate in NSG to 10% by 31 March 2016			Reduce Vacancy rate to 10% by 31 March 2016	Delay in the approval of the recruitment and selection process	C/D: Corporate Services	Conduct recruitment and selection processes for the department	Vacancy rate reduced to 14%	Vacancy rate reduced to 13%	Vacancy rate reduced to 11%	Vacancy rate reduced to 10%	The achievement of performance can be validated through: approved stats	
% of Infrastructure and facilities management plan developed and approved by 31 March 2016.			90 % of Infrastructure and facilities management plan (IFMP) approved and implemented by 31 March 2016.	Delay in the approval of the IFMP could affect the business of the organisation as the training entity	C/D: Corporate Services	<ul style="list-style-type: none"> In-depth analysis of existing facilities and future Departmental needs. Gap analysis and Compilation of Infrastructure and FM Plan. Approval of Infrastructure and FM Plan. Implementation of Plan. 	IFMP approved by 30 June 2015	30% of the IFMP implemented	30% of the IFMP implemented	30% of the IFMP implemented	The achievement of performance can be validated through: Approved IFMP	

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Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
	4 Contracts renewed and SLAs concluded with the service providers. (Corporate Services)		C/D: Corporate Services ICT	<ul style="list-style-type: none"> • Approve ToR • Advertise for service providers • Appoint the service providers • Sign contracts / SLA's 	Terms Of Reference cleaning services developed and approved Advertisement for ICT Services contractor issued	<ul style="list-style-type: none"> • 3 Service providers appointed by 30 August 2015: (Surveillance services, Physical Security services, ICT) • Bid for cleaning services advertised • 2 Contracts and Service Level agreements concluded with the Surveillance and Physical Security Service Providers 	<ul style="list-style-type: none"> • 1 Service provider appointed by 31 December 2015: • Cleaning Services 	1 Contract and Service Level agreement concluded with the Cleaning Service Providers	The achievement of performance can be validated through: Approved ToR
	Lease Agreement for ZKM Building renewed		C/D: Corporate Services		No target	No target	Submit User Asset management Plan and Needs Analysis to NDPW by 30 September 2015	1 signed Lease Agreement for ZKM Building by 30 March 2016	The achievement of performance can be validated through: Valid lease agreement
	5 new Infrastructure Projects implemented; <ul style="list-style-type: none"> • Bulk Fling • PABX Upgrade 		CD: Corporate Services	<ul style="list-style-type: none"> • Develop specification • Develop ToR • Approve ToR • Source quotations 	No target	Specifications and Terms of Reference for the PABX upgrade developed,	Procurement of the upgrade initiated and finalised	PABX upgrade project implemented by 31 March 2016	The achievement of performance can be validated through: Approved ToR

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Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
	<ul style="list-style-type: none"> VOIP hardware upgrade Furniture procurement training strategy and resource planning 			<ul style="list-style-type: none"> Appoint the service provider Sign contracts / SLA's 	No target	Specifications and Terms of Reference for the VOIP hardware upgrade developed,	Procurement of the upgrade hardware initiated and finalised	VOIP hardware upgrade project implemented by 31 January 2016	The achievement of performance can be validated through:
					<ul style="list-style-type: none"> Procurement of the bulk filing initiated and finalised 	<ul style="list-style-type: none"> Bulk filing system procured and installed for HR and Finance by 31 September 2015. 	<ul style="list-style-type: none"> Bulk printing procurement plan (ToR) approved by November 2015 	No target	The achievement of performance can be validated through: Approved Bulk printing procurement plan
			C/D: Corporate Services		No target	Procurement of the additional furniture initiated and finalised	Additional furniture procured and installed by 31 December 2015.	No target	The achievement of performance can be validated through: Valid Reports
			C/D: Corporate Services		Materials production solution and resource planning Committee established and meeting	Materials production solution and resource plan finalised by September 2015	Materials production solution procurement plan (ToR) approved by November 2015	No target	The achievement of performance can be validated through: Valid Reports
	<ul style="list-style-type: none"> Centralised Records 		C/D: Corporate Services	<ul style="list-style-type: none"> Approval of policy 	No target	<ul style="list-style-type: none"> Approved policy fully implemented 	Apply for and obtain approval for	<ul style="list-style-type: none"> M&E Report on the 	The achievement

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Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
	<p>Management system implemented:</p> <ul style="list-style-type: none"> • File Plan • Records Control Schedule • Policy and SOPs 			<ul style="list-style-type: none"> • Approval of Records Procedure Manual • Advocacy 		<p>by 30 September 2015:</p> <ul style="list-style-type: none"> • File Plan • Records Control Schedule 	the disposal of qualifying records	<p>implementation of the Centralised Records Management system by 31 March 2016</p> <ul style="list-style-type: none"> • Identify, prioritise and facilitate the disposal of qualifying records 	of performance can be validated through: Reports and plan
Percentage employees trained and developed to up-skill competencies- WSP measured quarterly	Up- skill competencies of 80% (156 employees) of employees to match organisational Competency Framework		C/D: Corporate Services	Up-skill and train 157 employees to match organizational competency framework by 31 March 2016	Up- skill competencies of 20% (39) of employees to match organisational Competency Framework in this quarter	Up- skill competencies of 20% (39) of employees to match organisational Competency Framework in this quarter	Up- skill competencies of 20% (39) of employees to match organisational Competency Framework in this quarter	Up- skill competencies of 20% (39) of employees to match organisational Competency Framework in this quarter	The achievement of performance can be validated through: Attendance register
% of Performance Agreements concluded	90% of Performance Agreements of all employees submitted by 30 June 2015.		C/D: Corporate Services	<ul style="list-style-type: none"> • Submit the performance agreement template and guidelines to NSG employees • Provide advocacy & support to NSG staff in finalising 	<ul style="list-style-type: none"> • 90% of Performance Agreements of all employees signed and submitted by 31 May 2015 • 100% of Capturing of all submitted PA's 	90% of new NSG employees performance agreements signed and submitted by August 2015 (196/196)	90% performance agreements submitted by new employees by 31 December 2015	90% performance agreements submitted by new employees by 31 March 2016	The achievement of performance can be validated through: Reports

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Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
				performance agreements.	on Persal by 30 June 2015				
% of Performance Appraisals concluded.	90% Performance Appraisals of all employees submitted by 31 May 2015 (2014/15 Annual Assessment) and 31 October 2015(2015/16 1st Bi-annual Assessment) respectively		C/D: Corporate Services	<ul style="list-style-type: none"> Submit the performance agreement template and guidelines to NSG employees Provide advocacy & support to staff in finalising performance appraisals. Arrange the performance assessments meetings of BPMC & CPMC, and provide secretariat support Communicate the CPMC decisions, record and pay out awards 	<ul style="list-style-type: none"> 90% Performance Appraisals of all employees submitted by 30 June 2015 (2014/15 Annual Assessment) 100% Performance Appraisals of all employees submitted and quality checked by 30 June 2015(2014/15 Annual Assessment) Provide advocacy & support to staff in finalising performance appraisals. 	Arrange the performance assessment meetings of BPMC for the appraisals (01 -31 July 2015) for 2014 – 31 March 2015 assessments)	<ul style="list-style-type: none"> 100% Performance Appraisals of all employees for period 01 April – 30 September 2015 submitted by 31 October 2015 Arrange the performance assessment meetings of BPMC for the appraisals (01 April – 30 September 2015) assessments 	Provide advocacy & support to staff in finalising performance appraisals. by 31 March 2016 (2015/16 Annual Assessments	The achievement of performance can be validated through: Reports
% of probation reports approved	100% of probation reports of qualifying		C/D: Corporate Services	Finalise and distribute letters	100% of probation	100% of probation reports of qualifying	100% of probation reports	100% of probation reports of	The achievement of

