

Audit Action Plan - 2023/2024

BA-PHALABORWA MUNICIPALITY

28 JANUARY 2025

2023/2024

28 January 2025



1. Introduction

The Municipality receive a qualified audit opinion on the 2023/2024 audit by the AGSA. The qualification paragraphs that caused the qualification are as follows:

- a) Service Charges: Sale of Electricity
- b) Mopani District Municipality (Water and Sanitation) Incorrect corresponding figures

The Audit Action Plan is consolidated by the Internal audit Unit, then distributed to management to provide action plan, root cause, responsible person and due dates for implementation. The Action Plan as completed by management will then be submitted to Internal Audit with POE where relevant for review. Internal Audit will review then call management audit steering committee to discuss further the audit action plan. The agreed upon action plan will then be tabled to Audit committee for review and approval with recommendation for Council adoption. After approval of the Audit Action Plan by audit Committee, internal audit will upload the action plan on the portal and management will capture their final comments as approved by AC on the portal.

Summary of audit findings:

The following reflects the summary of the findings raised per section

Section	Number of findings
Revenue	7
IT	5
SCM	2
Environmental Management	2
Strategic Planning	1
Human Resources	1
Expenditure	1
Assets Management	1
Risk Management	1
Total	20
Risk Management & SCM share 1 finding hence total is 2	0 not 21

2023/2024

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2. Detailed Action Plan

Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
AR Paragraph 3	Service Charges: Sale of Electricity The Municipality did not recognize service charges in accordance with GRAP 9, Revenue form exchange transactions. Differences were identified between electricity meter readings in the billing reports and actual readings per the meter reading reports. Consequently, service charges: Sale of electricity and receivables from exchange transactions were overstated by R29 362 172 in notes 23 and 08 for the financial statements respectively.	Meter Updates (Corrections) are done to correct Meter Readings that would have been incorrectly captured in the previous Billing Periods as result of using estimates which causes differences in the billing report and metering reports . Lack of automated meter reading input.	Tshishonga N	31 March 2025	Management will request the service provider (CCG) to assist on how to address the finding. CCG to update the billing module to e-billing which will address the process of meter update (corrections of readings) Training to be provided to Revenue staff on e-Billing by 31 January 2025. CCG to extract the full report of accounts that were affected by the meter updates (i) highlight the incorrect reading (ii) Highlight also the correct reading & (iii) highlight the correction posted, which will form part of the Audit file. Where adjustment was done after 30 June 2024, correction will be posted through a Journal to ensure that the misstatement	In progress	Management had a meeting with CCG in December 2024 and has requested action plan with timelines from the service provider to address the finding.
AR Paragraph 3 COMAF 46	Mopani District Municipality (Water and Sanitation) - Incorrect corresponding figures During the audit of payables from exchange	Inadequate controls on reconciliation	Tshishonga N	30 April 2025	identified by the AG is resolved Perform quarterly reconciliations of opening balances. Implementation of e-Billing module	In progress	Management has prepared the journal to correct the finding and has requested CCG to open the



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	transactions on Mopani District Municipality (Water and Sanitation), we identified that the adjustment to the opening balance of R126 831 736,40 was incorrectly recorded as a movement in the Mopani District Municipality loan account during the financial year 2024, rather than being reflected as an opening balance. Therefore, the closing balance of R346 347 432 as reflected in the AFS note 15 is not inclusive of R126 831 736, 40.	Manual capturing of journals, roll over. Inadequate standard operating procedures (SOP) on opening balances.			Review and update of the Standard Operation Procedures (SOPs)		previous FY (proposed Date is 21/01/2025, after 16H30) The journal has been prepared and awaiting to posted.
COMAF 10	Consumer deposit – Incomplete Consumer deposit listing During the audit of consumer deposits, we identified a consumer deposit from application forms book which could not be traced to the consumer deposit listing for the current year under review.	Incorrect implementation of business requirements i.e incorrect mapping of application form codes Misclassification as result of MSCOA codes	Tshishonga N	30 April 2025	Management will meet with CCG and requested Action plan with timelines to address the finding. Furthermore, management will review the schedule of consumer deposit timeously to ensure that the finding doesn't occur The codes will be corrected and tested by management (28th February 2025)	started	Management had a meeting with CCG in December 2024 and requested Action plan with timelines to address the finding. CCG reviewing the mapping and will advise the status before 31/01/2025



