

ANNEXURE B: Principles of Ethics Risk Assessment (ERA) Methodology

PRINCIPLES OF ETHICS RISK ASSESSMENT (ERA) METHODOLOGY

Version 1
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1. Introduction

- 1.1 Ethics Risk Assessments in the DR&PW are done in order to identify the Department's ethics risks and opportunities, in observance of the principles and practices of Good Governance for planning, operations and Service Delivery.
- 1.2 Performing an Ethics Risk Assessment (ERA) empowers the Office of Political Oversight (MEC) and the Accounting Officer (HOD) with the necessary information to establish and maintain an ethical culture in the Department.
- 1.3 In order to establish and facilitate a pro-active management style in the DR&PW, Ethics Risk Assessments must be conducted on regular intervals, especially in light of the fact that the DR&PW is a highly visible provincial institution of state, which is exposed to public scrutiny.
- 1.4 The objective of an Ethics Risk Assessment is primarily the identification of Ethics Opportunities, which can be characterized as ethical behaviours, practices, values and beliefs that contribute to an ethical culture in the DR&PW. These must be protected and embedded in the Department because they can lead to positive outcomes for both internal and external stakeholders.
- 1.5 Conversely, Ethics Risks in the DR&PW are ethical behaviours, practices, values and beliefs that could harm internal or external stakeholders, which include, among others, the following:
 - a) poor organisational design and management;
 - b) poor management of the working environment;
 - c) regulatory non-compliance;
 - d) corrupt procurement practices;
 - e) unfair discrimination and disrespect;
 - f) the creation of false negative perceptions of fellow employees by means of malicious hearsay and rumour;
 - g) unauthorised disclosure of confidential information to internal and/or external parties;
 - h) abuse of departmental resources;
 - i) lack of leadership commitment to ethics and good governance practice; and
 - j) instilling of fear to inhibit/prevent/bully employees not to speak out on ethical issues.
- 1.6 Ethics risks must be actively managed to reduce or eradicate their potential negative impact. This involves the establishment of an Ethics Risk Assessment methodology that generates reliable and objective results.

2. The Nature and Significance of Ethics Risk Management

- 2.1 Ethics risks are the current or potential organisational beliefs, practices, or behaviours (conduct) in the DR&PW that either support (upside risk or opportunities) or are in contravention (downside or negative risk) of organisation-specific standards for desired behaviour, and/or in contravention of legitimate stakeholder rights and expectations. This could negatively impact other key organisational processes and undermine the accountability, legitimacy and sustainability of the Department.
- 2.2 Downside ethics risks, both internal and external, may undermine the achievement of the DR&PW's strategic goals; by the same token, upside risks may facilitate the achievement of the Department's strategic goals.
- 2.3 Ethics risk management is the process of planning, organising, directing, and controlling resources and operations to ensure that the DR&PW's ethics management initiative facilitates the achievement of organisational objectives, despite the uncertainty of events.
- 2.4 Ethics governance processes are also aimed at preventing ethics risks from undermining the achievement of the Department's objectives.
- 2.5 Effective ethics risk management will enable the DR&PW to manage the probability of any unforeseen ethics-related events, and, should these occur, to limit the effects of their consequences, along with responding pro-actively to ethics opportunities (upside ethics risks).
- 2.6 It is thus imperative that the DR&PW adopt formal ethics risk management processes, whereby ethics risks are pro-actively identified, analysed, and captured in an Ethics Risk Register (ERR), and then appropriately addressed. Furthermore, ethics risk management needs to be integrated into organisational strategic planning.
- 2.7 An Ethics Risk Assessment (ERA) will provide the Department with the following benefits:
 - a) Because the DR&PW's stakeholders' perceptions are polled during an ERA intervention, stakeholders feel recognised, and become co-creators of the Department's future.
 - b) It affords the DR&PW the opportunity to distinguish between desirable and undesirable conduct.
 - c) It assists the DR&PW in identifying its organisation-specific ethical dilemmas; these can then be pro-actively managed.
 - d) It culminates in a frame of reference, within which a proper ethics management strategy can be formulated.

- e) It provides information on the success of current ethics management systems in the DR&PW that were established to promote ethical behaviour or to deal with unethical behaviour. Progress on ethics management systems could include, but is not limited to, information on the appointment of ethics practitioners, the establishment of a committee(s) dealing with ethics issues, and confirming line managers' responsibility for integrating ethics into the activities of their domains of supervision.
 - f) Specific ethics risks can be accounted for by ensuring that they are adequately covered by the DR&PW's existing Code of Ethics and Conduct and the ethics-related policy measures that complement the Code.
- 2.8 The drive for the DR&PW to conduct an ethics opportunity-risk assessment have multiple origins, such as legislation, compliance requirements, corporate governance guidelines, integrated sustainability reporting requirements, service delivery protests, pressure from internal or external stakeholders, and monetary losses (e.g., due to fraud, theft of departmental property, litigation against the Department, etc.).
- 2.9 The purpose of a departmental Ethics Risk Assessment (ERA) is to identify the beliefs, practices, and behaviours (conduct) that are either:
- (a) counter-productive to the maintenance of the ethical principles and standards that regulate desirable relationships among departmental stakeholders; or
 - (b) enablers of such ethical principles, standards and conduct.
- 2.10 When conducting an ethics opportunity-risk assessment, the DR&PW has to engage with its internal and external stakeholders, to determine:
- (a) stakeholders' perceptions of the Department's ethics; and
 - (b) what they expect of the Department's ethics.
- 2.11 An ERA is neither a forensic investigation, nor an ethics audit. It is also not an opportunity to identify transgressors and engage in a witch-hunt to oust them. It is a management intervention to ascertain the ethics perceptions and expectations that stakeholders of the DR&PW hold.
- 2.12 An ERA provides the DR&PW with a broad frame of reference within which an effective ethics management strategy can be formulated. The Ethics Risk Assessment (ERA) produces a take on the state of the Department's ethics; as such, it will provide a general indication if there is a risk of unethical behaviour in the DR&PW.

- 2.13 A departmental Ethics Risk Assessment (ERA) will also culminate in an **Ethics Risk Profile (ERP)**, which translates into the **identification of specific ethics risks**, the **extent of the prevalence of the perceived ethics risks**, and the **ethics risks' ratings** (high, moderate, or low).
- 2.14 An ERA only addresses the first step of the risk assessment process of risk management; that is, the risk identification process (type of ethics risk), the extent (ethics risk prevalence) to which it is perceived to occur, and the risk rating. As such, it considers neither the consequences nor impact of risk events occurring, nor the likelihood that the risk event will occur and the impact it may have on the DR&PW's objectives.
- 2.15 Once the departmental ERA has been completed, the ethics management function will further analyse and evaluate the ethics risks, in conjunction with the Department's risk management function.
- 2.16 Current departmental control mechanisms to deal with ethics risks will be factored into this process, as well as further control mechanisms required to ensure proper ethics risk mitigation. The process culminates in an Ethics Risk Register (ERR), which forms an important part of the Department's overall Risk Register.

