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INTEROFFICE MEMORANDUM

MEMORANDUM INTERIEUR

OFFICE OF INTERNAL OVERSIGHT SERVICES · BUREAU DES SERVICES DE CONTRÔLE INTERNE
INTERNAL AUDIT DIVISION · DIVISION DE L'AUDIT INTERNE

TO: Ms. Navanethem Pillay, High Commissioner
A: Office of the High Commissioner for Human Rights (OHCHR)

DATE: 13 October 2011

REFERENCE IAD: 11- 006 24

FROM: Fatoumate Ndiaye, Director
DE: Internal Audit Division, OIOS



SUBJECT: **Assignment no. AE2011/336/01 – Audit of OHCHR Regional Office for Southern Africa**
OBJET:

Overall results relating to efficiency and effectiveness of the operations of the Regional Office for Southern Africa were partially satisfactory

1. Attached please find the final report on the above-mentioned audit.
2. Annex I shows the status of recommendations. Please note that OIOS will report on the progress made to implement its recommendations in its annual report to the General Assembly and to the Secretary-General annually for important recommendations (nos. 1-3).
3. The audit also identified a number of opportunities for improvement (see Annex-II). While OIOS will not report on the implementation of these opportunities, we encourage you to implement them to improve the efficiency and effectiveness of your operations. OIOS will review their implementation as part of future audits.
4. Please note that under General Assembly resolution 59/272, a Member State may request that the final report be made available. Also note that pursuant to General Assembly resolution 64/263, OIOS has included the complete management response as an appendix to the present report.
5. We wish to express our appreciation to the Management and staff of OHCHR for the assistance and cooperation extended to the auditors during the assignment.

cc: Ms. Kyung-wha Kang, Deputy High Commissioner, OHCHR
Mr. Anders Kompass, Director, Field Operations and Technical Cooperation Division, OHCHR
Mr. Ibrahim Wani, Chief, Africa Branch, Field Operations and Technical Cooperation Division, OHCHR
Ms. Yanine Poc, Representative, OHCHR Regional Office for Southern Africa
Mr. Kyle Ward, Chief, Programme Support and Management Services, OHCHR
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Mr. Swatantra Goolsarran, Executive Secretary, UN Board of Auditors
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INTERNAL AUDIT DIVISION · DIVISION DE L'AUDIT INTERNE

Mr. Christopher F. Bagot, Chief, Geneva Audit Service, OIOS

Ms. Amy Wong, Programme Officer, Internal Audit Division, OIOS

FINAL AUDIT REPORT

Audit of OHCHR Regional Office for Southern Africa

BACKGROUND

The OHCHR Regional Office for Southern Africa (ROSA) was established in Pretoria, South Africa in 1998 as the first OHCHR regional office. ROSA is responsible for providing human rights advice and assistance to governments, civil society and United Nations country teams in the Southern African region. It is strategically important because it covers a wide geographical area with no other OHCHR field presence. Since the office has never been audited, OIOS included this assignment in its 2011 work plan, in agreement with OHCHR management.

ROSA is headed by a P-5 Senior Human Rights Officer and Regional Representative (Representative) supported by five staff; three professional and two general service level staff. ROSA's budget was approximately \$2 million and \$1.3 million for the bienniums 2010-2011 and 2008-2009 respectively.

OBJECTIVE AND SCOPE

The audit was conducted to assess whether ROSA effectively implemented adequate risk management, control and governance processes to provide reasonable assurance regarding the efficiency and effectiveness of its operations. The key controls tested for the audit include those related to: (a) risk management and strategic planning; (b) performance monitoring; and (c) regulatory framework. The audit covered the period 2009-2010.

AUDIT RESULTS

In OIOS' opinion, ROSA's risk management, control and governance processes examined were **partially satisfactory** to provide reasonable assurance regarding the efficiency and effectiveness of its operations.