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Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
	employees approved within 1 month from end of probation period by 31 March 2016.			on confirmation of probation	reports of qualifying employees approved within 1 month from end of probation period by 30 June 2015.	employees approved within 1 month from end of probation period by 30 September 2015.	of qualifying employees approved within 1 month from end of probation period by 31 December 2015.	qualifying employees approved within 1 month from end of probation period by 31 March 2016.	performance can be validated through: Reports
Percentage of labour related matters finalised within the stipulated timeframe	90% of grievances finalised internally within the stipulated process timeframes		C/D: Corporate Services	Provide advocacy session on grievance handling	90% of Non-SMS grievances finalised internally within 30 working days	90% of Non-SMS grievances finalised internally within 30 working days.	90% of Non-SMS grievances finalised internally within 30 working days	90% of Non-SMS grievances finalised internally within 30 working days.	The achievement of performance can be validated through: Repots
					90% of SMS grievances finalised internally within 45 working days	90% of SMS grievances finalised internally within 45 working days	90% of SMS grievances finalised internally within 45 working days	90% of SMS grievances finalised internally within 45 working days	The achievement of performance can be validated through: Reports
	90% of disciplinary matters finalised internally within the stipulated process timeframes.		C/D: Corporate Services	<ul style="list-style-type: none"> ▪ Provide support on labour related matters ▪ Recommend the appointment of relevant human resources (Presiding Officer, Investigators/ Initiators) 	90% of disciplinary matters finalised internally within the stipulated process timeframes.	90% of disciplinary matters finalised internally within the stipulated process timeframes.	90% of disciplinary matters finalised internally within the stipulated process timeframes.	90% of disciplinary matters finalised internally within the stipulated process timeframes.	The achievement of performance can be validated through: Reports

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Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
				<ul style="list-style-type: none"> Follow up on outstanding unresolved LR related matters. Ensure effective record keeping of all labour related matters 					
Number of HR/staff events calendar circulated by 31 March 2016	4 HR/staff events Calendars developed and circulated	Late notices resulting in lower numbers of employees partaking in these events	CD: Corporate Services		Develop and circulate HR calendar to all NSG employees	Develop and circulate HR calendar to all NSG employees	Develop and circulate HR calendar to all NSG employees	Develop and circulate HR calendar to all NSG employees	The achievement of performance can be validated through: Calendars circulated
Number of comprehensive Health Screening 31 March 2016	3 Comprehensive Health Screening session conducted by target date	Late notices resulting in lower numbers of employees partaking in these events	CD: Corporate Services		Develop and implement a Comprehensive Health Screening Programme to NSG staff	1 Comprehensive Health Screening session conducted to NSG staff	1 comprehensive Health Screening session conducted to NSG staff	1 comprehensive Health Screening session conducted to NSG staff	The achievement of performance can be validated through: Attendance register
Number of international capacity building programmes facilitated and implemented by NSG	Facilitate 3 bi- and multilateral programmes	<p>Funding not available to travel</p> <p>Delay in approving</p>	CD: International Special Projects and Communication	<ul style="list-style-type: none"> EU Funding Proposal approved by November 2015 HARVARD project facilitated and 	Quarterly report for sharing of best practices and knowledge exchange	Quarterly report for sharing of best practices and knowledge exchange	Finalise the EU Financing Agreement by end December 2015	CELAP MOU signed and implemented	The performance will be validated by approved programmes facilitated

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Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
		<p>submissions by MPSA</p> <p>EU not accepting the proposal from NSG; Support from DIRCO not available to support the process of consultation with COTI</p>		<p>implemented by 31 March 2016</p> <ul style="list-style-type: none"> ▪ CELAP MOU signed and implemented by 31 March 2016. ▪ ENA MOU signed and implemented by 31 August 2015 ▪ Consultative workshop between the NSG and SADC partners (NIPAM/LIPAM etc)/ facilitated and implemented by 31 December 2015 ▪ Sharing of best practices and knowledge and compiling of quarterly reports <p>Identify training opportunities provided by International Institutions /</p>	<p>ENA MOU signed and implemented by August 2015</p> <p>Establish Agreements and work plan with French (ENA) and India (IST/ ASCI)</p>	<p>Facilitate 2 bi-lateral exchange between NSG and African Regional Partner programmes</p> <p>Harvard Programme approved and started by end October 2015</p>	<p>Quarterly report for sharing of best practices and knowledge exchange</p> <p>Facilitate 1 SADC Joint Workshop by end October 2015</p> <p>Exchange programme implemented by end December 2015</p>	<p>Financing Agreement signed with EU by end March 2016</p> <p>Quarterly report for sharing of best practices and knowledge exchange</p> <p>Facilitate 1 bi-and multilateral programmes</p> <p>Exchange programme implemented by end March 2016</p>	

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Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
Effective management of the NSG strategic risks	Undertake quarterly assessment of organisational risk management plan and risk register by 31 March 2015	The non-implementation of quarterly assessment of risks could impact on the overall corporate governance and performance of the institution	Dir: Legal, Contract Management & Compliance	<ul style="list-style-type: none"> Priority risks reduced towards improving the NSG's risk profile Document and monitor implementation of the annual Risk Management Plan. 	Review of Risk Management Charter, Implementation plan and Enterprise Risk Management Framework	Risk assessment and compilation of risk register	Monitoring and facilitating the implementation of the risk management action plan and consolidate quarterly action plan.	Monitoring and facilitating the implementation of the risk management action plan	The performance will be validated by the assessment of organisational risk management plan and risk register
Number of Audit Committee and Risk Management Committee meetings convened by 31 March 2015	Convene at least 4 Audit Committee and 4 Risk Management Committee meetings	Should the meetings not be convened on a timely basis, it will impact on the overall governance and accountability of the institution	Internal Audit	<ul style="list-style-type: none"> Agenda setting and document management for both Audit and Risk Management Committee Convene an Audit Committee and Risk Management Committee meeting quarterly Draft minutes and action plans for both committee meetings 	<ul style="list-style-type: none"> 1 Audit Committee Meeting convened 1 Risk Management Meeting convened 	<ul style="list-style-type: none"> 1 Audit Committee Meeting convened 1 Risk Management Committee Meeting convened 	<ul style="list-style-type: none"> 1 Audit Committee Meeting convened 1 Risk Management Committee Meeting convened 	<ul style="list-style-type: none"> 1 Audit Committee Meeting convened 1 Risk Management Committee Meeting convened 	The performance will be validated by the minutes of the audit and risk management committees

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Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
Effective implementation of the Auditor General's findings and recommendation through monitoring of the management improvement plan	Monitor the implementation of the Auditor General's audit findings and recommendations by 31 March 2015	The findings of the Auditor-General must be implemented as part of the compliance to good governance, failing which could impact on the performance of the institution	Internal Audit	<ul style="list-style-type: none"> ▪ Document the management improvement plan on the implementation of AG findings ▪ Obtain approval of the plan by the Accounting Officer ▪ Monitor the implementation 	-	-	Compilation of the MIP	Follow up with management on the implementation of AG recommendations	The performance will be validated by the implementation of the AG findings, in line with the management improvement plan
Relevant and quality responses to parliamentary questions	Provide relevant and quality responses to parliamentary questions to the Ministry within 3 working days from date of receipt	The provision of inaccurate and irrelevant information to Parliament, as an oversight authority, could impact on the credibility of the NSG and MPSA	CD: Strategic Planning & ICT Management	<ul style="list-style-type: none"> ▪ Liaise with branches on submission of response ▪ Verify response and submit to the Principal and Ministry 	Finalise responses with 3 working days, as and when parliamentary questions are received	Finalise responses with 3 working days, as and when parliamentary questions are received	Finalise responses with 3 working days, as and when parliamentary questions are received	Finalise responses with 3 working days, as and when parliamentary questions are received	The achievement of performance can be validated through: (i) evidence of date of original receipt; (ii) signed parliamentary response
Percentage organisational contracts vetted and contract life cycle monitored	100% of organisational contracts vetted within six working days and contract life cycles monitored on a quarterly basis	The ineffective management of contracts could result in poor performance management of service	Dir: Legal, Contract Management & Compliance	<ul style="list-style-type: none"> ▪ Record draft contracts from line managers ▪ Negotiate terms and 	<ul style="list-style-type: none"> ▪ Contracts vetted within 5 working days from date of receipt of contract 	<ul style="list-style-type: none"> ▪ Contracts vetted within 5 working days from date of receipt of contract ▪ Follow-up on outstanding contracts 	<ul style="list-style-type: none"> ▪ Contracts vetted within 5 working days from date of receipt of contract 	<ul style="list-style-type: none"> ▪ Contracts vetted within 5 working days from date of receipt of contract 	The performance will be validated by the reports of the Contract Management system and