3. Ethics Risk as a particular Type of Organisational Risk

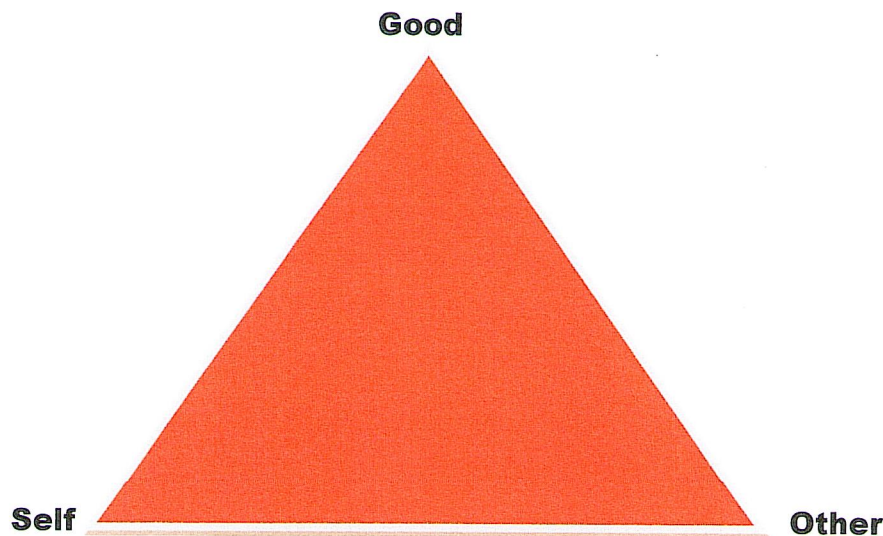
- 3.1 The strategy and objectives of the DR&PW as an institution of state, as well as the way they are implemented are based on preferences, value judgments and management styles.
- 3.2 The departmental management's integrity and commitment to ethical values influence these preferences and judgments, which are translated into standards of behaviour for the DR&PW.
- 3.3 Institutions of state are accountable to the public and increasingly subject to public scrutiny; therefore the maintenance of their good (ethical) reputation is an essential *raison d'être* (reason or justification for their existence).
- 3.4 Ethics are an integral part of Enterprise Risk Management (ERM), in which its importance is emphasised in terms of good governance practices, risk profiling and compliance systems.
- 3.5 Ethics risk must be acknowledged by the DR&PW as a particular type of organisational risk in the same way that legal, operational, ICT, finance, and HRM risks, among others, are.

- 3.6 Given that the non-management of ethics risk could lead to as many, if not more, reputational and financial costs for the Department as any other type of risk, it warrants equal attention. As such, ethics risk is a component of the broader departmental risk framework.
- 3.7 The risk management processes of the DR&PW are also highly dependent on the ethical culture of the Department to enable effective risk management.

4. DR&PW Ethics Risk Management Approach

- 4.1 Ethics concerns itself with what is good or right in human interaction. It revolves around three (3) central concepts: *self*, *good*, and *other*, as depicted in the figure below.

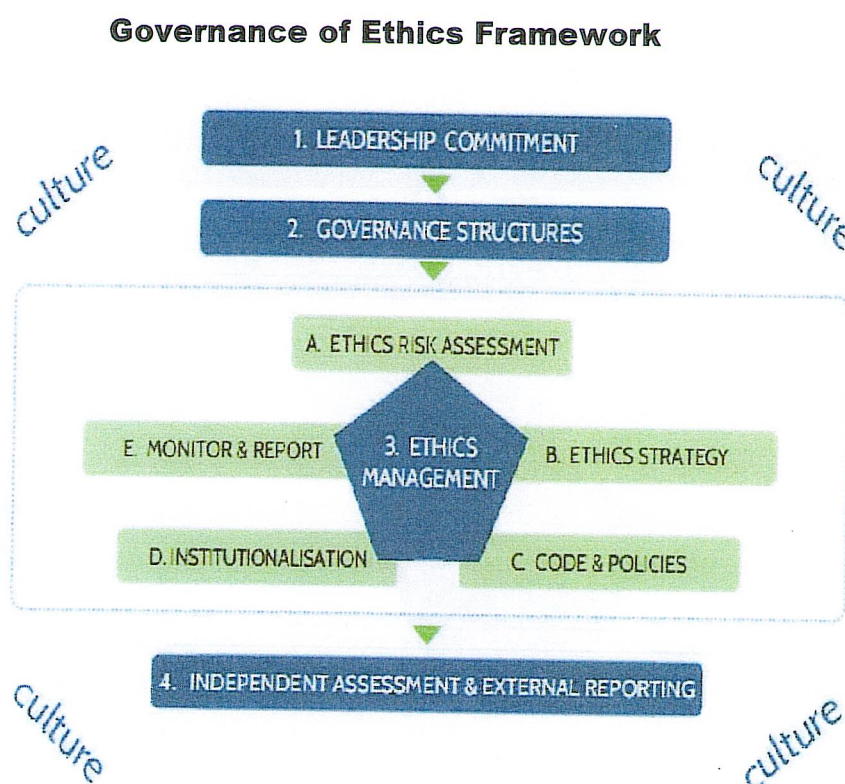
Figure 2: Ethical Human Interaction – Self, Good and Other



- 4.2 Ethical behaviour results when one does not merely consider what is good for oneself, but also what is good for others. Both the self and the other can refer to an individual, a group, or an organisation. Organisational ethics is about a conception of what good (values and standards) guides the organisation (self) in its interaction with the other (stakeholders) in a sustainable way.
- 4.3 Organisations usually experience two (2) major challenges in regard to ethics:
- a) Defining the good in terms of achieving a state where the organisation and above all its internal stakeholders, share a common understanding of the good (of course, the larger the organisation and the more numerous and diverse its internal stakeholders, the more difficult it may be to attain a shared meaning of ethics).

- b) Establishing a sustainable balance between what is good for the self and what is good for others.
- 4.4 In order to guarantee that ethics is dealt with in a rigorous and ordered manner in the organisation, a universal understanding of a best-practice approach in the organization is essential. Such an approach – a Governance of Ethics Management Framework – that must be utilized by the DR&PW is depicted in the diagram below.

Diagram 3: Governance of Ethics Framework



- 4.5 Each of the dimensions of the framework is discussed below. No ethics management initiative can be successful unless the DR&PW's leadership:
- a) understands the value of ethics in ensuring the Department's sustainable development;
 - b) is fully committed to ethics;
 - c) has ethics management competence;
 - d) acts ethically ("walks the talk");
 - e) acts as ethical role models for employees and other stakeholders; and
 - f) support ethics management interventions.

- 4.6 Corporate governance best practice guidelines in this regard are the following:
- a) The DR&PW's management, at all levels, must provide effective leadership based on an ethical foundation.
 - b) The DR&PW's management must ensure that it builds and sustains an ethical corporate culture in the Department.
- 4.7 The starting point for a philosophy of managing ethics is to apply the belief that ethics can indeed be managed in the DR&PW.
- 4.8 Responsibility for the Ethics Management Process in the DR&PW is allocated to the following:
- a) the Fraud Prevention, Ethics and Risk management Committee (FPERC), which is a sub-committee of the Internal Audit Committee (IAC);
 - b) the Directorate Internal Audit and Risk Management, which will be staffed with designated Ethics (integrity) Officers and Practitioners;
 - c) the Financial Inspectorate Unit; and
 - d) the departmental Ethics Champions, who are also the Risk Owners of the DR&PW.
- 4.9 The ethics-related roles and responsibilities of all departmental Directorates, some of whom are represented in the FPERC (see FPERC Terms of Reference); include integrating ethics management activities into their core mandates.
- 4.10 Best practice guidelines for the activities of the Directorate Internal Audit and Risk Management and the Financial Inspectorate Unit are to:
- a) actively manage ethics in the DR&PW;
 - b) provide ethics advice to the FPERC and Senior Management on ethics-related issues;
 - c) co-ordinate ethics risk-opportunity assessments;
 - d) promote integrity and ethical behaviour in the DR&PW;
 - e) advise employees on ethical matters;
 - f) ensure the ethical integrity of policies, strategies, plans, procedures and practices.
 - g) manage Conflicts of Interest, including:
 - i. financial disclosures related to employees;
 - ii. applications for external remunerative work;
 - iii. maintaining departmental gift registers;
 - h) implement ethics awareness- and other ethics training programmes with the support of the Directorate Human Resources and Development, coupled with sound ethics management- and anti-corruption measures;
 - i) identify (by means of the Whistle-Blowing Hotline and other channels) and report on unethical

behaviour and corrupt/fraudulent activities in the DR&PW.