OHCHR established detailed guidelines on planning and monitoring for field offices and a manual outlining the administrative procedures. ROSA prepared a strategy document, annual work plan and performance reports as required by the guidelines. During 2010, ROSA also improved its administrative arrangements. However, there were areas that needed improvement, as outlined below.

Non-compliance with the strategic planning guidelines

ROSA's 2010-11 sub-regional notes (the strategy document) did not fully comply with the guidelines established by the OHCHR Policy Planning, Monitoring and Evaluation Service (PPMES). The strategy document did not include detailed documentation and assessment of the office's comparative advantage, the role of other actors and the risks and challenges that ROSA faced, as required by the guidelines. There was therefore no assurance that ROSA had prioritized its activities to focus on areas where it would add most value and that it adequately assessed the risks and explored the opportunities to collaborate with other actors. The major reason for non-compliance was the fact that staff were not fully conversant with the planning requirements. Further, the review process undertaken by PPMES and the Field Office and Technical Cooperation Division (FOTCD), which would have helped in ensuring compliance, was not effective because ROSA did not address the review comments raised.

(1) The OHCHR Field Operations and Technical Cooperation Division, in consultation with the Policy Planning, Monitoring and Evaluation Service, should establish training or briefing sessions on the preparation of planning documents and develop a checklist to assist desk officers and section chiefs in the review of field office planning documents to ensure compliance with established guidelines.

ROSA accepted recommendation 1 and stated that training for desk officers and FOTCD staff in general is being conducted by the Policy Planning, Monitoring and Evaluation Service in June 2011. A checklist is being developed. Training of field office staff is taking place and will be continued until the end of 2011. Recommendation 1 remains open pending receipt of the PPMS training plan and the checklist or other improvements made to the review process.

Need to revise performance indicators

ROSA did not develop specific, measurable and achievable expected accomplishments and performance indicators for the period 2010-2011, as required by the PPMS guidelines. They were either too broad or long-term in nature, or the targeted countries and the baselines for the performance indicators were not specified. For example, the expected accomplishments dealing with integration of human rights standards into country programmes and compliance with human rights mechanisms would be clearer and focused if the countries were specified and the baselines were defined. In addition, two new expected accomplishments were established in the 2011 work plan that were very broad being office-wide expected accomplishments. ROSA did not refine and tailor them to its specific situation and available resources, as recommended in the guidelines. Furthermore, performance indicators were not defined for the new expected accomplishments. In addition, there was no clear linkage between the expected accomplishments in the sub-regional notes and those being pursued in the work plans.

As the current expected accomplishments are valid for another two years ROSA should revise them to more effectively monitor performance and establish work plans that focus on a few related outputs to optimize impact and minimize the risk of spreading itself too thin.

(2) The OHCHR Regional Office for Southern Africa should revise the expected accomplishments and performance indicators established in the sub-regional notes to include more specific and achievable expected accomplishments and define targets and baselines where appropriate.

OHCHR accepted recommendation 2 and stated that it will use the upcoming planning cycle to revise its expected accomplishments and indicators. Recommendation 2 remains open pending receipt of the revised expected accomplishments and performance indicators.

Non-compliance with the office-wide administrative policies and procedures

ROSA did not fully comply with the Field Office Manual and standard operating procedures on administrative issues in key areas such as travel and maintenance of financial records. Compliance is essential to ensure that ROSA provides reasonable assurance that resources are safeguarded.

(3) The OHCHR Regional Office for Southern Africa, in consultation with the Programme Support and Management Services, should put in place adequate arrangements to ensure full compliance with the Field Office Manual and standard operating procedures.

OHCHR accepted recommendation 3 and stated that ROSA had started discussions with the United Nations Development Programme (UNDP) office in South Africa. ROSA will submit the results to the Programme Support and Management Services (PSMS) for further advice and prepare relevant

administrative instructions in consultations with UNDP and PSMS. Recommendation 3 remains open pending receipt of a plan of action to ensure full compliance with established administrative procedures.