BRANCH: CORPORATE MANAGEMENT

Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
		providers and contracts not being timely terminated or being renewed without proper approval		<ul style="list-style-type: none"> conditions of contracts ▪ Vet contracts to ensure that the intention of the parties is encapsulated ▪ Submit vetted contracts to line manager ▪ Upload NSG contracts ▪ Monitor and report on NSG Contracts ▪ Consolidated status reports ▪ Ad hoc reports on findings 	<ul style="list-style-type: none"> ▪ Follow-up on outstanding contracts ▪ Quarterly reporting on the CM system 	<ul style="list-style-type: none"> ▪ Quarterly reporting on the CM system 	<ul style="list-style-type: none"> ▪ Follow-up on outstanding contracts ▪ Quarterly reporting on the CM 	<ul style="list-style-type: none"> ▪ Follow-up on outstanding contracts ▪ Quarterly reporting on the Electronic CM system 	individual contracts.
Organisational communication strategy, policy and plans developed and implemented by target date	Development of NSG Official Languages Policy and Implementation Plan		CD : ISP&C		Process Policy for publishing in government gazette for public comments.	Consolidation of public comments and present to DDG: Corporate Management Submit draft implementation plan of the policy to CD: ISP&C	Approval of the implementation plan Advocacy session of the implementation plan to staff	Monitor implementation of the policy	The performance will be validated by: i)Published notice ii)Approved implementation plan iii) Advocacy session Reports

BRANCH: CORPORATE MANAGEMENT

Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
	Developed and implemented communication policy, strategy and corporate Identity manual	Delays in approval process Inadequate capacity and funding	CD: International Special Projects and Communication	<ul style="list-style-type: none"> ■ Design proposed CI manual ■ Consultation with stakeholders ■ Solicit information ■ Attend and support departmental events 	Approved communication policy, and implementation plan by 30 June 2015 1 Newsletter published	1 Newsletters published Approved implementation plan for the communication strategy by 30 September 2015 Approved Language policy by 31 July 2015	1 Newsletters published Approved CI Manual by 31 December 2015	1 Newsletters published Approved web strategy by March 2016	The performance will be validated by the published newsletters
	Development of a comprehensive website strategy		CD : ISP&C	Consultation of draft policy to internal staff & external stakeholders	Submit draft strategy and plan for approval by DDG: Corporate Management	Implementation of the Website Strategy Development of an implementation plan for the NSG Website Strategy	Implementation of the Website Strategy	Monitor and amend the Website Strategy where necessary	draft strategy and plan for approved by DDG: Corporate Management
Number of Bi-Lateral and Multilateral Programmes facilitated and implemented	4 International strategic partnership agreements facilitated and implemented. 3 Regional strategic partnership agreements facilitated and implemented.	Funding not available to travel. Lack of capacity Partners losing interest to collaborate due to too much red tape.	CD: International Special Projects and Communication	Develop TOR for strategic partnerships with Harvard Kennedy School of Leadership and Malaysian Institute for Public Administration.	Conclude and document exchange program with Harvard	Submission with TOR submitted for approval by end July 2015 Conclude strategy for a partnership programme with Malaysian Institute Prepare MOU for signing with ENA (France) during October 2015 visit planed by	Finalise Institutional agreement for signing/ exchange visit with Harvard by end November 2015 Programme development and source funding for implementation of Joint Programme	Participation on Harvard Programmes identified Finalise Institutional agreement for signing/ exchange visit with Malaysian Institute by end March 2015	The performance will be validated by partnership agreement

BRANCH: CORPORATE MANAGEMENT

Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
				Sign all outstanding MOUs (NIPAM, LIPAM, and ENA (France) Botswana; CELAP, Shanghai Training Institute and India Training Institute Monitor implementation of all active MOU and compile reports.	Technical visit by NIPAM to finalise the Institutional agreement and implementation plan	Government to France Finalise the nomination and approval process for Officials to participate on ENA programme by end August 2015 Visit LIPAM to identify areas for collaboration and prepare MOU for signing	Visit NIPAM during an exchange visit on areas identified (workshop) and sign MOU Provide capacity development support to LIPAM Establish contact and assess possibilities to engage with CELAP and CAG	Joint SADC Capacity development programme with support from NIPAM (possibly in Windhoek)	
Number of ODA projects approved for support by development partners	2 Donor funded projects supported by partners and implemented by the NSG.	Proposals for support not approved by development partners	CD: International Special Projects and Communication	Submit the EU proposal for donor support for approval by end November 2015 Two Project Proposals approved by GIZ Reporting on progress with	Needs identification and Log frame approved by May 2015 Identify Projects and investigate activities for Projects that add value to NSG	Submit Proposal /formulation of Project and costing by 7 July 2015 for approval by EU Submit proposals for approval by GIZ by end July 2015. Implementation plans developed approved	Project implementation supported by GIZ continue – provide co-ordination support.	Financing agreement signed Finalise operational workplan for implementation of EU Project Final report on GIZ Projects	The achievement of this target can be validated through: Signed Agreements

BRANCH: CORPORATE MANAGEMENT

Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
				donor funded Projects				implemented by end March 2015.	
Advance the Africa 2063 agenda through MPSA capacity building programme	4 sets of minutes from AMDIN scheduled Council and EXCO meetings. Implementation of the AU –STC Workplan	Cancellation of scheduled meetings due to poor attendance Insufficient funds for travelling	CD: International Special Projects and Communication	Operationalise AMDIN key priorities/ implementation of key strategic actions in support of the AU –STC Reviewed and approved AMDIN Constitution. Participate on AU- STC activities	Compile annual report / financial status and audit for submission to the department of Social Development Review the Constitution of AMDIN in line with AU-STC	Arrange AMDIN Council meeting Participate on APSD and arrange for paper to be delivered on Women Empowerment Implementation of the AU –STC Capacity development – through training on African Charter Develop funding proposal to Development partners to support with implementation of AU –STC Capacity building initiatives	AMDIN EXCO teleconference meeting Report on AU STC meeting Prepare to roll out the ToT for African MDIs programme in South Africa Development of curriculum and arrange for training on African Charter	AMDIN Council meeting Roll out the training on the African Charter	The achievement of this target can be validated through: attendance registers and agenders
ICT Disaster Recovery Solution Implementation	Procured and Implemented the ICT DR Solution by 30 March 2016	Dysfunctional business of the organisation	CD: Strategic Planning and ICT	Place order with services provider and begin project charter	Review DR Plan	Obtain ICT DR Solution quotations	Start the ICT DR solution procurement process	Finalise the procurement of the ICT DR solution	Functional ICT disaster recovery solution.

BRANCH: CORPORATE MANAGEMENT

Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
								Begin the procurement of a fully-managed WAN solution	
NSG ICT Enterprise Architecture Plan approved	Approved NSG Business Architecture Plan by 30 March 2016	Lack compliance and poor operational performance	CD: Strategic Planning and ICT	Development of enterprise architecture phase one	Develop an NSG EA vision document.	Establish Baseline and Target models for: 1. Business Performance. 2. Organisational Structure 3. Business Function/Service and the Business Impact Analysis Report	Establish the following models: 1. Information Mode 2. Process Flow Model.	Establish Baseline and Target Business models for: 1. Business Gap Model 2. Business Architecture Roadmap	Baseline and target business architecture model
Increased MPAT ratings and unqualified ICT audits	MPAT results with overall score of not less than 4 and ICT unqualified audit	Obtain poor assessment result	CD: Strategic Planning and ICT		Approved ICT strategic plan	Obtain the approval of the CGICTPF charter	Obtain the approval of the ICT implementation and operational plans	Implementation of the CGICTPF charter	Improved MPAT rating from 1 to 2
System Center Configuration Manager (SCCM)	SCCM Configured and Implemented by the 30 March 2016	Compromised ICT software and hardware management	CD: Strategic Planning and ICT	Develop user requirement specifications	Obtain proposals from service providers	Implementation of SCCM.	Operationalise the SCCM solution	Monitoring of the implemented solution	System design and development documents
ICT Support Services	NSG users with central and shared ICT services	Dysfunctional business of the organisation	CD: Strategic Planning and ICT	Meetings with SITA and ICT services provider	Monitoring of service levels and Operational Levels.	Monitoring of service levels and Operational Levels.	Monitoring of service levels and Operational Levels.	Monitoring of service levels and Operational Levels.	Three reports per quarter
TMS Stabilisation	Stabilised and robust TMS platform	lack data integrity	CD: Strategic Planning and ICT	Engage EDUCOS and other vendors in	Obtain proposals for the revamping	Develop the solution requirements for the project.	Configure and development the TMS solution.	Perform user acceptance testing and	System design and