- j) keep a register of all employees under investigation and those disciplined for unethical conduct;
- k) provide regular feedback to the AO (HOD), the FPERC and the Executive Management on ethics performance and challenges in the DR&PW.

5. DR&PW Ethics Risk Assessment

- 5.1 An ethics opportunity-risk assessment is the vital first step in addressing the challenges of determining the good and striving for an optimal balance between the self and the other. The DR&PW must assess, in a structured way, what its ethics risks are.
- 5.2 An Ethics Risk Assessment (ERA), culminating in an Ethics Risk Profile (ERP), provides the DR&PW with a clear understanding of unethical behaviours and organisational practices that could put the organisation at risk. At the same time, an ERA identifies the opportunities related to ethics that can be used by the Department.

6. DR&PW Ethics Strategy Formulation

- 6.1 Once an ERA has been conducted, the DR&PW will need to decide on an ethics management strategy. This would, amongst others, depend on the perceived purpose of bringing ethics into the organisational domain, the current state of the ethics of the Department, previous reputational damage that was incurred, the magnitude of identified risks, and the desired end-state at a point in the future.
- 6.2 After the DR&PW has determined its optimal ethics management strategy, it will design an Ethics Management Plan (EMP) that contains measurable objectives; assigns specific responsibilities, timeframes, and target dates; and allocates the human, financial, and other resources required to implement that strategy.
- 6.3 Once the DR&PW has assessed its ethics opportunities and risks, it can proceed to meaningfully utilise, in a structured way, the information obtained.
- 6.4 As such, the type of ethics management strategy required to capitalise on opportunities and mitigate negative risks will be informed by the results of the risk assessment. For example, should the DR&PW decide on a compliance strategy to deal with the risks associated with supplier relations, it would translate this strategy into an EMP which is designed to strictly monitor and regulate relations with suppliers.

- 6.5 On the other hand, an integrity- or values-based strategy will focus on regular values-based discussions as a component of the DR&PW's more encompassing stakeholder relations drive, rather than adopting many rules and policies and following a punitive approach.

7. DR&PW Code of Ethics and Conduct and Ethics-related Policy Guidelines

- 7.1 Best practice in corporate governance recommends that the departmental management must:
- a) ensure that the ethical values to which the DR&PW will adhere are expressed in its Code of Ethics and Conduct; and
 - b) ensure that the Code of Ethics and Conduct and ethics-related policies are implemented.
- 7.2 After the Department has ascertained what its positive and negative ethics risks are, it can proceed to formulate (or revise) its Code of Ethics and Conduct and ethics-related policy guidelines. The risks identified inform the contents of these documents.
- 7.3 The DR&PW must then ensure that the ethics risks identified are sufficiently accounted for in the current Code of Ethics and Conduct and ethics-related policies. If not, the codes and policies need to be revised. It may even be necessary to formulate new or additional policies.
- 7.4 Furthermore, it will then be necessary to link the Code of Ethics and Conduct and the policies to the ethics management strategy that is deemed appropriate for the DR&PW at a particular point in time. For example, a compliance strategy would have at its core a code of ethics with a strong directional/rules-based focus. Such a code will contain clear guidelines on how suppliers/contractors should be treated, and how suppliers/contractors are expected to act in accordance with departmental prescripts. Moreover, stringent procurement policies and processes that provide specific guidance on how to manage supplier/contractor relations are necessary. At a micro level, the finance function would have very specific rules regarding when suppliers should be paid, e.g., within thirty (30) days of submitting an invoice.
- 7.5 Some organisations have specific clauses included in supplier contracts, according to which suppliers are expected to adhere to the organisation's ethics requirements. Similarly, a Gift Registry System has to be implemented and closely monitored in the DR&PW, to prevent employees from accepting irregular or expensive gifts from suppliers.
- 7.6 Should an integrity- or values-based strategy be followed, the Code of Ethics and Conduct would have an aspirational character, whereby values-based guidelines on the treatment of partners (e.g.,

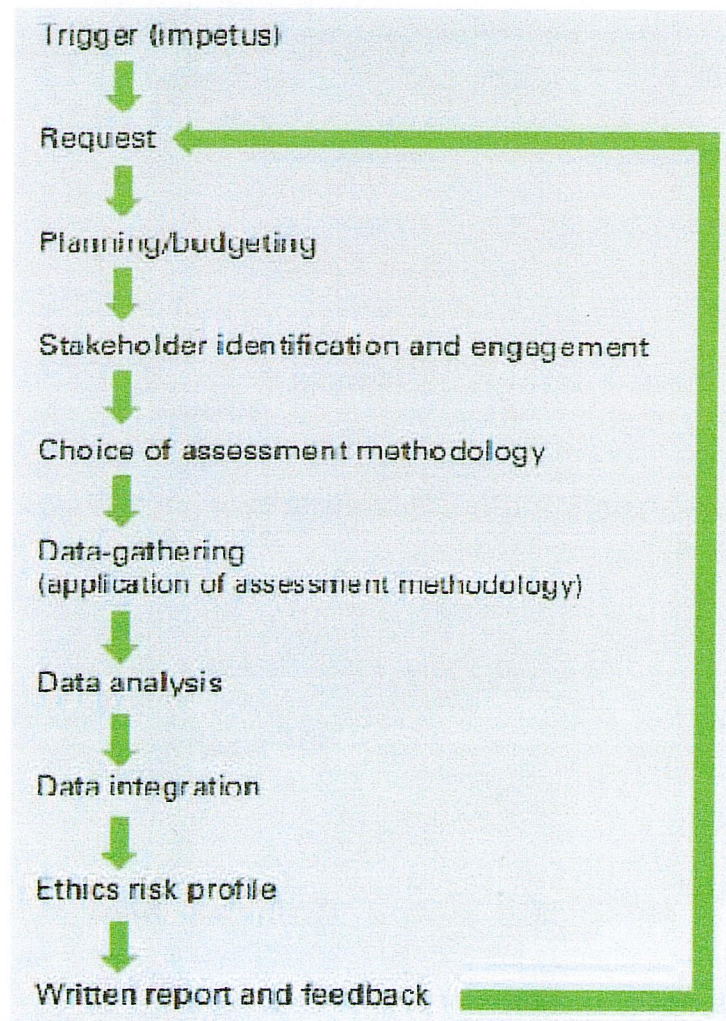
suppliers/contractors) will be provided in broad terms. In this example, procurement policies that have room for discretion would probably be formulated.

8. DR&PW Ethics Risk Assessment Process

The consecutive steps in the process by which departmental ethics opportunities and risks are assessed are shown in the diagram below.

Diagram 4: Ethics Risk Assessment Process

The Ethics Risk Assessment Process



8.1 The Frequency, Scope and Depth of an Ethics Assessment

- a) An Ethics Risk Assessment (ERA) process differs from organisational risk management, where risk is continuously monitored and mitigated, in that it is a process that is applied at regular intervals.
- b) ERA's need to be conducted with some regularity, to ensure that new risks that arise as the Department grows are identified and accounted for.
- c) The factors that determine the frequency with which the DR&PW should assess its ethics opportunities and risk are:
 - i. organisation size;
 - ii. number of employees;
 - iii. budget;
 - iv. ethics management skills levels within the organisation;
 - v. type of service delivery sector;
 - vi. reporting requirements; and
 - vii. the desired scope and depth of assessment.
- d) Typically, a comprehensive and in-depth ethics risk assessment is conducted every three (3) to five (5) years.
- e) It should be borne in mind that, depending on the scope and depth of the assessment, e.g., whether both internal and external stakeholders' perceptions and expectations are polled, a risk assessment process, from the time of the request to the feedback of the results, could take between six (6) months to one (1) year to complete.
- f) The most comprehensive results are obtained when using a combined approach of quantitative and qualitative measures. The popular approach is to first conduct a qualitative assessment. The data yielded by qualitative methods is analysed through the application of content analysis methodologies.
- g) The major and sub-themes that emerge from the data analyses inform the identification of the types of ethics opportunities and risks that exist, or may occur in the foreseeable future, that could enhance or undermine the ethics dimension of the DR&PW's reputation.