ACKNOWLEDGEMENT

OIOS wishes to express its appreciation to the Management and staff of OHCHR for the assistance and cooperation extended to the auditors during this assignment.

CONTENTS

	<i>Page</i>
I. INTRODUCTION	1
II. AUDIT OBJECTIVE	1
III. AUDIT SCOPE AND METHODOLOGY	1
IV. OVERALL ASSESSMENT	2
V. AUDIT RESULTS	2-8
A. Risk management and strategic planning	2-4
B. Performance monitoring	4-5
C. Regulatory framework	6-8
ANNEX I Status of recommendations	
ANNEX II Opportunities for improvement	

I. INTRODUCTION

1. The Office of Internal Oversight Services (OIOS) conducted an audit of the Office of the High Commissioner for Human Rights (OHCHR) Regional Office for Southern Africa (ROSA). Comments made by OHCHR are shown in *italics*.

II. AUDIT OBJECTIVE

2. The audit was conducted to assess whether ROSA effectively implemented adequate risk management, control and governance processes to provide reasonable assurance regarding the efficiency and effectiveness of its operations. The key controls tested for the audit include those related to: (a) risk management and strategic planning; (b) performance monitoring; and (c) regulatory framework. For the purposes of this audit, OIOS defined these key controls as follows:

- a) Risk management and strategic planning– those controls that are designed to provide reasonable assurance that an effective strategy has been established, with related risk management mechanisms, to ensure that OHCHR effectively partners with other actors in the region and focuses on areas where it has comparative advantage in order to optimize its effectiveness.
- b) Performance monitoring– those controls that are designed to provide reasonable assurance that performance is monitored effectively to ensure that OHCHR takes advantage of opportunities arising in the course of the year, communicates its achievements effectively and takes timely corrective action when applicable.
- c) Regulatory framework – those controls that are designed to provide reasonable assurance that the regulatory instruments, such as policies and procedures, are in place and are working as intended.

III. AUDIT SCOPE AND METHODOLOGY

3. OIOS conducted this audit from February to March 2011.

4. The audit covered the period from 1 January 2009 to 31 January 2011 and included a review of ROSA's arrangements for (a) programme activity planning, monitoring and reporting, and (b) administrative activities, including arrangements with the United Nations Development Programme (UNDP), ROSA's structure, work allocation and internal procedures.

5. To gain a general understanding of the current practices, processes and activities of ROSA and OHCHR regional offices in general, OIOS interviewed staff at ROSA and Headquarters and reviewed relevant documents including policies, guidelines and procedures relating to regional offices. The audit team then conducted an activity-level risk assessment to identify and evaluate specific risk exposures of ROSA and to determine whether key controls identified to mitigate such risks were operating as intended.

6. Through interviews, analytical reviews, verification of processes and other audit procedures, OIOS assessed the adequacy of the established procedures and guidelines and conducted relevant tests of controls to assess whether policies and procedures were implemented consistently.

IV. OVERALL ASSESSMENT

7. In OIOS' opinion, ROSA's risk management, control and governance processes examined were **partially satisfactory** to provide reasonable assurance regarding the efficiency and effectiveness of its operations. OHCHR established detailed guidelines on planning and monitoring for field offices and a manual outlining the administrative procedures. ROSA prepared a strategy document, annual work plan and performance reports as required by the guidelines. During 2010, ROSA also improved its administrative arrangements. However, ROSA needed to improve the preparation and review of planning documents, in compliance with established guidelines. In addition, there was a need for ROSA to put in place adequate arrangements to ensure it fully complies with the Field Office Manual and standard operating procedures on administrative issues.

V. AUDIT RESULTS

A. Risk management and strategic planning

8. ROSA needed to comply with OHCHR guidelines on risk management and strategic planning. ROSA's strategy document for the period 2010-2011 did not include detailed documentation and assessment of the role of other actors in the region, ROSA's comparative advantage, and the strategy and risks with respect to each expected accomplishment as required by the guidelines for strategic planning. There were also no arrangements in place to coordinate and share work plans with the UNDP Regional Service Centre - Eastern and Southern Africa who also had a human rights advisor and staff working in the region.