BRANCH: CORPORATE MANAGEMENT

Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
				the training software industry	TMS to a more robust platform			deploy the solution	development documents
Windows and Office Upgrade	NSG desktop/laptop devices upgraded to Windows 8.1 and MS Office 2013	Low staff moral and operational inefficiencies	CD: Strategic Planning and ICT	Procure new ICT desktops/laptops and upgrade all NSG devices to Windows 8.1	Procure new ICT equipment.	Configure the new ICT equipment and upgrade them to Windows 8.1 and MS Office 2013. Provide training interventions for users.	RAM upgrading of some old and some new IT equipment. Dispose of old ICT equipment. Continue training interventions for users.	Provide continuous support for the use of new equipment and software.	Procured ICT equipment. All NSG ICT equipment upgraded to Windows 8.1
NSG access-link Bandwidth upgrade	Upgraded and better performing NSG access-link bandwidth	Inability to use externally host application and solutions	CD: Strategic Planning and ICT	Engage SITA on the upgrade of the NSG access-link bandwidth	Optimise the internet proxy device.. Assess the current NSG network infrastructure. Obtain approval of the NSG network upgrade from the CFO and the Principal	Upgrade the NSG access-link network	Finalise the bandwidth upgrade project	Continuous monitoring of the newly upgraded access-link network	Upgraded NSG access-link network. Amended service level agreement between SITA and the NSG.

BRANCH: CORPORATE MANAGEMENT

Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
Approved Frameworks, Policies and Standard Operating Procedures.	Reviewed ICT procurement guidelines	Unnecessary expenditure due to non-standardised ICT procurement guidelines	CD: Strategic Planning and ICT	Study and research latest best practices in ICT procurement	Study the existing NSG supply chain policies and industry best practices.	Draft the procurement guidelines	Undertake stakeholder consultations on the ICT procurement guidelines	Obtain approval for the ICT procurement guidelines document	An approved ICT procurement guidelines document
	Reviewed Cell Phone and Data cards policy.	Misuse and uncontrolled claims of cellphones and data cards	CD: Strategic Planning and ICT	Review of the cellphone and data cards policy and stakeholder consultations on the policy.	Review the policy in line with the latest developments in voice and internet communications	Conduct stakeholder consultations for the policy	Obtain approval of the cellphone and data card policy	Implement the cellphone and data card policy	Approved Cellphone and data cards policy
	Reviewed Social Media Policy	Misuse of internet resources and time spent for on non-work related activities	CD: Strategic Planning and ICT	Review of the social media policy and conduct stakeholder consultations on the policy.	Review the policy in line with the latest developments in social media technologies	Conduct stakeholder consultations for the policy	Obtain approval of the social media policy	Implement the cellphone and data card policy	Approved social media policy
	Approved NSG ICT Governance Charter	Lack of proper ICT governance in the NSG	CD: Strategic Planning and ICT	Research and develop the NSG ICT governance charter according to the CGICTP framework	Conduct stakeholder consultations on the ICT governance charter	Obtain approval of the ICT governance charter	Implement the ICT governance charter		Approved NSG ICT governance charter
	NSG Information Security Strategy	Lack of security controls that govern the safeguarding	CD: Strategic Planning and ICT	Research and develop the NSG Information Security Strategy	Conduct stakeholder consultations on the NSG	Obtain approval of the NSG information security strategy	Implement the NSG information		Approved NSG information security strategy

BRANCH: CORPORATE MANAGEMENT

Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
		of the NSG's information and data			information security strategy		security strategy		

CHIEF FINANCIAL OFFICER									
Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
Strategic objectives Efficient and effective fiscal, infrastructure and human resource planning and management monitored on a quarterly basis to support the sustainability of the institution									
Unqualified Audit report issued by the Auditor General	Unqualified Audit report issued by the Auditor General		SCM/FA/MA	Advocacy on finance policies and procedures <ul style="list-style-type: none"> □ Provide training to 25 NSG staff per quarter on Finance and SCM process and procedures in line with the prescripts of the PFMA and Treasury Regulations, in order to improve administration and compliance with prescripts 	25	25	25	25	The achievement of this target can be validated through: Coaching)Attendance register
Reduced average number of days taken for revenue collection arising from learning and development interventions	60 days (average)	Document for invoicing may be received late from TMD	MA	<ul style="list-style-type: none"> ▪ Implement prepayment of invoices ▪ Issue invoices within 24 hours of receipt of documents ▪ Issue monthly statements ▪ Tele-collection ▪ Visitation of debtors 	Reduce average days to 60 days and monitor efficiency	Reduce average days to 60 days and monitor efficiency	Reduce average days to 60 days and monitor efficiency	Reduce average days to 60 days and monitor efficiency	The achievement of this target can be validated through: Pastel report Debtors Days
Strategic Objective Implement effective policies, strategies and plans annually that comply with legislation, good corporate governance principles and improve organisational performance standards									
Number of prioritised new departmental policies developed or existing departmental policies reviewed, and	7 Policies reviewed/approved:		SCM/FM/MA	<ul style="list-style-type: none"> ▪ Policy /SOP development ▪ Presentation to Audit committee 	1	2	2	2	The achievement of this target can be validated through: approved policies

CHIEF FINANCIAL OFFICER									
Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
approved for implementation by 31 March 2016	<ul style="list-style-type: none"> ▪ Expenditure management policy ▪ Entertainment & catering policy ▪ Budget management policy ▪ Supply chain management policy ▪ Reporting Process Procedures ▪ Donor funding policy ▪ Tariff Review Procedures 			<ul style="list-style-type: none"> ▪ Approval of Policies 					

ADDITIONAL TARGETS NOT INCLUDED IN THE ANNUAL PERFORMANCE PLAN

CHIEF FINANCIAL OFFICER									
Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
Strategic objectives	Efficient and effective fiscal, infrastructure and human resource planning and management monitored on a quarterly basis to support the sustainability of the institution								
Payment of creditors within 30 days	All payments made within 30 days	Invoices received by users not forwarded to Finance in time for payment	SCM FA	Processing of suppliers invoices within 5 days of receipt <ul style="list-style-type: none"> ▪ Reconciliation of supplier accounts ▪ Update of payment tracking system ▪ Follow up on orders 	100 % payments made within 30 days	100 % payments made within 30 days	100 % payments made within 30 days	100 % payments made within 30 days	The achievement of this target can be validated through: 30 Days payment report
Number of approved NSG compliance reports submitted to relevant authorities, within legislative specific reporting structure and timeline, and monitoring through the NSG compliance calendar	4 - Quarterly reports		CD: CFO	Collection of data and reporting on performance	1	1	1	1	The achievement of this target can be validated through: Branch report
	12 – EWS 4 - EWS to Minister 4 – Public entity Q fin report 5 - MTEC/AENE/ENE reports MTEC =Medium Term Expenditure Framework AENE =Adjusted Medium Term Expenditure Framework ENE= Estimate of National Expenditure		MA	<ul style="list-style-type: none"> ▪ Prepare and submit the monthly Early Warning System (EWS) report as approved by the CFO, on the 15th of the month following reporting to National Treasury and quarterly to the Minister ▪ Public Entity Quarterly Financial report 	3 EWS 1 EWS to Minister	3 EWS 1 EWS to Minister 3 Reports	3 EWS 1 EWS to Minister 1 ENE First draft	3 EWS 1 EWS to Minister 1ENE	The achievement of this target can be validated through: EWS Reports MTEC/AENE/ENE reports or submission Tariff review submission

CHIEF FINANCIAL OFFICER

Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
	1- Tariff review			<ul style="list-style-type: none"> ▪ Consolidate budget inputs from branches ▪ Develop and submit MTEC as approved by the AO by 31 July 2015 to the National Treasury ▪ Develop and submit of AENE database as approved by the AO by 31 August 2015 to the National Treasury ▪ Develop and submit final AENE chapter as approved by the AO by 30 September 2015 to the National ▪ Develop and submit first draft of ENE approved by the AO to National Treasury, in December 2015 ▪ Revise and submit final draft of ENE approved by the AO to National Treasury during January 2016 	Analysis of prior year data and workshop with key stakeholders	Submit revised tariff for approval			