- h) Three categories of departmental ethics risk are assessed:
 - i. Conduct (behaviour) risk – these are specific types of risk, e.g., supplier relations, nepotism, fraud, corruption, bribery, theft, misleading reporting, breaches of confidentiality, and many more.
 - ii. Ethical culture risk – typical risks in this category relate to ethical accountability and responsibility, ethics awareness, the willingness to talk about ethics and ethics challenges, leadership commitment to ethics, and the ethical treatment of employees.
 - iii. Ethics management risks – this category of ethics risk refers to the presence and perceived success of ethics management structures, policies, strategies, plans and interventions. Examples of related themes include the status of the DR&PW Code of Ethics and Conduct, the inclusion of ethics in employee induction (on-boarding) interventions, ethics training conducted, conducting integrity assessments of prospective employees, integrity assessment of potential employees, the extent to which ethical behaviour is appraised in performance management systems, and the existence of ethics helpdesks and safe reporting/whistle blowing systems.
- i) Assessment of ethical conduct risk: Here, a major theme that often emerges is supplier/contractor relations. Sub-themes can then be identified, such as the disrespectful treatment of suppliers/contractors, late payment of suppliers/contractors, irregular fraternising by employees with suppliers/contractors, accepting kickbacks from suppliers/contractors, and unfair favouring of certain suppliers/contractors over others.
- j) At this point, the DR&PW management will only be aware of the nature of the themes or the types of themes and, at best, the rank order of the themes according to importance. In essence, qualitative measures produce the What? They do not identify the How much?, i.e. the prevalence or perceived frequency or intensity of occurrence. It also does not yield information on the potential impact or likelihood of occurrence.
- k) A quantitative assessment therefore needs to be applied after the qualitative assessment, where the themes (ethical conduct risks) that emerged from the qualitative assessment inform the contents of the items of a questionnaire or survey.
- l) The questionnaire is then used to assist the DR&PW in determining the extent to which the themes are perceived to occur, or may occur in future.
- m) A risk rating exercise is then conducted, which will yield risk ratings of high, moderate, or low. To further the example used above: supplier/contractor relations and its sub-themes as potential

risks can now be assessed in quantified terms. See the table below for an example.

Table 5: Quantitative Survey Example – Supplier/Contractor Relations

Conduct (Behaviour Risk to the DR&PW) Types of Ethics Challenges		To what extent do you agree that this occurs in the DR&PW?						
		Strongly Disagree Fully Agree						I don't know
1	Employees are rude to suppliers/contractors.	1	2	3	4	5	6	DK
2	Employees engage in irregular fraternising with suppliers/contractors.	1	2	3	4	5	6	DK
3	Suppliers/contractors treat employees lavishly during promotional events.	1	2	3	4	5	6	DK
4	Suppliers/contractors have to wait very long to receive payment.	1	2	3	4	5	6	DK
5	Bribes/kickbacks from suppliers/contractors for awarding business are accepted.	1	2	3	4	5	6	DK
6	Certain suppliers/contractors are used, despite poor products and slow delivery/project completion.	1	2	3	4	5	6	DK
7	The process of awarding contracts to suppliers/contractors is unfair.	1	2	3	4	5	6	DK

- n) The quantitative assessment may also be used to assess the extent to which the DR&PW is perceived to deal with these risks without delay, should they occur, e.g., the extent to which unethical behaviour (conduct), when it occurs, is *encouraged*, *condoned*, *ignored* (turning a blind eye), *discouraged but not dealt with*, or *discouraged and dealt with effectively*.
- o) A further use of such a quantitative assessment may be to assess whether the respondents to the survey are familiar with policies/strategies that exist in the DR&PW and Public Service to deal with such behaviours.
- p) Should the ethics dimension of the organisational culture in the DR&PW be weak or underdeveloped, prevailing beliefs, practices, and behaviours become an ethics risk. Ethical culture risks could therefore also be addressed by means of the ethics risk survey. See the table below for an example.

Table 6: Quantitative Survey Example – Ethical Culture Risks

Ethical Culture Risk to the DR&PW		Strongly Disagree Fully Agree						I don't know
1	Employees know exactly what is expected of them in terms of ethical behaviour.	1	2	3	4	5	6	DK
2	Employees are comfortable approaching superiors with ethical matters/concerns.	1	2	3	4	5	6	DK
3	Business that violates principles of honest and responsible conduct is turned away.	1	2	3	4	5	6	DK
4	Organisational leaders set a good example of honest and responsible behaviour.	1	2	3	4	5	6	DK
5	Employees consider ethical issues/ consequences when making decisions.	1	2	3	4	5	6	DK
6	Ethics policies/strategies and procedures are applied consistently.	1	2	3	4	5	6	DK

- q) In terms of ethics management risk, a section that could be included in a quantitative ethics risk assessment (survey) is provided in the table below.

Table 7: Quantitative Survey Example – Ethics Management Risk

Ethics Management Risk to the DR&PW		Yes	No	I don't know
1	I know who the DR&PW's ethics champion (or Ethics Officer) is.	Yes	No	-
2	The DR&PW has a committee(s)/dedicated unit/directorate for ethics management.	Yes	No	DK
3	There is a unit/directorate in the DR&PW where I can get advice on ethics (e.g., whether I can accept a gift from a supplier or not).	Yes	No	DK
4	There is a unit/directorate in the DR&PW where I can safely report (blow the whistle on) unethical behaviour.	Yes	No	DK
5	I feel equipped to deal with ethical issues.	Yes	No	DK
6	Ethics/integrity is a dimension of my own performance appraisal.	Yes	No	DK
7	There are ethics awareness campaigns in the DR&PW.	Yes	No	DK
8	New DR&PW employees receive ethics training.	Yes	No	DK

- r) The value of qualitative data obtained through the qualitative dimension of ethics risk assessment interventions should never be negated, as the data reflects the true opinions that respondents offer freely, as opposed to data obtained through surveys where respondents provide answers only within the parameters of what is offered to them.

8.2 Ethics Risk Rating

- a) This involves comparing the risk against pre-determined criteria, thus specifying the significance of the risk in terms of the DR&PW's objectives.
- b) All available information should be used in the evaluation stage, including the relevant risk

thresholds the Department has specified in terms of legal, ethical, financial, human resources or other constraints.

- c) The decision that must be taken at this point should consider the following:
 - i. the priority of a risk and, hence, the urgency with which it should be addressed;
 - ii. any risks that can be accepted without further action, such as those with very low probability and impact;
 - iii. those risks that should be accepted only with the implementation of specific responses; and
 - iv. any immediate decisions that are required to avoid risks that breach specific thresholds.
- d) Quantitative data is easily interpreted using a risk rating scale. As an example, the scale below utilises agreement scores (in terms of responses to ethics risk surveys), and could be used to present the ethics opportunities and risks (threats) to which the DR&PW may be exposed.

Table 8: Quantitative Ethics Risk Rating Scale

Risk category	Low risk	Moderate risk	High risk
Agreement score	0 - 33	34 - 66	67 - 100

- e) Low risk areas refer to issues (or behaviours) where respondents Disagree or Strongly disagree that these issues are prevalent in (or relevant to) the Department. Moderate risk areas refer to issues (or behaviours) where respondents only Slightly disagree or Slightly agree that these issues are prevalent in (or relevant to) the Department. High risk areas refer to issues (or behaviours) where respondents Agree or Strongly agree that these issues are prevalent in (or relevant to) the Department.
- f) All moderate and high risks must be taken into account by the DR&PW risk management function, who, in turn, must integrate these risks into the portfolio of departmental risks to be managed.
- g) Furthermore, the Department must, for example, identify its top five (5) to ten (10) high risk areas, and label these material ethics risks, or risks that could undermine the DR&PW's efforts to reach its objectives through the implementation of organisational strategies.