Strategic planning guidelines were not complied with

9. ROSA's 2010-11 sub-regional notes did not include documentation and assessment of the office's comparative advantage and the role of other actors for each thematic area as required by the guidelines established by the OHCHR Policy Planning, Monitoring and Evaluation Service (PPMES) for strategic planning in regional offices. In addition, the strategy section of the sub-regional notes did not outline the strategy for each expected accomplishment and how ROSA planned to collaborate with the other actors in relation to each of the defined expected accomplishment as recommended in the guidelines. New expected accomplishments were established in the 2011 work plan without adequate assessment of the role of other actors in the region and ROSA's comparative advantage.

10. Although some challenges and risks were mentioned in the sub-regional notes, there was no detailed assessment of risks and planning assumptions for each expected accomplishment as required by the guidelines. Political challenges faced in various countries of the region and participation in the United Nations National Development and Assistance Framework (UNDAF) for the various countries are examples of a risk and an opportunity, respectively, that could be assessed for each of the expected accomplishment. Further, ROSA mentioned that one of its main challenges was to meaningfully cover all the countries in the region with its limited resources, but did not complete the optional section in the sub-regional notes to highlight the outputs or accomplishments that could be addressed or strengthened if additional resources were made available. Completing this section would provide management with information on issues that are not being addressed effectively or at all because of resource constraints and could be used as a fundraising tool.

11. In addition, ROSA indicated that informal consultations with other OHCHR sections were held. However, formal comments from other sections were not documented using the template provided in PPMES guidelines.

12. Compliance with the established guidelines is essential in providing assurance that ROSA has as much as possible prioritized its activities to focus on areas where it would add most value and has adequately considered opportunities to partner with other actors. Compliance would also help ensure that ROSA adequately assesses and addresses risks by responding appropriately to minimize their impact. Further, it would help ensure that the strategic planning process is fully documented which is essential for facilitating effective review of the strategic choices and continuity in case of staff turnover which was the case in ROSA.

13. Non-compliance with the guidelines was mainly attributed to the fact that staff were not conversant with the planning requirements. The review by PPMES and the Field Office and Technical Cooperation Division (FOTCD), which would have helped in ensuring compliance, was not effective because the review comments raised were not addressed by ROSA and no further follow up was done by PPMES or FOTCD. The ROSA Representative retired in the midst of the planning process and the FOTCD Africa Section only had one section chief overseeing over 20 offices at the time. However, a requirement for FOTCD desk officers or the section chief to sign off on the planning documents, as evidence of review and/or a checklist would have helped to ensure the review process was more effective.

14. At the time of the audit, PPMES had started training field offices on the use of the new online performance monitoring system and strategic planning in general and indicated that it would make efforts to prioritize ROSA in its training programme. There was a need to expand the training programme to include FOTCD desk officers since supporting the field office planning process is one of their main responsibilities.

Recommendation 1

(1) The OHCHR Field Operations and Technical Cooperation Division, in consultation with the Policy Planning, Monitoring and Evaluation Service, should establish training or briefing sessions on the preparation of planning documents and develop a checklist to assist desk officers and section chiefs in the review of field office planning documents to ensure compliance with established guidelines.