CHIEF FINANCIAL OFFICER

Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
				<ul style="list-style-type: none"> Review per course financial performance Submit revised tariffs to NT 					
	14- EMP201/501		FA	<ul style="list-style-type: none"> Prepare & submission of EMP 201 by the 7th of each month Prepare the yearly and half yearly reconciliation Printing of the IRP5 for distribution to NSG staff by 30 June 2015, in accordance with SARS prescripts 	4	4	3	3	The achievement of this target can be validated through: EMP201 /501 forms
	5 - AFS/IFS			<ul style="list-style-type: none"> Submission of AFS by 31 May to NT and AG Submission of audited AFS by 31 July to NT Submission of Quarterly IFS by 31 July 2015, 31 October 2015, 31 January 2016 	1	2	1	1	The achievement of this target can be validated through: Approved submissions
	6 - VAT 201			<ul style="list-style-type: none"> Reconcile and submit VAT claim to SARS for donor funded projects bi-monthly 	2	1	2	1	The achievement of this target can be validated through: Approved submissions

CHIEF FINANCIAL OFFICER

Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
	1- Demand/procurement plan		SCM	<ul style="list-style-type: none"> Collection of inputs from branches Submission of consolidated plan to NT 	1	none	none	none	The achievement of this target can be validated through: Approved plan
	12- thirty day payment reports			<ul style="list-style-type: none"> Analyse payment tracking system and draft report for late payments 	3	3	3	3	The achievement of this target can be validated through: reports
	Deviations above R1m.			Report deviation within 7 days of approval	As & when it occurs	As & when it occurs	As & when it occurs	As & when it occurs	The achievement of this target can be validated through: Reports
	Irregular & Fruitless expenditure report			Record irregular & fruitless expenditure on discovery and report to NT	As & when it occurs	As & when it occurs	As & when it occurs	As & when it occurs	The achievement of this target can be validated through: Repots
Manage the organisation's budget and cash flow through quarterly meetings and reporting by 31 March 2016	12 monthly expenditure reports		MA	Conduct budget analysis meetings with CD/branches	3	3	3	3	The achievement of this target can be validated through: Attendance register
	4 budget committee review meetings		MA	Conduct budget committee meetings with all budget managers	1	1	1	1	The achievement of this target can be validated through: Attendance register
Number of NSG inventory and asset verification audits conducted in accordance with the treasury regulations and NSG internal policies by 31 March 2016	Cumulative target of 8 inventory and asset verification audits		SCM	<ul style="list-style-type: none"> Undertake two verification audits on assets and inventory & perform reconciliation on discrepancies per quarter Investigate & identify redundant and obsolete 	2	2	2	2	The achievement of this target can be validated through: Reports

CHIEF FINANCIAL OFFICER

Performance Indicator	Annual Performance Target/Output	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
				<ul style="list-style-type: none"> assets on quarterly basis Disposal of redundant and obsolete assets by 31 March 2016 in accordance with the NSG Asset Management Policy 					
Percentage Compliance with the National Treasury Requirements on procurement	Non-cumulative target of 100% compliance		SCM/FA/MA	<ul style="list-style-type: none"> Update Supplier database & rotation of suppliers Procurement of goods and services according to the thresholds Convene bid specification/evaluation/adjudication 	100% compliance	100% compliance	100% compliance	100% compliance	The achievement of this target can be validated through: Reports
Strategic Objective	Implement effective policies, strategies and plans annually that comply with legislation, good corporate governance principles and improve organisational performance standards								
Effective management of NSG strategic organizational risks and branch operational risks by 31 March 2016	Reduce the number of organizational/branch risks rated as priority 1 by 20%		SCM/FA/MA	<ul style="list-style-type: none"> Identification operational risks Monitor and report on risks identified 	none	Operational risk register	Monitor risk and report	Monitor risk and report	The achievement of this target can be validated through: Reports

PROGRAMME 2: PUBLIC SECTOR ORGANISATIONAL AND STAFF DEVELOPMENT

BRANCH: TRAINING POLICY AND PLANNING

Performance Indicator	Annual Performance Target	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
Strategic objective									
Implement effective research, knowledge management and diagnostic strategies to inform learning and development needs and opportunities									
Number of quality research projects identified and undertaken to inform learning and development needs and opportunities	Identify and undertake a total of four (4) quality research projects	<ul style="list-style-type: none"> The effects of the PAM Act Changes in the strategic direction of the NSG Resource constraints 	Chief Directorate: Research and Innovation (CD: R & I)	<ul style="list-style-type: none"> Identification of viable research projects Desktop analyses Development of research proposals Data and Information gathering and comparative analyses Plan, execute and monitor progress with research reports Compile reports Provide preliminary feedback to stakeholders Final reports 	<ul style="list-style-type: none"> Identify viable research projects One research project initiated 	Three further research projects initiated	On-going research on four projects	Four research projects completed by 31 March 2016	<p>The achievement of performance can be validated through:</p> <p>(i) Project planning and execution documents</p> <p>(ii) Completed research reports</p>
Number of training needs analysis undertaken within a pre-determined number of public service institutions by financial year-end, monitored on a quarterly basis	A total of four (4) training needs analysis undertaken within a pre-determined number of public service institutions by target date	<ul style="list-style-type: none"> The effects of the PAM Act Changes in the strategic direction of the NSG Resource constraints 	CD: R & I	<ul style="list-style-type: none"> Consultations with Client Units/ Departments Analysis of the strategic plans of the departments Identification of the areas of implementation Implementation of TNA Report writing Feedback sessions with stakeholders 	Identify possible targeted units/ departments and consult to establish interest	One-TNA Implemented and consultation with two additional departments occurred	Three TNA implemented and consultation with the fourth department occurred	Four TNA implemented, reports compiled and feedback provided	<p>The achievement of performance can be validated through:</p> <p>(i) Documents related to interaction with stakeholders</p> <p>(ii) Adoption of TNA tool</p> <p>(iii) Written reports</p>

TARGETS NOT INCLUDED IN THE ANNUAL PERFORMANCE PLAN (2015-2016)

• BRANCH: TRAINING POLICY AND PLANNING									
Performance Indicator	Annual Performance Target	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
Strategic objective Implement an effective monitoring and evaluation framework to monitor the quality of learning and development interventions and evaluate the effectiveness of interventions on performance based on set norms and standards									
Facilitator and Participant Evaluation (FPE) reports developed for all NSG training interventions	100% of training interventions monitored		M&E Chief Directorate	<ul style="list-style-type: none"> ▪ All data allocated captured within 2 weeks of receipt. ▪ All FPEs distributed within one week of being generated ▪ Process of receipt of REQs and FFFs to distribution of FPEs tracked on a monthly basis. ▪ Monthly reports on the number of REQs, FFFs and FPEs captured each month generated by the end of each month. ▪ Quarterly reports on the number of REQs, FFFs and FPEs captured each quarter (April-June 2015; July-September 2015; October-December 2015; January-March 2016) generated by the end of each quarter 	100% of all training interventions offered	100% of all training interventions offered	100% of all training interventions offered	100% of all training interventions offered	The achievement of performance can be validated through: <ul style="list-style-type: none"> (i) Monthly Data Capturing statistics (ii) Monthly Reports (iii) Quarterly Reports

• BRANCH: TRAINING POLICY AND PLANNING

Performance Indicator	Annual Performance Target	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
Number of on-site monitoring and evaluation assessments undertaken by 31 March 2016	Monitor and evaluate ninety (90) NSG training interventions through onsite evaluations annually	-	M&E Chief Directorate	<ul style="list-style-type: none"> ▪ Development of instruments (where applicable) ▪ Liaison with TMD to obtain training schedules ▪ Travel and other arrangements made and approved for onsite evaluations ▪ Observations of training interventions 	15 training interventions monitored and evaluated through onsite evaluations	25 training interventions monitored and evaluated through onsite evaluations	25 training interventions monitored and evaluated through onsite evaluations	25 training interventions monitored and evaluated through onsite evaluations	The achievement of performance can be validated through: (i) Reports of onsite evaluations conducted, (ii) Completed M&E instruments, and action plans
	Ninety (90) Onsite evaluation reports	-	M&E Chief Directorate	Observation reports of each onsite evaluation, (aligned to the standards of the M&E Framework) developed and distributed to all stakeholders	15 reports	25 reports	25 reports	25 reports	The achievement of performance can be validated through the completion of reports on onsite evaluations conducted
Four (4) Quarterly Integrated Feedback Sessions (QIF)	M&E services provided to internal and external stakeholders	M&E recommendations not implemented	M&E Chief Directorate	Manage/Plan Quarterly Integrated Feedback (QIF) sessions on M&E findings (Agenda, attendance register, minutes)	1 Feedback session	1 Feedback session	1 Feedback session	1 Feedback session	The achievement of performance can be validated through Minutes of QIF & Attendance Registers
			M&E Chief Directorate	Bi-annual report on the trends identified from completed REQs, FFFs and onsite evaluations compiled and distributed at the end of September 2015 and March 2016	None	1 Report	None	1 Report	The achievement of performance can be validated through Bi annual reports