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
					Follow up will be done with Treasury MSCOA coding and implemented accordingly.		
COMAF 22	Payables from exchange transactions: Debtors with credit balances – Difference between debtors with credit balance ageing and customer statement	Incorrect implementation of business requirements i.e allocation of customer payments	Tshishonga N	30 April 2025 31 March 2025 31 March 2025	Management will arrange a meeting with CCG to address the findings. implementation of e-billing module Revenue Staff to attend training on the 30 th and 31 st January 2025	Not yet started	Management had a meeting with CCG in December 2024 and requested Action plan with timelines to address the finding.
COMAF 52	Inaccurate allocation of interest to consumer debtors. We have identified that the municipality has allocated interest of outstanding debtors to different service lines incorrectly. The incorrectly calculated interest was subsequently allocated to different debtors for the purpose of determining the customers' individual gross balances, which some debtors were impaired. Refer to the details below:	Incorrect implementation of business requirements i.e allocation of interests	Tshishonga N	30 April 2025 31 March 2025 Monthly 31 May 2025 31 March 2025	Management will have a meeting with CCG to address the findings. CCG will implement an e-Billing module to address the findings. Perform monthly reconciliations Perform interim Financial Statements for - 9 months. Revenue Staff to attend training on the 30 th and 31 st January 2025	In progress	Management had a meeting with CCG in December 2024 to address the findings.



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	Management calculated						
	Management calculated interest allocation to each						
	service line by allocating						
	interest due under each						
	period of the age analysis						
	using a balance receivable						
	under the same period.						
	For example, management						
	allocated the interest of R						
	10 730 532,33 under current						
	period, using balance						
	which were due under the						
	current period totaling an						
	amount of R 37 614 283,45.						
	The formula applied by						
	management in allocating						
	the interest for each period						
	is [Property Rates Interest						
	= (Total interest on arrears						
	under current period *						
	(Property rates balance						
	under current / Total						
	balance of services						
	excluding interest under						
	current period)]. The						
	Property rate interest for						
	current period amount as						
	per Table 2 - Interest Break						
	Down below is R3 216 697,						
	o3. This amount was						
	calculated using the						



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	formula above as Property						
	Rate Interest (R3 216 697,03						
	– Table 2) = [R 10 730 532,33						
	(Table 1) * (R 11 275 652,50						
	(Table 1) / R37 614 283,46						
	(Table 1)].						
	The formula applied						
	incorrectly allocates						
	interest to balances as it						
	does not consider the						
	balance which was used in						
	calculating the interest in						
	each category. i.e It						
	assumes that the interest						
	under current period						
	would have been						
	calculated using only the						
	balances within current						
	period while the credit and						
	control policy of Ba-						
	Phalaborwa Local						
	Municipality, states that						
	interest shall be levied on						
	services outstanding for						
	over 90 days. Therefore,						
	the balance used to						
	calculate the interest						
	under current period per						
	the age analysis would						
	have been the balance as						
	of 31 March 2024.						



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	We recalculated the						
	interest allocation applying a formula which uses the						
	balances of 90 days						
	overdue accounts to						
	allocate interest in each						
	period as per below in						
	table 3 to table 6 below.						
	Table 3 demonstrates the						
	interest breakdown						
	recalculations, the						
	recalculations for period						
	180 days, 150 days and 120						
	could not be calculated as						
	the balance due for over						
	90 days are beyond the 180						
	days balance per the age						
	analysis and not in the age						
	analysis per below.						
	However, we calculated						
	the average percentage as						
	per table 4, which indicate						
	how much % of interest has						
	each service got in each						
	period. With these						
	percentages, an average						
	overall percentage was						
	calculated which was						
	ultimately applied to						
	estimate the allocation of						
	the interest under 120, 150						



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	and 180 days to each service.						
	Based on the recalculations below, the final difference is noted under table 5 which indicates that consumer debtors are understated by 13 595 733						
COMAF 52	Inaccurate allocation of interest to MDM water and sanitation services from Ba-Phalaborwa Local Municipality	Incorrect implementation of business requirements i.e allocation of interests	Tshishonga N	31 March 2025 31 March 2025	Management will have a meeting with CCG to address the findings. CCG will implement an e-Billing module to address the findings.	In progress	Management had a meeting with CCG in December 2024 to address the findings.
	Based on the recalculations below, the final difference is noted under table 1 which indicates that MDM water and sanitation are			31 March 2025 31 March 2025	Develop and implement a revised interest allocation formula that considers balances overdue. Revenue Staff to attend training on the 30 th and 31 st January 2025.		
	overstated by R13 595 733						
COMAF 53	AoPO - Number of HH with access to free basic electricity and Number of HH with access to free waste removal services (2 Indicators). During the audit, we have	Registration of application forms not done in line with the policy	Tshishonga N	30 April 2025	Management will stamp the Indigent application forms on the date of registrations and the Applications form will be reviewed against the vetted register.	Not yet started	Management is the process of acquiring a stamp and the current applications form will be stamped.