15. *ROSA accepted recommendation 1 and stated that training for desk officers and FOTCD staff in general is being conducted by the Policy Planning, Monitoring and Evaluation Service in June 2011. A checklist is being developed. Training of Field Office staff is taking place and will be continued until the end of 2011. Recommendation 1 remains open pending receipt of the PPMES training plan and planning review checklist or other improvements made to the review process.*

ROSA may benefit from establishing arrangements for sharing strategies or work plans with the UNDP Regional Service Centre - Eastern and Southern Africa

16. According to ROSA's sub-regional notes and discussions with staff, the involvement of other human rights actors in the planning process was done through regular consultations, participation in UNDAF and in United Nations Country Team meetings, and the various missions to countries in the region. OIOS appreciates that given the multiplicity of human rights actors in the region, it is not feasible for ROSA to share its plans with all stakeholders. However, since the UNDP Regional Service Centre – Eastern and Southern Africa has a human rights advisor and a second staff working on human rights issues relating to access to justice, there is a need for closer coordination in the planning process. This would help to minimize the risk of duplication of work and to address opportunities for partnership.

17. There was no mechanism to discuss or share work plans between ROSA and the UNDP Regional Service Centre. ROSA sub-regional notes mentioned the concern that the UNDP human rights advisor may work competitively with ROSA, but did not address the strategy or measures that ROSA planned to take to minimize this risk. ROSA indicated that it had had some joint activities with UNDP in the past one year and had made efforts to make further contacts and coordinate with UNDP but the latter had not responded.

18. According to OHCHR, there were ongoing initiatives by senior management to address the issue of coordination with UNDP at the office-wide level. The negotiations could take time, and there was a need to improve the work planning coordination arrangements at the local level while the efforts at the organizational level are ongoing.

19. **The OHCHR Regional Office for Southern Africa (ROSA) may benefit from establishing arrangements for coordination and sharing of strategy or planning documents between ROSA and the United Nations Development Programme Regional Service Centre – Eastern and Southern Africa.** *OHCHR stated that ROSA has in the past shared its annual work plan with the UNDP office and attempted at several instances in 2010 to meet the Regional Director for joint planning. Unfortunately, UNDP did not share their planning documents and were not available for a planning meeting. OHCHR will re-initiate contacts with the new Regional Director once appointed.*

B. Performance monitoring

20. Performance monitoring framework comprising annual, mid-year and monthly reviews was in place. However, the effectiveness of monitoring was affected because some of the performance indicators were broad and not measurable and achievable within the indicated timelines as per the guidelines. Improvements also needed to be made to the monthly reporting format and requirements. The activities undertaken were narrated but were not linked to the outputs planned in the annual work plan to ensure effective monitoring of progress and deviations from work plans.

ROSA would benefit from revising the expected accomplishments and performance indicators

21. PPMES has established detailed guidelines that explain the concept and process of defining specific, measurable, achievable, relevant and time-bound (SMART) expected accomplishments and related performance indicators.

22. However, some of ROSA's expected accomplishments and performance indicators for the period 2010-2011 were not SMART because they were either too broad or long-term in nature or the targeted countries and the baselines for the performance indicators were not specified. For example, the expected accomplishments dealing with integration of human rights standards into country programmes and compliance with human rights mechanisms would be clearer, more specific and focused if the countries were specified and the baselines were defined. In addition, two new expected accomplishments were established in the 2011 work plan that were very broad being office-wide expected accomplishments. ROSA did not refine and tailor them to its specific situation and available resources, as recommended in the guidelines. Also, performance indicators were not defined for the new expected accomplishments.

23. Having SMART expected accomplishments and performance indicators would help ROSA to establish work plans that focus on a few related outputs to optimize impact. For example, the activities relating to two of the broad expected accomplishments were few but covered several types of outputs which showed that ROSA could be spreading itself too thin in relation to these areas. This is particularly important because ROSA's mandate and coverage are broad, and similar to most OHCHR field offices

ROSA has limited resources. SMART expected accomplishments and indicators would help to improve effectiveness of performance reporting as it enables to highlight achievements in more concrete terms and facilitates accountability. For example, reporting achievements with reference to performance indicators as opposed to a general list of activities and achievements in ROSA's 2010 performance report would have provided a clearer assessment of the progress.