- h) These material ethics risks will also then resort within the ethics dimension of both the departmental Fraud Prevention, Ethics and Risk management Committee's (FPERC) and Internal Audit Committee's (IAC) mandates.

9. Institutionalisation of Ethics in the DR&PW

- 9.1 A corporate governance directive for the institutionalisation of ethics in the DR&PW is that the departmental management must ensure that compliance with the Code of Ethics and Conduct of the DR&PW is integrated into the operations of the Department.
- 9.2 Formulating a Code of Ethics and Conduct and supporting policies/strategies is, however, a necessary but insufficient step in making ethics an integral component of the DR&PW. Ethics need to be institutionalised in the Department – merely being able to demonstrate the existence of the code, policies and strategies is not enough.
- 9.3 Ethics management systems and action plans that complement the formation of an ethical culture, together with the overall departmental Ethics Management Architecture, need to be designed and implemented. Such systems are aimed at making ethics manifest throughout the Department.
- 9.4 Typical departmental Ethics Management Systems, among others, are:
- a) communication systems (ethics awareness campaigns, ethics help-desks, and safe reporting/whistle-blowing facilities/hotlines);
 - b) ethics training initiatives (training on ethical standards and decision-making, providing line managers with the ethics competence they require to effectively manage the ethics of their subordinates);
 - c) orientation/induction programmes containing ethics as an important component;
 - d) performance assessments including ethics as an indicator;
 - e) human resource management (HRM) systems that recruit, select, and retain employees with integrity; and
 - f) disciplinary processes.
- 9.5 The formulation of appropriate codes and policies/strategies to utilise ethics opportunities and mitigate negative risks is followed by the institutionalisation of ethics guidelines contained in the departmental Code of Ethics and Conduct and policies/strategies.

- 9.6 Specific ethics awareness programmes and dedicated ethics training programmes have to be designed and implemented for the Department's employees, specifically those in the procurement function, and for suppliers/contractors alike.
- 9.7 A critical consideration for ethics practitioners is that ethics has to be strategically incorporated into the existing business processes of the DR&PW. It is thus imperative that the ethics management function form a partnership with the risk managers (i.e. Risk Champions and Risk Owners).
- 9.8 Since Risk Champions and especially Risk Owners are the custodians of all risks in the DR&PW, they must enjoy the respect and co-operation of colleagues. They report to an oversight structure e.g., the Fraud Prevention, Ethics and Risk management Committee (FPERC) and the Internal Audit Committee (IAC). Therefore, an Ethics Risks Register (ERR) must be compiled after an ethics opportunity-risk assessment has been conducted. This action must be executed by means of a joint effort of the risk management function and the ethics management function. Through this approach, the ethics risks will be incorporated into the organisation-wide Risk Management Framework (managed by risk managers).
- 9.9 The Risk Champions will facilitate the identification of ethics risks, and then develop an ethics risk register. The Risk Owners will be identified based on the issues that emanate from the ethics risk assessment, and these will be communicated to them.
- 9.10 Action plans are then developed (largely ethics programmes that the Risk Owners will have to implement in conjunction with the ethics management function), and timelines will be allocated. For example, in the case of the supplier relations risk, the risk area of *Gifts from Suppliers* will be appropriated by the Risk Champion, while the relevant Senior Managers, particularly those involved in the procurement function, would become the Risk Owners.

10. Ethics, M&E and Reporting

- 10.1 Best practice governance guidelines include a directive that the DR&PW management must ensure that adherence to ethical standards is measured, monitored and evaluated (M&E) and reported on.
- 10.2 Those Directorates and Units which have been tasked with the ethics management function must monitor the implementation of the Ethics Management Plan (EMP), and report to the FPERC and the IAC on progress in this regard, as well as on the state of ethics in the Department.

- 10.3 The implementation of the Ethics Management Policies and Strategies, as well as the Ethics Management Plan must be monitored.
- 10.4 The ethics management function must work closely with the Department's Internal Audit and Risk Management function at this juncture. Results of such monitoring actions, as well as the current state of ethics of the DR&PW, must be regularly reported to the AO (HOD) and the oversight structures that oversee the Department's ethics management.

11. Independent Ethics Assessment and External Reporting

- 11.1 The departmental ethics governance prescript in this regard, is that the management of the DR&PW must ensure that the Department's ethics performance is assessed, monitored, reported, and disclosed.
- 11.2 There must be independent assessment of the departmental ethics management processes, for instance in terms of an internal audit; and of the ethics management reports, for instance by an external auditor(s), e.g. the Auditor General (AG). This must then be reported to external stakeholders, e.g. the Northern Cape Provincial Legislature (NCPL) and in, amongst others, the Department's Annual Reports.
- 11.3 The desired outcome of any ethics governance and management initiative is the establishment and maintenance of a strong departmental ethical culture.
- 11.4 Although certain state institutions may survive for many years on laissez-faire approaches to ethics, truly sustainable institutions pro-actively build an organisational culture marked by ethical leadership, ethics awareness, ethical decision-making, and sustained ethical behaviour (ethical action).
- 11.5 Finally, an authentic (not only a compliance-driven) ethical culture cannot be achieved in the short term, but requires sustained commitment by the DR&PW's leadership to ensure an ethical culture over time. As with any organisational culture-change exercise, the formation of an ethical culture could take at least three (3) to five (5) years to reach maturity.

12. The Ethics of Ethics Risk Assessment (ERA)

- a) Ethics risk assessment is, in essence, similar to many other management interventions in the public sector. For this reason, an ethics risk assessment warrants the same rigorous data and information management ethics standards as would be applicable to any other project.

- b) Moreover, any risk assessment intervention with ethics as the central theme, may be problematic in itself, as the potential subjects may feel personally threatened or uncomfortable answering ethics-related questions.
- c) The main premise upon which ERA ethics is based is to avoid harm to subjects. This is irrespective of the methodology adopted for the assessment process, i.e. qualitative and/or quantitative.
- d) In the attempt to avoid harm, the following ERA ethics principles must be taken into account during an Ethics Risk Assessment (ERA) process:

12.1 ERA Content

- a) Risk assessors have an ethical obligation to ensure that nothing but the Department's ethics risk is measured. This will result in sound face validity (items/question are perceived by subjects as assessing ethics risks, nothing else) and construct validity (ethics risk as a construct is indeed measured).
- b) The questions posed to subjects during an ERA intervention, whether in interviews or as items in a quantitative survey, should also be non-invasive. This implies that subjects should not be psychologically uncomfortable responding to questions, nor be hesitant to expose "their inner selves" during the assessment process.
- c) Questions should be formulated in such a way that perceptions are assessed, not personal integrity or propensity for ethical or unethical behaviour. In both quantitative and qualitative ethics risk assessments, subjects should all be asked the same questions, as this will ensure assessment reliability.

12.2 ERA Objectivity

- a) For an ethics risk assessment to be objective and to be perceived as objective by the Department and its participating stakeholders, it is advisable to utilise an independent third-party organisation and its interviewers/facilitators as the assessing entity.
- b) Research subjects are less reluctant to share sensitive information pertaining to ethics risks with an objective third party that has no vested interest in the outcome of the risk assessment.

- c) Interviewers and facilitators should be properly trained, to ensure a professional and objective assessment.