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	requested the application			February	Develop a checklist to ensure that		
	forms for indigent subsidy			2025	application forms are in line with		
	for 2023/24 financial year.				policy and SOPs.		
	Upon receipt of the forms,			30 April			
	we have inspected the			2025	Application forms will be		
	forms and noted the				reviewed, signed and dated		
	following:				before vetting.		
	The forms do not indicate						
	which financial year they						
	relate to. The completion						
	year written by applicants						
	are 2022.						
	The councillors approved						
	the application however,						
	they did not indicate the						
	date on which they						
	approved the application.						
	Due to the above, we were						
	unable to confirm whether						
	the indigents who received						
	free basic electricity and						
	free waste removal						
	services qualified during						
	the 2023/24 financial year.						
	Based on the above						
	quoted policy, indigents						
	who did not apply for re-						
	registration are removed						
	from the register and are						
	considered as normal						
	customers. Refer to the						



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	tables below:						
COMAF 15	Cash and cash equivalent – Difference between bank confirmation and AFS/TB/GL During the audit of cash and cash equivalents, we identified discrepancies amounting to R513, 150.36 between the bank balances as reflected in the bank confirmations (obtained directly from the banking institutions) and the balances recorded in the Trial Balance, General Ledger, and Annual Financial Statements of the municipality.	Lack of proper review of the bank reconciliations balance against the Trial Balance and the bank confirmations due to time constraints. Inadequate yearend process plan. Inadequate planning (initiating the AFS process)	Mokganya Tselagale Isaiah	10 February 2024 30 April 2025 28 February 2025 Monthly	Investigate the incorrect journals passed after the reconciliations have been finalised. Prepare AFS Preparation Plan which will ensure that the review of the Bank reconciliations and alignment with Trial Balance/GL and the Bank confirmations. Reverse all the incorrect Journals to correct the R513 150.36 finding raised by the AGSA. Reconcile cash and cash general ledger accounts monthly.	Not yet started	
COMAF 2	Supply chain management policy not in line with SCM regulations. During the review of supply chain management policy, we noted that the policy has not been updated to cater for amendments to SCM	The Municipality's Interpretation was that the Municipality is still within the threshold by retaining the limit of R200 000 on the quotations,	Mr. Selepe NW	28 February 2025	To table an Item to council for approval in terms of retaining the limit of R200 000 on quotations in the SCM Policy.	In progress	Item has been prepared for submission to Council for approval.



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	regulations <u>dated 14</u>	the amended					
	December 2023. The	regulation					
	municipality remained on	stipulated the					
	the following same range for procurement processes	threshold of up to R300 000 on					
	and there is no evidence to	quotations.					
	indicate that an exemption	quotations.					
	was granted not to update						
	the policy:						
COMAF 12	SCM - Interest business	A false	Sekwari TMT	28		In Progress	A request was
	partner (Interest not	declaration of		February	all staff on declaration of		issued for
	declared on MBD 4 and	interest and did	Mr. Selepe	2025	business interests.		completion of the
	financial disclosure form).	not disclose the	NW				Declaration of
	Contrary to the above	business		31 January	Employee screening prior		Financial Interest
	requirements, we noted	relationship they	Mashele YK	2025	appointment will be conducted.		for 2024/25 fy.
	that the following service	have with the		_			
	provider was awarded the	employee of the	Selapyane JB	30 June			Councilors 33,
	contract in the	municipality.		2025	Consequence management will		All Senior
	Municipality, however they				be applied on the affected staff		Management and
	made false declaration on	Dut in place		-0	member.		other
	the MBD 4 declaration	Put in place controls that		28	Affected employees will be		Staff 04 declared.
	form by indicating that they are not connected	detect business		February	advised to take reasonable steps		
	with person who is	relations		2025	to clear their names.		
	currently employed by the	Telations		28	to clear triell flames.		
	Ba-Phalaborwa Local	Non-declarations		February	Continuous analytics be		
	Municipality. The MBD 4	of interest by		2025	performed on SCM processes as a		
	declaration form was	employees		202)	deterrent.		
	marked as "No".			31 March	222		
	Furthermore, there is no			2025	Annual declarations by all		
	evidence that the relevant				employees will be done.		