24. In OIOS' view, the exceptions could be mainly attributed to the fact that the process of defining expected accomplishments and performance indicators within the human rights context is challenging and has been progressively introduced at OHCHR since 2005 and therefore it was still relatively new. Staff appeared not to be fully conversant with the topic and the established guidelines and requirements as noted in paragraph 13 above.

25. Since the current sub-regional notes were extended for another two years, it would be important for ROSA to revise its expected accomplishments and performance indicators to make them more specific and achievable. In addition, there was no clear linkage between the expected accomplishments in the sub-regional notes and those being pursued in the work plans. For example, for one of the expected accomplishments, no outputs or activities were planned in the 2010 and 2011 work plans, yet the 2010 performance report listed the activity as ongoing. Revising the indicators would therefore help to consolidate and clarify the set of expected accomplishments and indicators that the office will use as a basis for performance monitoring.

Recommendation 2

(2) The OHCHR Regional Office for Southern Africa should revise the expected accomplishments and performance indicators established in the sub-regional notes to include more specific and achievable expected accomplishments and define targets and baselines where appropriate.

26. *OHCHR accepted recommendation 2 and stated that it will use the upcoming planning cycle to revise its expected accomplishments and indicators.* Recommendation 2 remains open pending receipt of the revised expected accomplishments and performance indicators.

Procedures on monthly reporting could be streamlined

27. Tools in place for OHCHR field offices for regular reporting and monitoring of performance include annual performance reports, mid-year reviews and monthly reporting. In addition, there are standard operating procedures (SOP) on weekly reporting outlining reporting requirements in cases where there are critical human rights issues that need regular monitoring. The aim of the monthly reports is to: (i) inform Headquarters of key political, security and human rights developments of relevance; (ii) measure progress in and identify obstacles to achieving objectives of the annual work plan; and (iii) report to Headquarters any significant security or administrative issues that need attention.

28. Since February 2010, ROSA has submitted monthly reports to Headquarters as required. However, the effectiveness of the monthly reports as a tool for monitoring progress was not optimized because the activities carried out were narrated in general terms without being linked to the expected accomplishments established in the annual work plans. Both ROSA and Headquarters staff raised other concerns about frequency, format, deadlines and length of the monthly reports which showed that there was a need to review the SOP on monthly reporting as it had not been reviewed since it was established over four years ago.

29. **The OHCHR Field Operations and Technical Cooperation Division could consider reviewing the standard operating procedure on monthly reports including the format, frequency and deadlines for submission of the reports.** *OHCHR stated that the SOP on monthly reporting is currently being reviewed with a view to bringing the monthly reporting requirements in line with the format of the country and sub-regional notes.*

C. Regulatory framework

30. ROSA needed to ensure compliance with the OHCHR Field Office Manual and standard operating procedures in key areas such as travel and maintenance of financial records. Arrangements for service provision with UNDP also needed to be reviewed and formalized to strengthen coordination and controls.

There may be benefit in clarifying standard operating procedures on travel

31. OHCHR has established SOPs and the Field Office Manual that comprehensively address most aspects of field office administration. There was, however, a need to clarify the requirements for the approval of the heads of regional offices' travels. According to the SOP, the heads of field offices have the authority to approve their own travel within the mission area, but travel out of the mission area requires approval by FOTCD at Headquarters. For regional offices such as ROSA, it was not clear whether mission area refers to all the countries covered by the office or only in the Republic of South Africa where the office is based.

32. The ROSA Representative's travel in the countries in the region was approved by the P-4 Human Rights Officer and only travel out of the region was approved by FOTCD. Frequent travel takes place in the region as a large number of ROSA's activities are undertaken outside of South Africa. However, some staff interpreted the SOP to mean that all travel outside of the Republic of South Africa should be approved at Headquarters. In OIOS' view, the review of the travel by Headquarters is necessary to provide oversight over the Representative's travel and to allow FOTCD the opportunity to provide input to the planned missions where appropriate. The review could be done through approval of quarterly or semi-annual travel plans and not necessarily through individual review of travel claims.

