

problems in the police are researched and recommendations are made to curb errant behaviour. Similarly, the annual report lists the following strategic objectives:

- To ensure that new complaints are received, analysed, processed and registered.
- To maintain a database system which serves as a register for all ICD complaints.
- To manage information technology on order to ensure a smooth operation of all ICD IT systems.
- To consolidate and manage all ICD information needs with a view to facilitate access and sharing of knowledge and information.
- To manage all communication and marketing processes and activities with a view to facilitate the dissemination of information and the promotion of ICD products and services to all stakeholders.
- To embark on various Proactive oversight activities including research, station audits, monitoring, etc. with a view to making recommendations to address systemic problems in policing.

#### **Service Delivery**

- Registration of new cases took on average 24 hours in accordance with targets. This is a 100% improvement on the previous financial year. However there is still a problem with the prompt referral of cases to other internal units such as Investigations and Monitoring. A factor that was identified as contributing to this problem was the failure of Case Intake Committees to function as they ought (for example, staff shortages/unavailability in the provincial offices make it difficult to convene meetings of such committees).
- Proactive Oversight Unit. The POU conducted 3 projects and hosted one workshop.
- Information Technology (IT) developed a comprehensive IT security Policy (endorsed by the NIA) to be implemented in the following financial year.
- The development of an Intranet commenced in November 2005. The system is expected to be fully operational by June 2006.
- The Case management System was upgraded to improve performance at the operational level. The system was tested and implemented on 1 April 2005.
- Data lines between the offices were upgraded to cater for the increased volumes of work.
- IT staff dealt with helpdesk calls. The response time was on average 8 hours. Calls were resolved in less than 4 hours consistently but initial failure to implement the helpdesk solution provides the impression that standards were not achieved.
- A number of outreach activities per province were held to raise awareness regarding the ICD.

## Key Challenges

- Accurate information is important in ensuring informed decision-making and for ensuring accountability. The Strategic Plan 2005-2008 identifies the need for up-to-date database as crucial in ensuring both informed decision and in holding stakeholders responsible.
- Ensuring that recommendations from the stakeholder workshop regarding an improved relationship between the SAPS, Secretariat and the ICD are taken forward.

## Issues for Consideration

- *What steps has the ICD taken to promote awareness with regard to the implementation of the Domestic Violence Act? To what extent have awareness campaigns affected the reporting of alleged misconduct or non-compliance on the part of SAPS members with the provisions of the Domestic Violence Act? How are the effects of such awareness campaigns being monitored?*
- *Given its mandate to monitor the implementation of the Domestic Violence Act, as well as the establishment of a Proactive Oversight Unit, is the ICD able to comment on the findings of a recent study, which reported a high incidence of femicide (the killing of one's female partner) within the security sector.<sup>2</sup> Has the ICD undertaken any further investigation into this finding to uncover the factors that might contribute to this? Have any recommendations been made as to how families-at-risk can be identified and assisted? In addition, the study highlighted poor handling of such cases on the part of SAPS? Has the ICD undertaken any research into this?*
- *What has been the focus of its Proactive Oversight Unit's targeted research thus far, and what interventions have been identified as needing to be made? What has been the outcome of any recommendations made? How does the ICD intend measuring the success, or otherwise, of any interventions made as a result of the Unit's recommendations?*

<sup>2</sup> Matthews, S; Abrahams, N, Martin, L, Vetten, L, van der Merwe, L & Jewkes, R. Every Six Hours a Woman is Killed by her Intimate Partner. A National Study of Female Homicide in South Africa. MRC Policy Brief. No. 5, June 2004.

## 7. Statistics

### 7.1. Overview

**Table: Deaths, Criminal Offences and Misconduct Case Intake**

Province	2005/06	Provincial Share
Eastern Cape	338	7%
Free State	494	10%
Gauteng	969	19%
KwaZulu-Natal	602	12%
Limpopo	369	7%
Mpumalanga	360	7%
North West	501	9%
Northern Cape	408	8%
Western Cape	1078	21%
<b>Total</b>	<b>5119</b>	<b>100%</b>

There is generally a 12 % decrease in the number of cases reported to the ICD from April 2005 to March 2006 relative to the same period in the previous year. Despite the overall decrease, Free State experienced complaint increases of 24%, when compared to 2004/2005.