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	official disclosed the interest on financial disclosure form.						
COMAF 3	Performance management - The "employees other than the municipal manager and managers who are directly accountable to the municipal manager" did not sign a performance agreement for the current year. It was noted that the "employees other than the municipal manager and managers who are directly accountable to the municipal manager" did not sign a performance agreement for the current year under review. Only s57 Managers signed performance agreements and no other officials of the municipality.	Lack of performance policy.	Mashele YK	31 January 2025 28 February 2025 31 January 2025	Develop the Performance Policy and framework. Implement the approved policy. Develop a cascading plan for assessment of all employees.	In progress	Performance Policy and Framework developed and approved by Council. Employees at Level 2, 3 and 5 have signed 2024/2025 performance plans for 2024/2025 Financial Year. Cascading plan developed.
COMAF 13	IT Service Continuity – A disaster recovery plan test was not performed.	Lack of the DR Site due to inadequate implementation of DRP.	Roger Chuene	28 February 2025	Full Implementation of the DRP (Establishing DR site on Azure synchronize the cloud and onpremises environment.	Completed	The DR site has been established and tenant on the azure



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	Contrary to the above requirements, during the planning phase, it was noted that DRP testing was not performed in the 2023/24 financial year due to the environment not being fully implemented. Failure to perform Disaster Recovery Plan (DRP) testing can lead to missed Recovery Time Objectives (RTOs) and Recovery Point Objectives (RPOs). IT and operational staff might not be familiar with the DRP testing process leading to confusion and mistakes during an actual disaster, and potential loss of critical data due to the inability to recover all data during a disaster.	Inadequate skills to perform DRP testing.	Person	28 February 2025 Quarterly	Deploy Office 365 (Exchange online). Perform quarterly testing of the DRP.	Status	environment created and Office 365 deployed (MS exchange on line activated and one drive). Quarterly testing are being performed.
	The audit finding is a reoccurring finding as it was reported in the two previous financial years. As per the management action plan submitted for the audit, management is						



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	still in the process of addressing this audit finding.						
COMAF 13	Revenue business process - Inadequate input validation controls within the SAGE 200 system As reported in the prior financial year, the following key field had not been set as mandatory when creating a new customer: Initials; Title; Contact details Postal address Street/Physical address Incomplete information may be captured which might result in inaccurate billing information being processed resulting in a loss of revenue for the Municipality. The audit finding is a re- occurring finding as it was reported in the two previous financial years. As per the management	Inadequate configuration of the mandatory field on the customer creation form.	Roger Chuene	28 February 2025 28 February 2025	Input validations will be implemented Mandatory field will be identified and configured as mandatory on the front end when creating new customers.	Completed	The system Vendor was requested to set the mandatory field on the front end and that the creator not be able to proceed with the customer creation and also give an error when field that are mandatory are not filled with required data, those recommended fields were configured by the system vendor.



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	action plan submitted for the audit, management is still in the process of addressing this audit finding.						
COMAF 13	Inadequate user access management – Review of access rights on the SAGE 300 system. Contrary to the above requirements, during the planning phase, we noted that user access reviews were not performed for the period under review. Without adequate user account management procedures, user accounts might not be properly managed and controlled which could lead to unauthorized access being gained to the SAGE 300 system due to lack of formalised user access controls. This may compromise the availability, integrity and confidentiality of the system and data. The audit finding is a re-	Lack of user creation and function allocation form and forms could not be reviewed.	Roger Chuene	28 February 2025	Develop the user creation and role allocation form for Sage 200 that will be approved by the respective Senior Manager and reviewed by ICT Manager.	In-Progress	The user creation and function allocation form has been developed and has been approved by the respective senior manager and reviewed by the ICT Manager



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	occurring finding as it was reported in the two previous financial years. As per the management action plan submitted for the audit, management is still in the process of addressing this audit finding.						
COMAF 13	Inadequate user access management – review of access rights on the SAGE 200 system Contrary to the above requirements, during the planning phase, we noted that the review of user access rights forms was submitted for audit purposes; however, we noted that the review of access rights was only performed on three employees of which this number does not provide adequate assurance considering the size of the municipality. The review of the user access rights was not done across different departments, and diverse	Lack of user creation and function allocation forms and forms could not be reviewed.	Roger Chuene	28 February 2025	Develop the user creation and role allocation form for Sage 200 that will be approved by the respective Senior Manager and reviewed by ICT Manager.	In-Progress	The user creation and function allocation form has been developed and has been approved by the respective senior manager and reviewed by the ICT Manager