33. **The OHCHR Field Operations and Technical Cooperation Division could consider reviewing and clarifying the requirements for approval of travel of heads of regional offices and amending the related standard operating procedures accordingly.** *OHCHR stated that FOTCD is reviewing the approval requirements in particular in light of assigning authority to the Chiefs of Branches.*

Office-wide administrative policies and procedures were not complied with

34. ROSA was required to put in place internal arrangements to ensure compliance with the Field Office Manual and SOPs on administrative issues. ROSA had improved its administrative arrangements in 2010 by establishing a regular post for the Programme Associate and arranging for her to attend the annual meeting of administrative officers at Headquarters. In addition, with the help of the Head of the Logistics Section, ROSA established systems for management of non-expendable property and telephone recoveries. However, ROSA did not fully comply with the Field Office Manual and SOPs on administrative issues in the following areas:

- Travel claims were not submitted in 11 of the 25 travel payments reviewed. The audit could therefore not verify that the subsistence allowances were correct, based on actual days and

verification of terminal expenses. ROSA had not established a system to monitor the travel advances against the travel claims. In addition, travel requests were not completed in any of the 25 cases and, therefore, there was no audit trail of the approval of the travel itinerary and purpose of travel.

- ROSA did not verify the records in its financial monitoring system against the UNDP Inter Office Vouchers (ASCA) reports as required by the Field Office Manual. Consequently, there was a risk that errors in either system would not be identified. For example, a review of the 2010 expenses showed that UNDP had expensed Value Added Tax (VAT) of about \$700, which was refundable. On the other hand, the entries in the financial monitoring worksheets, which ROSA used as a basis to manage its budget, were not always accurate because they incorrectly included VAT amounts that were refundable.
- Review of 2010 monthly records showed that there was no independent verification and review of the vehicle logs on a weekly basis and the monthly fuel consumption reports as required by the Field Office Manual. The purpose of the various trips was not recorded in the vehicle logs and could not be verified.
- Review of the 2010 records showed that time and attendance records were maintained, but time taken as compensatory time in lieu of overtime was not documented and could not be verified. Compensatory time was taken by staff who worked flexible working hours, which made it difficult to verify the overtime amount.

35. Compliance with the established procedures is essential in ensuring that ROSA's resources are managed and used effectively and assets are safeguarded. Prior to 2010, ROSA operated without formal administrative arrangements mainly attributed to the fact that it had only two professional staff, and did not have a regular post for an administrative assistant.

Recommendation 3

(3) The OHCHR Regional Office for Southern Africa, in consultation with the Programme Support and Management Services, should put in place adequate arrangements to ensure full compliance with the Field Office Manual and standard operating procedures.

36. *OHCHR accepted recommendation 3 and stated that ROSA has started discussions with the UNDP office in South Africa. ROSA will submit the results to PSMS for further advice and prepare relevant administrative instructions in consultations with UNDP and PSMS.* Recommendation 3 remains open pending receipt of a plan of action to ensure full compliance with established administrative procedures.

There may be benefit in establishing a Service Level Agreement with UNDP

37. The United Nations has an umbrella agreement with UNDP for the provision of administrative services to field offices. However, the UN wide agreement focuses on the pricing of the various services and does not adequately address issues that are important in ensuring effective and efficient coordination at the local level, such as division of roles and responsibilities, performance expectations, level of services required and coordination arrangements. Such issues would be best addressed if documented and agreed upon through the establishment of a Service Level Agreement (SLA).

38. In addition to providing the framework to guide the relationship between ROSA and UNDP at the local level, the SLA would help ensure that UNDP's role in key processes such as procurement and travel is predetermined and incorporated in ROSA's administrative arrangements to ensure consistency. This is particularly important with respect to procurement to ensure adequate segregation of duties since ROSA had only one administrative staff. Further, to address the weaknesses in travel noted above,

consideration could be given to delegate to UNDP the role of reviewing the travel claims and monitoring the travel advances. UNDP indicated that they had already established SLAs with other agencies such as the United Nations Office on Drugs and Crime.