• BRANCH: TRAINING POLICY AND PLANNING

Performance Indicator	Annual Performance Target	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
Number of programmes assessed to measure the impact (application of learning) of training interventions on individuals and their organisations, by 31 March 2016	Assess the impact (application of learning) of four NSG programmes	Impact results of NSG training not recognised	M&E Chief Directorate	<ul style="list-style-type: none"> ▪ Detailed project plans including information on resources required, meetings with programme managers and external stakeholders developed ▪ Log frames in line with the programme objectives developed ▪ Instruments aligned to the objectives of the study developed ▪ Studies, aligned to the principles of the M&E Framework conducted ▪ Quarterly progress reports on the 4 "application of learning" studies submitted ▪ Final reports submitted March 2016 	4 Progress reports	4 Progress reports	4 Progress reports	4 Reports	The achievement of performance can be validated through 4 Application of learning reports completed
Strategic objective	Implement effective research, knowledge management and diagnostic strategies to inform learning and development needs and opportunities								
Research agenda for 2015-16 developed and fully implemented by 31 March 2016, monitored on a quarterly basis	Develop, design and implement a research agenda with input from key role players, secure support from HEIs and senior officials	<ul style="list-style-type: none"> • Budget constraints • Staff appointment at Research directorate crucial 	CD: R & I	<ul style="list-style-type: none"> ▪ Develop a research agenda in consultation with key stakeholders ▪ Consultations with senior officials ▪ Do planning within research function 	<ul style="list-style-type: none"> ▪ Develop a research agenda for 2015-2016 ▪ Establish a working 	<ul style="list-style-type: none"> ▪ Implement concept research agenda ▪ Organise one training opportunity in 	<ul style="list-style-type: none"> ▪ Approval of research agenda ▪ Implement agenda ▪ Expand interaction with HEIs 	<ul style="list-style-type: none"> Implement research agenda Expand interaction with HEIs 	The achievement of performance can be validated through: (i) Research agenda for 2015-16 implemented;

• BRANCH: TRAINING POLICY AND PLANNING

Performance Indicator	Annual Performance Target	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
	& provide training in research methods and data analysis	variable for success		<ul style="list-style-type: none"> ▪ Create applicable partnerships with HEIs where ▪ Organise training in research methodology 	relationship with one HEI	research methodology			(ii) Training in research methodology conducted; and relationships with HEIs established
Number of Research Round Table discussions and colloquia held during the course of the financial year contributing towards developing a culture of scholarship, enquiry and lifelong learning as well as creation of knowledge management hub, monitored on a quarterly basis.	Four (4) round table discussions or research colloquia to stimulate debate, insight and understanding of NSG agenda and focus based on topics for discussions identified each year	Staff appointments at Research directorate crucial variable for success	CD: R & I	<ul style="list-style-type: none"> ▪ Identify topics for research roundtables or research colloquia for 2015-2016 ▪ Identify and liaise with presenters ▪ Organise and promote research events 	<ul style="list-style-type: none"> ▪ Topics for research roundtables or colloquia identified ▪ Organise first research roundtable or colloquium 	One event organised	One event organised	One event organised	<p>The achievement of performance can be validated through:</p> <ul style="list-style-type: none"> (i) Roundtable discussions held (ii) Research colloquia (iii) Invitations (iv) Attendance registers
Number of research papers presented at conferences and prepared for publication to contribute to learning, development and knowledge creation and dissemination	Three research papers presented at conferences and two prepared for publication to contribute to knowledge creation and dissemination	Appointment of staff members with capacity and experience to research and compile conference papers	CD: R & I	<ul style="list-style-type: none"> ▪ Formulation of topics ▪ Plan and execute research ▪ Identify relevant conferences and submit proposals ▪ Conference Presentations ▪ Identification of relevant journals for publication and submit articles/papers 	<ul style="list-style-type: none"> • One papers accepted at a conference 	<ul style="list-style-type: none"> • One paper delivered • One paper submitted at a conference 	Papers delivered at a conference/ accepted for publication	Paper delivered Internal information dissemination	<p>The achievement of performance can be validated through:</p> <ul style="list-style-type: none"> (i) Proposals for papers/articles (ii) Completed papers and presentations (iii) Completed articles

• BRANCH: TRAINING POLICY AND PLANNING

Performance Indicator	Annual Performance Target	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
Approved knowledge and information management strategy and system developed	Finalise the development of the knowledge and information management audit and strategy	Facility properly funded and resourced	CD: R & I	<ul style="list-style-type: none"> ▪ Finalise and manage further project planning process ▪ Meetings with stakeholders ▪ Complete knowledge and information management audit ▪ Compile concept strategy in consultation with stakeholders ▪ Consider revisions and suggestions ▪ Finalise strategy for approval and implementation 	<ul style="list-style-type: none"> • Complete scoping documents for knowledge and information management strategy development • Meetings with stakeholders 	<ul style="list-style-type: none"> • Commence with compilation and revision of concept strategy 	Completion of concept strategy	Completed strategy approved for implementation	<p>The achievement of performance can be validated through:</p> <ul style="list-style-type: none"> (i) Project documentation (ii) KM Audit (iii) Consultations with stakeholders (iv) Approved KM strategy
Implementation of approved knowledge and information management strategy	Commenced with the process of strategy implementation after determining ICT capability and other resource requirements for implementation	<ul style="list-style-type: none"> • Lack of ICT capacity and limited resources • Lack of HR capacity within KM Directorate 	CD: R & I	<ul style="list-style-type: none"> ▪ Establish ICTs and other resources requirements for implementation of KM Strategy ▪ Establish timelines for implementation ▪ Finalise strategic implementation plan ▪ Develop acquisition plan ▪ Develop an applicable portal on the intranet for Knowledge Management and the Library 	Not target	Commence with preparations for KM portals on intranet	Identification of ICT system requirements in process	<ul style="list-style-type: none"> • Specifications for ICT system requirements determined • Commence with Implementation of strategy 	<p>The achievement of performance can be validated through:</p> <ul style="list-style-type: none"> (i) ICT system requirements (ii) Implementation plan (iii) Acquisition plan (iv) Intranet portal
Updated NSG resource centre with sufficient resources,	Comprehensive resourcing of the NSG Resource	Availability of funds to adequately	CD: R & I	<ul style="list-style-type: none"> ▪ Acquisition of library resources 	<ul style="list-style-type: none"> • Sourcing of materials and 	<ul style="list-style-type: none"> ▪ Sourcing of materials and information 	<ul style="list-style-type: none"> ▪ Sourcing of materials and 	<ul style="list-style-type: none"> ▪ Sourcing of materials and 	<p>The achievement of performance can be validated through:</p>