#### **Issues for Consideration**

- *Can the ICD explain the overall decrease in the number of complaints when compared to 2004/2005?*
- *Can the ICD explain the increase in the number of complaints in the Free State when compared to 2004/2005?*

### 7.2. Deaths in Police Custody and as a Result of Police Action

A total of 621 cases of deaths in police custody and as a result of police action were received. There was a decrease (5%) in the number of deaths in police custody and as a result of police action from 2004/2005. Of the 621 deaths in police custody and as a result of police action, the majority occurred in KwaZulu Natal (KZN) (22%), followed by Gauteng (21%) and then Eastern Cape (16%).

Of the 621 cases, municipal police were involved in 8 deaths as a result of police action. All deaths were related to shooting incidents. In Gauteng, members of the Ekurhuleni Metropolitan Police Service and the Tshwane Metropolitan Police were each involved in shootings that resulted in 2 deaths each, while one shooting involved members of the Johannesburg Metropolitan Police department. The Cape Town City Police were responsible for 1 death.

Shootings account for 52% of deaths (although the majority of these happened during police operations, 14 of those killed were innocent bystanders). Natural causes accounted for 19% of the deaths, suicides accounted for 12% of the deaths, 11% of deaths were as a result of injuries sustained prior to the deceased being taken into police custody, while 5% of deaths were caused from injuries sustained in custody.

The annual report identifies a number of police stations that may require interventions. Of particular concern are Tembisa and Hillbrow that registered 6 and 7 deaths respectively. Kempton Park, Moroka both had 5 deaths each. In KZN, Emapngeni had the highest death toll nationally (9 deaths). Inanda (6 deaths), Esikhawini (5 deaths) and Durban Central (5 deaths) also stand out.

### 7.3. Criminal Offences

A total of 1 643 allegations of criminality were reported. The majority were reported in Gauteng and the Western Cape. Reporting of allegations of criminality decreased by 5% when compared to the previous financial year.

### 7.4. Misconduct

A total of 2 837 cases of police misconduct were reported to the ICD. The majority of complaints emanated from the Western Cape (24%), followed by Gauteng (18%). Nationally, misconduct complaints decreased by 16% when compared to the previous year.

### 7.5. Finalisation of Cases

**Table: Finalised and Substantiated Cases by Province**

Province	Finalised 2005/2006	Substantiated 2005/2006	Subs rate
Eastern Cape	138	58	42%
Free State	167	46	28%
Gauteng	666	51	8%
KwaZulu-Natal	363	149	41%
Limpopo	59	14	24%
Mpumalanga	98	15	15%
North West	705	106	15%
Northern Cape	16	11	69%
Western Cape	320	145	45%
<b>Total</b>	<b>2532</b>	<b>595</b>	<b>23%</b>

**Table: Finalised Cases by Type**

Case Type	Received 2005/2006	Finalised 2005/2006	Finalisation Rate
Death	295	275	93%
Criminal	890	552	62%
Misconduct	2326	1705	73%
<b>Total</b>	<b>3511</b>	<b>2532</b>	<b>72%</b>

#### **Issues for Consideration**

- *Registration of new cases reached the target of 24 hours. However, delays were noted in the referral of complaints to other internal units. How is the ICD dealing with this problem?*
- *Does the ICD conduct regular visits to police stations and holding cells? If it does, what is the level of co-operation from the SAPS?*
- *Has research been done into why KwaZulu Natal and Gauteng feature so prominently in the number of deaths in police custody and as a result of police action?*

### **8. Human Resource Management**

Capacity has been identified as being the chief challenge facing the ICD:

**Table: Employment and vacancies per programme on 31 March 2006 were as follows:**

Programme	Number of posts	Number of employees	Vacancy rate
Programme 1	60	51	15
Programme 2	83	71	14.4
Programme 3	60	53	11.6
<b>Total</b>	<b>203</b>	<b>175</b>	<b>13.7</b>

Analysis of the vacancies per salary level indicates the following:

Programme	Number of posts	Number of posts filled	Vacancy rate
Lower skilled	-	-	-
Skilled	65	53	18.4
Highly skilled production	77	67	12.9

Highly skilled supervision	48	46	4.1
Senior and Top management	13	9	30.7
<b>Total</b>	<b>203</b>	<b>175</b>	<b>13.7</b>

Overall, expenditure of personnel consisted of 61.41% of expenditure for the ICD. A breakdown of personnel costs is as follows:

- Programme 1: Personnel expenditure comprises 56.6% of the programme's budget. In addition, R 974 000 was spent on professional and special (consultants) services.
- Programme 2: Personnel expenditure comprised 65.35% of the programme's budget. In addition, R 231 000 was spent on professional and special (consultants) services.
- Programme 3: Personnel expenditure comprised 60.98% of the programme's budget. In addition, R 141 000 was spent on professional and special (consultants) services.