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	roles and access levels were not considered, especially in the finance departments. Employees with high-risk access such as authorization of payment were not prioritized. Details are as follows:						
COMAF 16	ISA – ICT strategy plan was not approved and implemented. Contrary to the above requirement, during the audit we could not obtain evidence that ICT strategic plan submitted for audit was approved and implemented in the 2023/24 financial year.	Inadequate internal capacity to review the ICT strategy	Roger Chuene	30 June 2025 31 March 2025	Management will consider the recommendation of the IA on the ICT strategy and incorporate them into the current strategy then take the strategy through the approval stage. Outsource implementation of ICT strategy and request assistance from SALGA.	Not yet started	30 June 2025
COMAF 43	Prior year annual report - 2022/23 final annual report was not made public after being tabled in the council. During the audit we noted that the 2022/23 final annual report was not made public after being tabled in the council, as required by section	Lack oversight responsibility regarding financial and performance reporting and compliance and related internal controls.	Chueu Malishelane Mogano J	07 February 2025 07 February 2025	Review all documents before publication to ensure accuracy in labelling and compliance with statutory requirements. Develop a document verification checklist to ensure consistency, which includes items such as: Document title and version number Date and approval status	Not yet started	Implementation on 2022/2023 Annual Report has commenced.



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	127(5)(a)(i) of the MFMA. The Municipality only made public the draft annual report on 06 February 2024 as per municipality website				 Verification of attachments and appendices Review of formatting and layout. 		
COMAF 48	Provisions: Environment rehabilitation – Non-compliance During the audit of the provision for	Lack of review and monitor compliance with applicable laws and regulations. (land invasion)	Hlongwane T Mashele YK	30 June 2025 30 June	Prioritize the immediate initiation and completion of the environmental risk assessment and abatement report. Manager Environmental	Not yet started.	
	environmental rehabilitation for Namakgale landfill site, we noted that a closure license referenced 12/4/10/8 - A/14/M2 for the landfill that was issued by the provincial Department of Economic Development, Environment and Tourism on 09 February 2015 has expired. The original closure license was valid for a period of 2 years (Doc 1: clause 2.18.3) but has now lapsed. There is no evidence that the municipality has applied for a new closure license. During the audit of the	Invasion of the site by the community		2025 30 June 2025	Management post be filled Develop a clear plan on the Namakgale landfill site.		



Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	provision for environmental rehabilitation for the landfill site, we noted that the end-user requirements for Ba-Phalaborwa landfill site have not been approved by the Department of Economic Development, Tourism and Environmental Affairs. Namakgale landfill site has no end use requirements in						
COMAF 50	place. Provision: Environment rehabilitation – Misclassification of current and non-current liabilities During the audit of the provision for environmental rehabilitation for the landfill sites, we identified misclassification between current and current liabilities. Non-current liabilities that are expected to be settled beyond 12 months after the reporting period have been classified	Incorrect information submitted to the Expert resulting in incorrect expert report.	Doron Maswanganyi Hlongwane T	30 June 2025	Collaboration between BTO and CSS during engagements with the experts on environmental matters.	In progress	The adjustment Journal to correct the misclassification of current and non-current liabilities has been passed on the system on 30 th November 2023.

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Reference	Finding	Root Cause	Responsible Person	Due Date	Action Plan	Implementation Status	Progress to date
	as current liabilities.						
COMAF 50	Provision: Environment rehabilitation – Internal control deficiency Contrary to the above, there is no evidence that municipality performed	lack of monitoring of the implementation of the National Environmental Waste Act to	Hlongwane T	30 September 2025	Appointment of Environmental Specialist to conduct environmental risk assessment at Namakgale landfill site in February 2025.	Not yet started	
	any investigation/risk assessment to identify any impact that landfill site operations may have on the environment, public and proposed end-use.	ensure compliance.	Mashele YK	30 June 2025	Appointment of Manager Environmental Management post.		

3. Recommendations

- 3.1. That Council note the Audit action Plan as developed by management.
- 3.2. That the Audit Action Plan was reviewed at the Audit Action Plan Workshop held on the 27-28 January 2025.
- 3.3. That the workshop was attended by Limpopo COGHSTA, Provincial Treasury, SALGA, AGSA and National Treasury.
- 3.4. That Council note that the Audit Action Plan was audited by Internal Audit and reviewed by the Audit Committee
- 3.5. That Council note that the Audit Committee approved the Audit Action Plan and recommends adoption by Council
- 3.6. That Council adopt the 2023/2024 Audit Action Plan.