• BRANCH: TRAINING POLICY AND PLANNING

Performance Indicator	Annual Performance Target	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
up to date materials and information and e-based knowledge and information portals to provide services to the NSG	Centre with quality materials and wide access to information and e-resources updated on a quarterly basis	resource the KM facility		<ul style="list-style-type: none"> ▪ Ensure and acquire access to e-data and information sources. ▪ Provide training for use of e-databases ▪ Acquire and implement a Library Management System (LMS) 	<ul style="list-style-type: none"> ▪ information on a quarterly basis ▪ Arrange training session for e-databases ▪ Finalise processes to acquire an appropriate LMS through SITA 	<ul style="list-style-type: none"> ▪ on a quarterly basis ▪ Project meetings and progress with customising to implement functioning LMS 	<ul style="list-style-type: none"> ▪ information on a quarterly basis ▪ Final implementation of the LMS ▪ Complete training for LMS 	<ul style="list-style-type: none"> ▪ information on a quarterly basis ▪ LMS fully functional ▪ All Library resources managed through LMS 	<ul style="list-style-type: none"> (i) Access to resources and e-databases (ii) Training implemented (iii) Resource acquisitions (iv) LMS project documents (v) Functional LMS
• Resource Centre and knowledge and information function to ensure user satisfaction by stakeholders	Effective Management of Resource Centre and knowledge and information services and policies developed to ensure user satisfaction by 31 March 2016	• Facility properly funded and resourced	• CD: R & I	<ul style="list-style-type: none"> ▪ Provide effective services based on user requirements on a daily basis ▪ Manage and monitor daily activities ▪ Develop two applicable policies to enhance functioning of the Library on collection and acquisition and on library guidelines and procedures. ▪ Refine and prepare final policies based on stakeholder inputs ▪ Policy approval and implementation process 	<ul style="list-style-type: none"> • Provide daily services • Manage and monitor activities • Benchmark and prepare policy development 	<ul style="list-style-type: none"> • Provide daily services • Manage and monitor activities • Compile and disseminate one concept policy for stakeholder inputs 	<ul style="list-style-type: none"> • Provide daily services • Manage and monitor activities • Complete one policy • Compile and disseminate one concept policy for stakeholder inputs. 	<ul style="list-style-type: none"> • Provide daily services • Manage and monitor activities • Complete one policy • Submit policies for approval 	<ul style="list-style-type: none"> The achievement of performance can be validated through: (i) Library management documentation (ii) Concept policies developed (iii) Final and approved policies

• BRANCH: SPECIALISED SERVICES

• Performance Indicator	• Annual Performance Target	• Risks	• Responsibility	• Key Activities	• QTR 1	• QTR 2	• QTR 3	• QTR 4	• Performance Validation
• Strategic objective	• Design and quality assure accredited and non-accredited curriculum which responds to public service needs, individual career pathing and lifelong learning								
Number of programmes designed, developed and/or reviewed by 31 March 2016	6 curriculum programmes / courses designed, developed and/or reviewed		CD: Curriculum Design		No target	2 curriculum programmes designed, developed and/or reviewed	2 curriculum programmes designed, developed and/or reviewed	2 curriculum programmes designed, developed and/or reviewed	The achievement of performance can be validated through: 6 curriculum programmes
Number of NSG courses/programmes quality assured by 31 March 2016	Quality assurance of a minimum of 6 NSG courses/programmes to ensure creditability and quality of programmes		CD: Quality Assurance		Quality assurance of 1 NSG courses/ programmes to ensure creditability and quality of programmes	Quality assurance of 2 NSG courses/ programmes to ensure creditability and quality of programmes	Quality assurance of 2 NSG courses/ programmes to ensure creditability and quality of programmes	Quality assurance of 1 NSG courses/ programmes to ensure creditability and quality of programmes	The achievement of performance can be validated through: 6 NSG courses/programmes designed, developed and/or reviewed
Number of e-learning interventions undertaken through implementation and management of technology-mediated tools by 31 March 2016	25 e-learning interventions to be undertaken		CD: eLearning		6 e-learning interventions to be undertaken	7 e-learning interventions to be undertaken	6 e-learning interventions to be undertaken	6 e-learning interventions to be undertaken	The achievement of performance can be validated through: 25 e-learning interventions undertaken
Status of NSG as an accredited training provider as well as accreditation of training programmes monitored and maintained on a quarterly basis	Maintain NSG status as an accredited training provider with PSETA		CD: Accreditation		Determination process to be assessed for accreditation purpose	Undertake quality management and assessment process	Undertake quality management and assessment process	Undertake quality management and assessment process	The achievement of performance can be validated through: Accreditation certificate

BRANCH: TRAINING MANAGEMENT AND DEVELOPMENT

<i>Performance Indicator</i>	<i>Annual Performance Target</i>	<i>Risks</i>	<i>Responsibility</i>	<i>Key Activities</i>	<i>QTR 1</i>	<i>QTR 2</i>	<i>QTR 3</i>	<i>QTR 4</i>	<i>Performance Validation</i>
Strategic objective	Manage an integrated and collaborative network of local and international learning and development institutions and practitioners to provide learning and development opportunities								
Number of learning and development facilitators, moderators and assessors to be contracted by the target date	240 learning and development facilitators, moderators and assessors to be contracted annually This will include the use of existing public servants, in line with outcome 12		CD: Induction ALL Streams and CD: Technical Support	<ul style="list-style-type: none"> Professionalise CIP and BB2E trainers for the delivery of Induction programmes Conduct TOT sessions for modules 2 to 5 of CIP 	60 learning and development facilitators, moderators and assessors contracted	90 learning and development facilitators, moderators and assessors contracted	30 learning and development facilitators, moderators and assessors contracted	60 learning and development facilitators, moderators and assessors contracted	The achievement of performance can be validated through: Attendance registers
Strategic objective	<ul style="list-style-type: none"> Train on NSG curriculum, programmes and services with access to learning and development opportunities that provide quality training, learner materials and effective learner support 								
Number of new entrants enrolled for the CIP on an annual basis per job category and adapted to sector for through effective facilitation by experts	A total of 29 350 new public servants undergone the Compulsory Induction Programme	Enrol all newly recruited employees on the CIP.	CD: Induction	<ul style="list-style-type: none"> Develop training schedules with national and provincial departments Manage training schedules for Modules 2 to 5 	3675 new public servants enrolled on the CIP	11 025 new public servants enrolled on the CIP	3675 new public servants enrolled on the CIP	11025 new public servants enrolled on the CIP	The achievement of performance can be validated through: Attendance registers & TMS Statistics
Number of persons trained on in all programmes by the target date	37, 300 persons to be trained on all training programmes in Leadership, Management and Administration streams		CD: Leadership Training CD: Management Training CD: Administration Training		Training 9 325 of persons in all programmes (excluding CIP and BB2E)	Training 9 325 of persons in all programmes (excluding CIP and BB2E)	Training 9 325 of persons in all programmes (excluding CIP and BB2E)	Training 9 325 of persons in all programmes (excluding CIP and BB2E)	The achievement of performance can be validated through: Training stats supported by class registers

BRANCH: TRAINING MANAGEMENT AND DEVELOPMENT

<i>Performance Indicator</i>	<i>Annual Performance Target</i>	<i>Risks</i>	<i>Responsibility</i>	<i>Key Activities</i>	<i>QTR 1</i>	<i>QTR 2</i>	<i>QTR 3</i>	<i>QTR 4</i>	<i>Performance Validation</i>
Number of unemployed youth graduated by target date	Orientate 2,750 unemployed youth graduates through the BB2E Programme	Lack of budgets Low trainer capacity to roll-out training	CD: Induction	<ul style="list-style-type: none"> ▪ Develop training schedules with National and Provincial Departments ▪ Deliver BB2E training ▪ Conduct TOT sessions 	345 unemployed youth graduates orientated	1035 unemployed youth graduates orientated	345 unemployed youth graduates orientated	1035 unemployed youth graduates orientated	The achievement of performance can be validated through: Attendance registers & TMS Statistics
Percentage of learner records captured by target date	100% learner records captured accurately and on time		CD: Technical Support	Process learner records for all learners trained by the NSG.	100%	100%	100%	100%	The achievement of performance can be validated through: TMS records captured

TARGETS NOT INCLUDED IN THE ANNUAL PERFORMANCE PLAN (2015-2016)

BRANCH: TRAINING MANAGEMENT AND DEVELOPMENT

<i>Performance Indicator</i>	<i>Annual Performance Target</i>	<i>Risks</i>	<i>Responsibility</i>	<i>Key Activities</i>	<i>QTR 1</i>	<i>QTR 2</i>	<i>QTR 3</i>	<i>QTR 4</i>	<i>Performance Validation</i>
Strategic objective	Manage an integrated and collaborative network of local and international learning and development institutions and practitioners to provide learning and development opportunities								
Develop and implement a policy related to on-board training capacity	Approved and implemented policy for on-board training capacity by 31 March 2016	Business Strategy for NSG	Branch Head: TMD.	Consult and produce a policy on on-board capacity in collaboration with other branches of NSG and the DPSA	Identify policy imperatives and consult with key stakeholders.	Produce Draft policy for policy on on-board capacity.	Consult Draft policy for policy on on-board capacity.	Seek approval of Draft policy for policy on on-board capacity.	The achievement of performance can be validated through: Consultation report document Draft Policy
Implement and undertake annual	Quality reports produced annually for the MPSA on	Delay of information from	CD: Induction	Hold bi-annual national steering committee	Quarterly report produced (statistics)	Quarterly report produced (statistics)	Quarterly report produced	Quarterly report produced (statistics)	The achievement of performance can