**Span of control:** managers are defined as those occupying positions from level 13 upwards (senior and top management). Where there are too few people reporting to a manager, it can be said that it is expensive for the Department to deliver a given service. However, if there are too many employees reporting to a manager, the management may well be effective, especially if the work being done is not repetitive. In general, a span of control between 4 and 11 is considered optimal, while for the public sector, internationally governments are moving to a ratio of 1: 11. The span of control ratio for the ICD is approximately 1: 18, indicating cause for concern.

Higher vacancy and turnover rates are generally assumed to impede the organisations capacity to fulfil its mandates. The average vacancy rate for the ICD is 13.7% (although it is 30.7% for senior and top management), while the average turnover rate is 25%.

#### **Issues for Consideration**

- *What is the vacancy rate? Have there been difficulties in recruiting staff and, if so, what is the nature of such difficulties? Which offices experience the most difficulty in filling posts?*
- *Can the ICD give more details of the consultants used during the financial year 2005/2006?*
- *How doe the ICD intend expanding its services to rural and remote areas given its capacity constraints?*

## 9. Report of the Auditor General

The Auditor General was unable to express an opinion on the financial statements.<sup>3</sup> Attention, however, was drawn in the 'emphasis of matter' to the following issues:

- **Incorrect disclosure of receivables.** Management did not independently review and confirm the correctness and completeness of the debtors (National Treasury, SAPS, Statistics SA and Provincial Government – Western Cape). An amount of R 195 213 was paid in advance and not recovered from the Department of Public Works and was not disclosed as receivable. In addition, the owing departments could not confirm inter-departmental receivables.
- **Information systems audit.** A follow-up information systems audit was performed on the user-account management procedures surrounding the BAS application. It was found that the duties were inadequately desegregated, allowing the systems administrator to perform the functions of an ordinary user. This together with the inadequate authorisation of new users may compromise the integrity of the data inputted to the system.
- **Non-compliance with laws and regulations:**
  - **Lack of approved supply chain management policy.** For the year under review the ICD's Chain management policy was still a draft. It was, however, approved in March 2006 and implemented in April 2006.
  - **Internal audit.** Treasury Regulations were not complied with. The control environment was ineffective as a result of weaknesses in the internal audit division.
- **Insufficient control of leave benefits.** Due to a lack of independent management review and monitoring, the controls over leave were insufficient.
- **Human resource management.** Due to a lack of independent management review and monitoring, the human resource plan was in draft form and the contents of the draft plan were also not in accordance with the Public Service Regulations.

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<sup>3</sup> This is a disclaimer and is very severe. A disclaimer is when the Auditor concludes that the possible effect of a limitation on the scope of the audit is so material and fundamental that the auditor has not been able to obtain sufficient audit evidence, and accordingly is unable to express and opinion on the financial statements. Qualified, adverse and disclaimed audit opinions are cause for great concern as they could point to serious financial mismanagement.

- **Special investigations.** Allegations were made against the ICD in respect of travelling and subsistence, as well as recruitment. The allegations were referred to the Public Service Commission (PSC) for investigation on 19 November 2004. The PSC report had not been released at the time of the audit report. The Portfolio Committee for Safety and Security also requested that the Auditor General perform a separate investigation on human resources, travelling and subsistence expenditure. Control weaknesses that were identified were brought to the Department's attention.

### Issues for Consideration

- *What is the Directorate doing to ensure that these matters are being addressed?*
- *What progress has been made in correcting each of the items identified by the Auditor-General?*

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### Sources

Estimates of National Expenditure 2005.

Estimates of National Expenditure 2006.

Independent Complaints Directorate, Annual Report 2005/2006.

Independent Complaints Directorate, Strategic Plan 2004 – 2008.

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