12.3 ERA and Informed Consent

- a) Research subjects, i.e. participants (the term that applies to qualitative assessment) and respondents (applicable in quantitative assessment), should be informed of:
 - i. how they were selected to participate in the assessment (preferably through a random selection by, e.g., employee number);
 - ii. what the assessment will entail in terms of process and content;
 - iii. how the results will be used by the Department;
 - iv. the fact they will receive feedback once the results of the assessment have been shared with the DR&PW Senior Management;
 - v. the voluntary nature of their participation;
 - vi. their right to withdraw from the assessment at any time, without consequences;
 - vii. the person(s) that they should contact should any item or procedure in the assessment process be unclear; and
 - viii. the fact that, by participating in the assessment process, they automatically give their informed consent.
- b) It is crucial that subjects are informed by the DR&PW's Accounting Officer (Head of Department) about the imminence and nature of the assessments well in advance of the commencement of a planned Ethics Risk Assessment (ERA).

12.4 ERA Anonymity

- a) The basic rule is that subjects should never have any reason to suspect that their identity could be revealed in any way.
- b) Demographic information solicited in quantitative surveys should be limited to information that will be essential to decision-makers involved in risk mitigation for the DR&PW.
- c) Respondents should not be required to surrender personal information such as names or employee numbers.
- d) Participants in interviews should be well briefed on their ethical rights. In the case of group interviews, facilitators should clearly communicate that the participants' identities are of no importance, but that obtaining their perceptions of ethics opportunities and risks that occur in

the DR&PW is the true objective of the assessment process.

- e) The use of attendance registers should be avoided. As an ERA is not a forensic investigation, participants should be discouraged from identifying ethics transgressors, but should rather focus on the type and frequency of ethical transgressions.

12.5 ERA Confidentiality

- a) All information obtained during a departmental Ethics Risk Assessment (ERA), demographic or otherwise, must be kept absolutely confidential at all times.
- b) Surveys should be hosted by external, independent data hosting service providers, and should preferably not be channelled via the DR&PW's Information Technology (IT) function.
- c) Trends or patterns of behaviour should be reported in the Risk Profile documents of the Department and during feedback sessions, rather than in terms of who did what, and when.

13. Approval of the DR&PW ERA Methodology and Date of Effect

This ERA Methodology is Approved / ~~Not Approved~~

Comments:

.....

.....

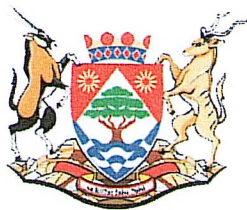
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DR. J. MAC KAY
ACCOUNTING OFFICER

22-08-2023
DATE



the dr&pw

Department:
Roads and Public Works
NORTHERN CAPE PROVINCE
REPUBLIC OF SOUTH AFRICA

INTERNAL MEMO

DATE:	15 AUGUST 2023	REF. NO.	
TO:	THE DIRECTOR: STRATEGIC PLANNING MANAGEMENT		
FROM:	THE DEPUTY DIRECTOR: POLICY AND RESEARCH MANAGEMENT SERVICES		
SUBJECT:	SUBMISSION FOR APPROVAL OF THE REVIEWED DEPARTMENTAL SUPPLY CHAIN MANAGEMENT (SCM) POLICY AND SCM STANDARD OPERATING PROCEDURE (SOP) MANUAL, VERSION 5 AND THE REVIEWED DEPARTMENTAL POLICY ON RISK MANAGEMENT, VERSION 4		

Dear Ms. Bekebeke

Please find attached the final drafts of the reviewed departmental Supply Chain Management (SCM) Policy and SCM Standard Operating Procedure (SOP) Manual (version 5), as well as the Risk Management Policy (version 4), for your perusal and consideration. These policy documents have been circulated departmentally for consultation and inputs and it is hereby submitted for approval by the Head of Department (HOD).

Regards,

Mr. T. Ferreira
Deputy Director: Policy and Research Management Services



the dr&pw

Department:
Roads and Public Works
NORTHERN CAPE PROVINCE
REPUBLIC OF SOUTH AFRICA

INTERNAL MEMO

DATE:	15 AUGUST 2023	REF. NO.	
TO:	THE HEAD OF DEPARTMENT (HOD)		
FROM:	THE DIRECTOR: STRATEGIC PLANNING MANAGEMENT		
COPY:	THE CHIEF DIRECTOR: CORPORATE AND MANAGEMENT SERVICES		
SUBJECT:	SUBMISSION FOR APPROVAL OF THE REVIEWED DEPARTMENTAL SUPPLY CHAIN MANAGEMENT (SCM) POLICY AND SCM STANDARD OPERATING PROCEDURE (SOP) MANUAL, VERSION 5 AND THE REVIEWED DEPARTMENTAL POLICY ON RISK MANAGEMENT, VERSION 4		

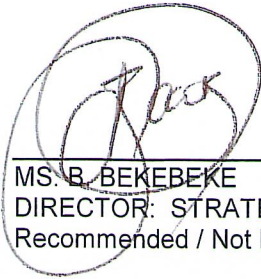
Purpose

1. The purpose of this submission is to obtain approval from the Head of Department (HOD) for the operationalization within the Department of the following reviewed departmental policy documents:
 - a) Supply Chain Management (SCM) Policy and SCM Standard Operating Procedure (SOP) Manual (version 5).
 - b) Risk Management Policy (version 4).

Recommendations

1. The above mentioned policy documents have been circulated departmentally by the Communication and Marketing Unit to consult the staff members in order to provide opportunities for inputs toward the development of the said policy documents.
2. It is therefore recommended that the HOD approve these policy documents as departmental policy.
3. Please see e-mails attached for the Evidence of Departmental Consultation.

SUBMISSION FOR APPROVAL OF THE
DEPARTMENTAL SCM POLICY AND SCM SOP MANUAL (VERSION 5)
AND THE DEPARTMENT POLICY ON RISK MANAGEMENT (VERSION 4)



MS. B. BEKEBEKE
DIRECTOR: STRATEGIC PLANNING MANAGEMENT
Recommended / Not Recommended

15/08/2023
DATE



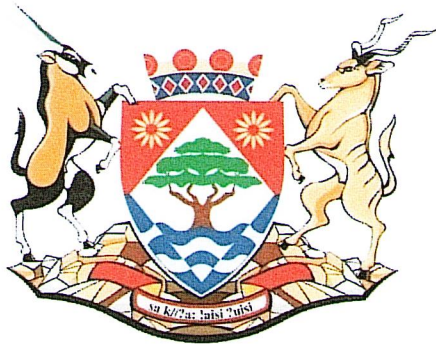
MS. A. MPOTSANG
CHIEF DIRECTOR: CORPORATE AND MANAGEMENT SERVICES
Recommended / Not Recommended

2023-08-28
DATE



DR. J. MAC KAY
HEAD OF DEPARTMENT
Policies Approved / Policies Not Approved

29-08-2023
DATE



the dr&pw

Department:
Roads and Public Works
NORTHERN CAPE PROVINCE
REPUBLIC OF SOUTH AFRICA