39. **To enhance effective and efficient coordination, the OHCHR Regional Office for Southern Africa, in consultation with the Programme Support and Management Services, could consider consulting with the United Nations Development Programme (UNDP) to establish a Service Level Agreement with UNDP, to supplement the UN-wide agreement with UNDP.** *OHCHR stated that consultations have already been initiated at the level of Pretoria. This will also be affected by considerations at Headquarters level regarding standard Service Level Agreement (SLA) templates to globally address the local support issues in more detail. The time frame for this higher level discussion has not yet been agreed.*

ANNEX I
STATUS OF RECOMMENDATIONS
Audit of OHCHR Regional Office for Southern Africa

Recom. no.	Recommendation	Risk category	Critical/important	C/O¹	Actions needed to close recommendation	Implementation date²
1	The OHCHR Field Operations and Technical Cooperation Division, in consultation with the Policy Planning, Monitoring and Evaluation Service, should establish training or briefing sessions on the preparation of planning documents and develop a checklist to assist desk officers and section chiefs in the review of field office planning documents to ensure compliance with established guidelines.	Strategy	Important (Medium)	O	Receipt of the PPMES training plan and planning review checklist or other improvements made to the review process.	31 Dec 2011
2	The OHCHR Regional Office for Southern Africa should revise the expected accomplishments and performance indicators established in the sub-regional notes to include more specific and achievable expected accomplishments and define targets and baselines where appropriate	Operational	Important (Medium)	O	Receipt of ROSA's revised planning documents.	31 Dec 2011
3	The OHCHR Regional Office for Southern Africa, in consultation with the Programme Support and Management Services, should put in place adequate arrangements to ensure full compliance with the Field Office Manual and standard operating procedures.	Compliance	Important (Medium)	O	Receipt of a plan of action to fully comply with established administrative procedures.	31 Dec 2011

ANNEX II
OPPORTUNITIES FOR IMPROVEMENT
Audit of OHCHR Regional Office for Southern Africa

Para. no.	Opportunity for improvement	Client's comments
19	The OHCHR Regional Office for Southern Africa (ROSA) may benefit from establishing arrangements for coordination and sharing of strategy or planning documents between ROSA and the United Nations Development Programme Regional Service Centre – Eastern and Southern Africa.	<i>OHCHR stated that ROSA has in the past shared its annual work plan with the UNDP office and attempted at several instances in 2010 to meet the Regional Director for joint planning. Unfortunately, UNDP did not share their planning documents and were not available for a planning meeting. OHCHR will re-initiate contacts with the new Regional Director once appointed.</i>
29	The OHCHR Field Operations and Technical Cooperation Division could consider reviewing the standard operating procedure on monthly reports including the format, frequency and deadlines for submission of the reports.	<i>OHCHR stated that the SOP on monthly reporting is currently being reviewed with a view to bringing the monthly reporting requirements in line with the format of the country and sub-regional notes.</i>
33	The OHCHR Field Operations and Technical Cooperation Division could consider reviewing and clarifying the requirements for the approval of travel of heads of regional offices and amending the related standard operating procedures accordingly.	<i>OHCHR stated that FOTCD is reviewing the approval requirements in particular in light of assigning authority to the Chiefs of Branches.</i>
39	To enhance effective and efficient coordination, the OHCHR Regional Office for Southern Africa, in consultation with the Programme Support and Management Services, could consider consulting with the United Nations Development Programme (UNDP) to establish a Service Level Agreement with UNDP, to supplement the UN-wide agreement with UNDP.	<i>OHCHR stated that consultations have already been initiated at the level of Pretoria. This will also be affected by considerations at Headquarters level regarding standard Service Level Agreement (SLA) templates to globally address the local support issues in more detail. The time frame for this higher level discussion has not yet been agreed.</i>