BRANCH: TRAINING MANAGEMENT AND DEVELOPMENT

Performance Indicator	Annual Performance Target	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
reporting on CIP to the MPSA	the rollout of CIP, determined through quarterly reporting	other State providers		monitoring meetings Compile MPSA report as per CIP directive	collated and verified)	collated and verified)	(statistics collated and verified)	collated and verified)	be validated through: Attendance Registers Quarterly Reports The achievement of performance can be validated through: Annual report to MPSA
Strategic objective	Train on NSG curriculum, programmes and services with access to learning and development opportunities that provide quality training, learner materials and effective learner support								
80% of newly appointed officials per quarter commence with training within 2 months from acceptance of their bookings	Percentage of new entrants commencing with CIP training within 2 months from acceptance of their bookings, measured on a quarterly basis	Lack of Budgets from departments Learners in the backlog are prioritised	CD: Induction CD: Technical Support	Coordinate schedules with the NSG and other State Academies, National and Provincial Departments	80% of officials commence with training within 2 months from acceptance of their bookings	80% of officials commence with training within 2 months from acceptance of their bookings	80% of officials commence with training within 2 months from acceptance of their bookings	80% of officials commence with training within 2 months from acceptance of their bookings	The achievement of performance can be validated through: Training Schedules TMS Statistics
A formal graduate (internship) and cadet) recruitment scheme for the Public Service.	Formal graduate and cadet recruitment scheme developed and piloted by 31 March 2016	Delays in policy approvals	CD Induction	Work with the DPSA to design a formal graduate (internship) and cadet recruitment scheme	Participate in consultations on formal graduate and cadet recruitment scheme and benchmarking	Participate in consultations on formal graduate and cadet recruitment scheme and benchmarking	Consultations on formal graduate and cadet recruitment scheme completed.	Draft proposed design of the formal graduate and cadet recruitment scheme received from DPSA.	Attendance registers of meetings Consultative documents Draft proposals from DPSA
At least 2 training delivery modules (scheduling & events management) implemented and	Number of training delivery process management modules implemented on the TMS in order	Change in business model	CD: Technical Support	Finalise Business Process Map Develop and Implement updated Standard	Design and test 1 training module of TMSE	Implement 1 training module of TMSE	Train users on 1 training module of TMSE	Implement the training module of TMSE	The achievement of performance can be validated through: Training modules implemented

BRANCH: TRAINING MANAGEMENT AND DEVELOPMENT

<i>Performance Indicator</i>	<i>Annual Performance Target</i>	<i>Risks</i>	<i>Responsibility</i>	<i>Key Activities</i>	<i>QTR 1</i>	<i>QTR 2</i>	<i>QTR 3</i>	<i>QTR 4</i>	<i>Performance Validation</i>
user acceptance testing completed	to improve training functionalities by 31 March 2016			Operating Procedures					
TMS functionality supports the conditions of contract	Training management system enhanced to provide for prepayment by 30 June 2015	Change in business model	CD: Technical Support	Finalise Business Process Map Develop and Implement updated Standard Operating Procedures	Develop and implement the enhancements to enable prepayment	Maintain TMS	Maintain TMS	Maintain TMS	The achievement of performance can be validated through: System Operational in the NSG
Automated tracking of CIP roll out	Operationalize EDUCOS in line with BP Mapping	Functionality of the system	CD: Technical Support	Assess Business processes, review business process maps Document operational requirements Operationalise EDUCOS Train users	Procure relevant resources from EDUCOS Review Business Processes and assess current EDUCOS platform	Operationalise EDUCOS in the NSG for CIP use	Stabilise the EDUCOS system in the NSG	Develop the plan to include further training programmes on EDUCOS platform.	The achievement of performance can be validated through: System operational in the NSG
Track call centre bookings (combination of national and provincial departments) from departments.	Number of call centre bookings confirmed from departments measured on a quarterly basis	Uptake patterns of departments	CD Marketing	Publish training calendar for mixed groups, Liaise with clients to confirm bookings through an effective Contact Centre	Track and record number of call centre bookings confirmed from departments	Track and record number of call centre bookings confirmed from departments	Track and record number of call centre bookings confirmed from departments	Track and record number of call centre bookings confirmed from departments	The achievement of performance can be validated through: TMS records and training calendar on website
Effective partnerships and communication to stakeholders maintained	NSG stakeholders managed effectively	Availability of accurate information from departments.	CD: Marketing	Maintain a stakeholder database.	Up-to-date stakeholder database and Course Directory	Up-to-date stakeholder database and Course Directory	Up-to-date stakeholder database and Course Directory	Up-to-date stakeholder database and Course Directory	Updated Stakeholder database and Course Directory

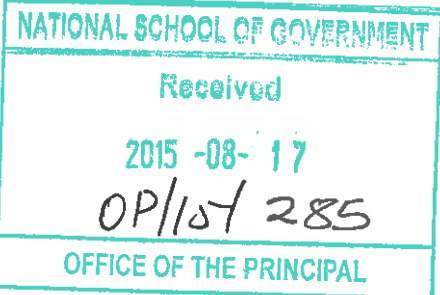
BRANCH: TRAINING MANAGEMENT AND DEVELOPMENT

Performance Indicator	Annual Performance Target	Risks	Responsibility	Key Activities	QTR 1	QTR 2	QTR 3	QTR 4	Performance Validation
		Needs by departments		Provide Secretariat functions to the (PSTF) Convene HRD information sharing platforms	Quarterly Progress Report HRD information sharing platform convened with National Departments	Quarterly Progress Report HRD information sharing platform convened with Provinces	PSTF Conference convened HRD information sharing platform convened with National Departments	Conference report HRD information sharing platform convened with Provinces	Conference report 2 Reports on HRD information sharing platforms at National level 2 Reports on HRD information sharing platforms at Provincial level
Operationalise the Learner Enrolment Centre	Operational Learner Enrolment Centre	Functionality of the System could be affected due to unintended consequences	CD: Marketing	Design, pilot and operationalise the Learner Enrolment Centre	Design first phase and pilot	Refine, design and pilot	Finalise design	Launch of the Learner Enrolment Centre	The achievement of performance can be validated through: Learner Enrolment Centre



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Submission

To:	Prof. Richard M Levin, Principal
Subject:	Request for a consideration and approval of the NSG Operational Plan 2015/16
Date:	11 August 2015
From:	Ms. M Tshikwatamba, DDG: Corporate Management

1. Purpose

To request the Principal to consider and approve the 2015/16 Operational Plan for NSG.

2. Background

- 2.1 NSG's Annual Performance Plan for the 2015/16 financial year was tabled in Parliament on 17 July 2014, as reflected in Parliament's Announcements, Tablings and Committee Reports. Noting that the APP is a high level plan, reflecting the core performance indicators and performance targets, all branches undertook branch planning sessions in order to develop their branch business plans.
- 2.2 The Organisational Operational plan includes additional indicators to the key indicators in the Annual Performance Plan, therefore, presenting a detailed scope of work for each branch in line with the key performance areas of each branch as also depicted in management annual performance agreements. The plan is not intended for broader marketing and distribution to stakeholders, it is an internal document to monitor quarterly performance within branches. It will also form the basis for detailed quarterly reporting to the Minister and National Treasury.
- 2.3 The final Operational Plan following final review and confirmation of final inputs by each Branch Head is attached as **Annexure A** for approval by the Principal.

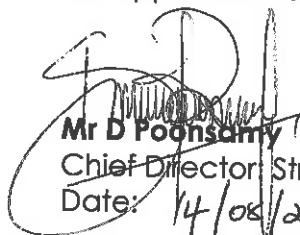
3. Financial implications

- 3.1 No financial implications related to this submission.

4. Proposal

It is proposed that the Principal:


4.1 Approves the 2015/16 Operational Plan for NSG


Mr D Poonsamy
Chief Director: Strategic Planning & ICT Management
Date: 14/08/2015

~~Recommend/ Not Recommended/ Amended~~



Ms M Tshikwatamba
Deputy Director-General: Corporate Management
Date: 14/08/2015

~~Support/ Not Supported/ Amended~~


Ms P Mkwanazi
Chief Financial Officer
Date: 14/08/2015

5. Recommendation

5.1 Approved/not approved/approved as amended


Prof. Richard M Levin
Principal
Date: 31/8/15