**EVIDENCE OF CONSULTATION WITH
DEPARTMENTAL STAKEHOLDERS**

**REVIEWED DEPARTMENTAL SUPPLY
CHAIN MANAGEMENT (SCM) POLICY
AND SCM STANDARD OPERATING
PROCEDURE (SOP) MANUAL**

**SUBMISSION FOR APPROVAL
15 AUGUST 2023**

TFerreira - URGENT POLICY REVIEW: DR&PW SCM POLICY, August 2023

From: DRPW-Info

To: ABrand; ACLouw; AFembers; AKula; ALesotho; ALSishi; amaina@vodamail.co.za; AMasisi; AMegalanyane; AMiller; AMkhize; AMoeti; AMotlagodisa; AMpotsang; ampotsang79@gmail.com; andre.jooste17@gmail.com; AnthonyL; arpinm7@gmail.com; ARudman; ASwanepoel; BaatileItumeleng; Babalwa Bekebeke; BBobeje; BChotelo; BCloete; BDamon; Bettymabili@gmail.com; BGaonakala; BGoba; BKapanda; BMaclean; BMazwi; BMeruti; BMontshiwa; bobbybobeje@gmail.com; BonoloMakoko; BosmanP; BPitso; BSedisho; BSemau; bslingers@vodamail.co.za; c28robertson@gmail.com; CAbrahams; CAdams; CBailey; cbailey@vodamail.co.za; CChakela; CDenysschen; CFourie; ChanelFourie; ChantelleCloete; CharmaineLouw30@gmail.com; ChristinaF; CKakora; clementinerifles@gmail.com; CMrwebi; CNdebele; CNotuku; CRabaji; CRobertson; CValentine; CvanRooi; DBingwa; DBingwane; denicebingwane460@gmail.com; DGaehete; DKowa; DMAqutyana; DMokoena; DMonyamane; DMwembo; DPhirisi; drpwesimon@gmail.com; DRPW-Info; DSolo; dtsoai.drpw.nc@gmail.com; DvdMerwe; EbenSwartboo; EBeukes; EBreytenbach; EduPlessis; EJobe; EJonkers; EKhatwane; ELecwedi; elsie.dupels@gmail.com; EMichaels; emodise@vodamail.co.za; ENodoba; EPino; EricksenA; ESimon; esterhuyssek133@gmail.com; euricanodoba04@gmail.com; faithpmoabi631@gmail.com; FdeBruin; FDooling; feliciadebruin2@gmail.com; FMogoje; FPetoro; FvanVuuren; GJacobs; gkeyser@vodamail.co.za; GMoabi; GMolale; gobiditseonerobertmosang@gmail.com; GPIetersen; gregs.gak@gmail.com; GSalimana; GSefotho; gstuurman17@gmail.com; GSwanepoel; GThupe; GTopkin; gvmhlauli@gmail.com; HenerydeWee@gmail.com; hermie@hantam.co.za; howardtsume1@gmail.com; howardvanstaden@gmail.com; HPuley; HvanderMerwe; ICarolus; IFredericks; ILottering; IMolore; inocentia.senza@gmail.com; IOliphant; IRammutla; Isaacprins9@gmail.com; ITIhopile; ivmphosi@gmail.com; j.mackay123456@gmail.com; JHanekom; jivanjaarsveld55@gmail.com(...)

Date: 8/2/2023 12:46 PM

Subject: URGENT POLICY REVIEW: DR&PW SCM POLICY, August 2023

Attachments: Draft Amendments (in RED) - DR&PW SCM Policy, Aug 2023.docx

Good day Colleagues,

Kindly find attached document containing specifically proposed amendments and additions to the Approved **DR&PW SCM Policy** of April 2023. The due date for feedback from staff is Wednesday, **09 August 2023**, and can be e-mailed to tferreira@ncpq.gov.za

Amendments and additions to the affected policy sections are indicated in **RED**. Please take note that the SCM Directorate has indicated that this review is an **urgent matter**, because of operational efficiency issues.

For any clarification consult with Mr. Tom Ferreira (M.Admin, PDIA); Deputy Director: Policy and Research Management Services; Tel: 053 - 8392156

Thank you



DRPW-info@ncpg.gov.za

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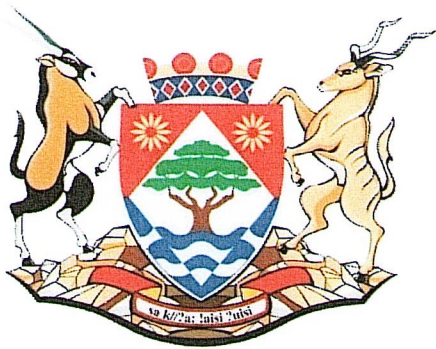
Department of Roads and Public Works

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Fax: 053 8392290

Trendsetters in infrastructure delivery to change the economic landscape of the province'



the dr&pw

Department:
Roads and Public Works
NORTHERN CAPE PROVINCE
REPUBLIC OF SOUTH AFRICA

**EVIDENCE OF CONSULTATION WITH
DEPARTMENTAL STAKEHOLDERS**

**REVIEWED DEPARTMENTAL POLICY
ON RISK MANAGEMENT**

**SUBMISSION FOR APPROVAL
15 AUGUST 2023**

TFerreira - POLICY REVIEW: NEW DR&PW DRAFT RISK MANAGEMENT POLICY, VERSION 4

From: DRPW-Info

To: ABrand; ACLouw; AFembers; AKula; ALesotho; ALSishi; AMasisi; AMegalanyane; AMiller; AMkhize; AMoeti; AMokwadi; amomokwadi@gmail.com; AMotlagodisa; AMPotsang; ampotsang79@gmail.com; andrejooste17@gmail.com; AnthonyL; arpinm7@gmail.com; ARudman; ASwanepoel; BaatileItumeleng; Babalwa Bekebeke; BBobeje; BChotelo; BCloete; BDamon; Bettymabili@gmail.com; BGaonakala; BGoba; BKapanda; BMaclean; BMazwi; BMeruti; BMontshiwa; bobbybobeje@gmail.com; BonoloMakoko; BosmanP; BPitso; BSedisho; BSemau; bslingers@vodamail.co.za; BValentine; c28robertson@gmail.com; CAdams; CBAiley; cbailey@vodamail.co.za; CChakela; CDenysschen; CFourie; ChaneFourie; ChantelleCloete; CharmaineLouw30@gmail.com; ChristinaF; CKakora; clementinerifles@gmail.com; CMrwebi; CNdebele; CNotuku; collin.upt@gmail.com; CRabaji; CRobertson; CValentine; CvanRooi; DBingwa; DBingwane; denicebingwane460@gmail.com; DGaehete; DKowa; DMAqutyana; DMokoena; DMonyamane; DMwembo; DPheisi; drpwesimon@gmail.com; DRPW-Info; DSolo; dtsoai.drpw.nc@gmail.com; DvdMerwe; EbenSwartboo; EBeukes; EBlaauw; EBreytenbach; ed.simon19@gmail.com; EduPlessis; EJobe; EJonkers; EKhatwane; ELecwedi; elsie.dupels@gmail.com; EMichaels; emodise@vodamail.co.za; ENodoba; EPino; EricksenA; ESimon; esterhuysek133@gmail.com; euricanodoba04@gmail.com; faithpmoabi631@gmail.com; FdeBruin; FDooling; feliciadebruin2@gmail.com; FMogoje; FPetoro; FvanVuuren; GAppels; GCloete; GJacobs; GMoabi; GMolale; GPIetersen; gregs.gak@gmail.com; GRiet; GSalimana; GSefotlho; gstuurman17@gmail.com; GSwanepoel; GThupe; GTopkin; gvmhlauli@gmail.com; HenerydeWee@gmail.com; howardvanstaden@gmail.com; HPuley; HvanderMerwe; ICarolus; IFredericks; ILottering; IMolore; inocentia.senza@gmail.com; IOliphant; IRammutla; Isaacprins9@gmail.com; ITIhopile; ivmphosi@gmail.com; j.mackay123456@gmail.com; JHanekom; jillian.williams74@gmail.com; JillianWilliams(...)

Date: 3/24/2023 10:51 AM

Subject: POLICY REVIEW: NEW DR&PW DRAFT RISK MANAGEMENT POLICY, VERSION 4

Attachments: DR&PW Policy on Risk Management - Ver 4, March 2023.docx

Good day Colleagues

Hereby receive version 4 of the Departmental Policy on Risk Management, which is under review for your input in terms of policy consultation.

The due date for staff members regarding inputs is Thursday, 30 March 2023 and inputs can be e-mailed to tferreira@ncpg.gov.za

Regards,

Tom Ferreira
Deputy Director: Policy and Research Management Services
DR&PW

Thank you



DRPW-info@ncpg.gov.za

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Fax: 053 8392290

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TFerreira - POLICY REVIEW: 2nd CONSULTATION ON RISK MANAGEMENT POLICY

From: DRPW-Info

To: A van Staden; ABrand; ACLouw; Adele Louw; AFembers; AKula; ALesotho; Ali Choma; ALSishi; AMasisi; AMegalanyane; AMiller; AMkhize; AMoeti; AMotlagodisa; AMPotsang; Andre Jooste; Ann Mpotsang; ARudman; Ashley Karsten; ASwanepoel; BaatileItumeleng; Babalwa Bekebeke; BBoebeje; BChotelo; BCloete; BDamon; Betty Mabilo; BGaonakala; BKapanda; BMaclean; BMazwi; BMeruti; BMontshiwa; Bobby Bobeje; BonoloMakoko; BosmanP; BPitso; Bradley Slingers; BSedisho; BSemau; CAbrahams; CAdams; CBailey; CChakela; CDenysschen; CFourie; ChanelFourie; ChantelleCloete; ChristinaF; CKakora; Clement Oor; Clive Bailey; CMrwebi; CNdebele; CNotuku; CRabaji; CRobertson; CRobertson; CValentine; CvanRooi; D Mokoena; D Mwembo; Dan Tsoai; DBingwa; DBingwane; Denice Bingwane; DGaehete; DKowa; DMAqutyana; DPhirisi; DRPW-Info; DSolo; DvdMerwe; EbenSwartboo; EBeukes; EBreytenbach; Ed Simon; EduPlessis; Edward Simon; EJobe; EJonkers; EKhatwane; ELecwedi; Ella Modise; Elsie du Plessis; EMichaels; ENodoba; EPino; EricksenA; ESimon; Eurica Nodoba; Faith Petoro; FdeBruin; FDooling; Felicia de Bruin; FMogoje; FPetoro; FvanVuuren; Gaolatlhe Sefotlo; Garnett Keyser; Garnett Keyser; Garnett Keyser; GJacobs; GKeyser; Gladwyn Stuurman; GMoabi; GMolale; Godfrey Moabi; GPIetersen; Gregory; GSalimana; GSefotlho; GSwanepoel; GThupe; GTopkin; Harold Roberts; Henry De Wee; Hermie Strauss; Howard Tsume; Howard van Staden; HPuley; HvanderMerwe; I Bulane; I Michaels; I Thopile; ICarolus; IFedericks; ILottering; IMolore; Innocentia Rammutla; IOliphant; IRammutla; Isaac Prins; J Esterhuysen; J Mac Kay; JHaneekom; Jillian Williams; JLeeuw; JMarx; JMolale; JMoncho; Johannes van Jaarsveld; Jors Legoshe; JSehume; JSibiya; JSitler; JSpetember; JTawine; June Erasmus; June Grey; K Maarman; K Malgas; K Matonkonyane; KAaron; KagishoModise; Kathlego Rifles; KatzS; KBeuzana; KBopape; KChomi(...)

Date: 6/12/2023 7:34 AM

Subject: POLICY REVIEW: 2nd CONSULTATION ON RISK MANAGEMENT POLICY

Attachments: DR&PW Policy on Risk Management - Ver 4, March 2023.docx

Good Day Colleagues

Please find attached the reviewed DR&PW Policy on Risk Management, version 4, which is hereby circulated for further consultation with staff members of the Department for comments/inputs. The due date for feedback from staff members is Monday, 19 June 2023 and can be e-mailed to tferreira@ncpq.gov.za

For any clarification regarding the above-mentioned policy, kindly consult with Mr. Tom Ferreira (M.Admin, PDIA); Deputy Director: Policy and Research Management Services
Tel: 053 - 8392156

Thank you



DRPW-info@ncpg.gov.za

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'Trendsetters in infrastructure delivery to change the economic landscape of the province'

TFerreira - 2nd CONSULTATION ON RISK MANAGEMENT POLICY

From: AFembers
To: tferreira@ncpg.gov.za
Date: 6/19/2023 8:21 AM
Subject: 2nd CONSULTATION ON RISK MANAGEMENT POLICY

Good morning Mr Ferreira,

Thank your for circulating the above mentioned policy.

As the Risk Management Committee, we reviewed the policy and it's content is in order.

Regards



Ms A Fembers
Department of Roads & Public Works
Financial Inspectorate
053-8392175 / 072 6002109

TFerreira - POLICY REVIEW: 3RD CONSULTATION ON RISK MANAGEMENT POLICY - ERA Methodology (Annexure B)

From: DRPW-Info

To: A van Staden; ABrand; ACLouw; Adele Louw; AFembers; AKula; ALesotho; Ali Choma; ALSishi; AMasisi; AMegalanyane; AMiller; AMkhize; AMoeti; AMotlagodisa; AMPotsang; Andre Jooste; Ann Mpotsang; ARudman; Ashley Karsten; ASwanepoel; B BDamon; BaatileItumeleng; Babalwa Bekebeke; BBobeje; BChotelo; BCloete; Betty Mabilo; BGaonakala; BKapanda; BMaclean; BMazwi; BMeruti; BMontshiwa; Bobby Bobeje; BonoloMakoko; BosmanP; BPitso; Bradley Slingers; BSedisho; BSemau; C CvanRooi; C Robertson; CAbrahams; CAdams; CBailey; CChakela; CDenysschen; CFourie; ChanelFourie; ChantelleCloete; ChristinaF; CKakora; Clement Oor; Clive Bailey; CMrwebi; CNdebele; CNotuku; CRabaji; CRobertson; CValentine; D DMokoena; D DMwembo; Dan Tsoai; DBingwa; DBingwane; Denice Bingwane; DGaehete; DKowa; DMAqutyana; DPhirisi; DRPW-Info; DSolo; DvdMerwe; EbenSwartboo; EBeukes; EBreytenbach; Ed Simon; EduPlessis; Edward Simon; EJobe; EJonkers; EKhatwane; ELechedi; Ella Modise; Elsie du Plessis; EMichaels; ENodoba; EPino; EricksenA; ESimon; Eurica Nodoba; Faith Peto; FdeBruin; FDooling; Felicia de Bruin; FMogoje; FPeto; FvanVuuren; Gaolathe Sefotlo; Garnett Keyser; Garnett Keyser; GJacobs; Gladwyn Stuurman; GMoabi; GMolale; Godfrey Moabi; GPIetersen; Gregory; GSalimana; GSefotlho; GSwanepoel; GThupe; GTopkin; Harold Roberts; Henry De Wee; Hermie Strauss; Howard Tsume; Howard van Staden; HPuley; HvanderMerwe; I Bulane; IICarolus; IIThopile; IIMichaels; IFridericks; ILottering; IMolore; Innocentia Rammutla; IOliphant; IRammutla; Isaac Prins; J Esterhuysen; J JHanekom; J Mac Kay; Jillian Williams; JLeeuw; JMarx; JMolale; JMoncho; Johannes van Jaarsveld; Jors Legoshe; JSehume; JSibiya; JSitler; JSpetember; JTawine; June Erasmus; June Grey; K KMaarman; K KMatonkonyane; K Malgask; KAaron; KagishoModise; Kathlego Rifles; KatzS; KBeuzana; KBopape; KChomi; Kehilwe Mojaki(...)

Date: 6/21/2023 7:14 AM

Subject: POLICY REVIEW: 3RD CONSULTATION ON RISK MANAGEMENT POLICY - ERA Methodology (Annexure B)

Attachments: RISK MAN POLICY, Ver 4, Annexure B - ERA Methodology - June 2023.docx

Good morning Colleagues

Please find attached Annexure B: Principles of Ethics Risk Assessment (ERA) Methodology, which will form part of the already circulated draft DR&PW Policy on Risk Management, Version 4.

The attached draft document is for the attention of all DR&PW staff members for inputs/comments. The due date for feedback is Wednesday, 28 June 2023 and can be e-mailed to tferreira@ncpg.gov.za

For any clarification or more information regarding the attached document, kindly consult with Mr. Tom Ferreira, Deputy Director: Policy and Research Management Services
Tel: 053 839 2156



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