



health

Department:
Health
North West Provincial Government
REPUBLIC OF SOUTH AFRICA



2nd Floor, Health Office Park
Private Bag X 2068
MMABATHO
2735

RISK AND ETHICS MANAGEMENT

Tel: +27 (18) 391 4546
Email: ethicsnwh@nwpg.gov.za
www.health.nwpg.gov.za

A long and healthy life for all communities of the North West Province

ANTI-FRAUD AND CORRUPTION POLICY

1 April 2025

Author	RISK AND ETHICS MANAGEMENT DIRECTORATE
Review Date	31 March 2026
Description	This policy defines North West Department of Health' position on ANTI-FRAUD AND CORRUPTION MANAGEMENT.
Coverage	This document is applicable to all officials and stakeholders of North West Department of Health.
Policy Number	REM25/SOP03/R26

Contents

1. ABBREVIATIONS.....	
2. DEFINITIONS/GLOSSARY OF TERMS.....	
3. PURPOSE.....	
4. BACKGROUND.....	
5. POLICY STATEMENT.....	
6. OBJECTIVES OF THE POLICY.....	
7. LEGISLATIVE AND RELATED PRESCRIPT MANDATE.....	
8. SCOPE AND APPLICATION OF THE POLICY.....	
9. ROLES AND RESPONSIBILITIES.....	
10. IMPLEMENTATION PLAN.....	
11. REPORTING FRAUD AND CORRUPTION.....	
12. INTERNAL INVESTIGATIONS.....	
13. EXTERNAL INVESTIGATIONS.....	
14. MONITORING AND REVIEW.....	
15. POLICY APPROVAL:.....	

1. ABBREVIATIONS

DMC	: Departmental Management Committee
MACC	: Minimum Anti-Corruption Capacity
NIA	: National Intelligence Agency
PAJA	: Promotion and Administration of Justice Act
PAIA	: Promotion of Access to Information Act
PDA	: Protected Disclosure Act
PFMA	: Public Finance Management Act
POHA	: Protection from Harassment Act
POPIA	: Protection of Personal Information Act
PRECCA	: Prevention and Combating of Corrupt Activities Act
DPISA	: Department of Public Service Administration
PSC	: Public Service Commission
SAPS	: South African Police Services
SIU	: Special Investigations Unit
NGO	: Non-Government Organization

2. DEFINITIONS / GLOSSARY OF TERMS

In this document the following shall have the following meaning or explanation:

- a) **Accounting Authority** - refers to office of the head of Department/ Superintendent General or any office assigned to perform such tasks.
- b) **Batho Pele** - refers to the service delivery principles from DPISA that guide all service provision by public institutions. Visit www.dpisa.gov.za/batho-pele.
- c) **Chief Risk Officer** – A senior official who is the Head of Risk and Ethics Management Directorate
- d) **Cluster Audit Committee** – A committee which provides oversight role to Social Cluster Department's in the North West Provincial Government
- e) **Corruption** – encompasses any act which misuses official authority or a collusion to bypass the internal controls to obtain undue benefit for oneself or a third party
- f) **Department** -refers to North West Department of Health (NWDoH).
- g) **DMC** - refers to the Departmental Management Committee i.e. all executive and senior management of the Department, including other officials that the Accounting officer may appoint or nominate to serve in this committee

- h) **DPSA**- refers to the Department of Public Service Administration which is a National Department executing authority - the Member of the Executive Council (MEC) of a Province who is accountable to the Provincial legislature for that Department.
- i) **Executive Authority** – Member of the Executive council responsible for NWDOH.
- j) **External Audit (Auditor General of South Africa)** - A chapter 9 institution which is mandated to express an opinion on matters relating to financial management, compliance with rules and regulations as well as predetermined objectives.
- k) **Fraud** – is an unlawful, criminal act and intentional misrepresentation of facts to obtain undue benefit or advantage causing a detriment to another party.
- l) **MACC** - refers to the Minimum Anti-Corruption Capacity booklet produced by the DPSA to guide public institutions in setting up anti-corruption systems. Visit www.dpsa.gov.za/macc
- m) **Middle Management**- Employees from level 9 to level 12.
- n) **NIA** - refers to the National Intelligence Agency under the Department of state security responsible for specialised investigations.
- o) **Other Employees** – Employees lower than post level 9.
- p) **Provincial Internal Audit**- A centralised internal audit function which provides assurance to North West Provincial Government Departments.
- q) **Provincial Risk Management Unit** – A risk management unit in the North West Provincial Treasury which provides risk management support to North West Provincial Government Department and public entities.
- r) **PSC** - refer to the Public Service Commission, which is a constitutionally mandated body tasked to ensure good corporate governance within the public sector. They are the custodian of the national anti-corruption toll free hotline: **0800 701 701**.
- s) **SAPS** - refer to South African Police Services which is a law enforcement agent of the republic under the Department of state security.
- t) **Senior Management**- Members of the Departmental Management Committee.
- u) **SIU** - refer to Special Investigations Unit which is an independent statutory body established in terms of the special investigations unit and special tribunals act No. 74 of 1996 to investigate cases of corruption and other related malpractices.

3. PURPOSE.

3.1 The purpose of this policy is to outline the roles and responsibilities in the fight against fraud and corruption in NWDOH.

4. BACKGROUND

4.1 Fraud and corruption has compromised quality service delivery to the citizenry of South Africa and must be dealt with efficiently and effectively. NWDOH perceive fraud and corruption as a serious threat to the growth of the economy and improvement of the livelihood of the citizenry.

4.2 This Policy shall play a prominent role in maintaining ethical standards and preventing fraudulent activities with NWDOH.

5. POLICY STATEMENT:

5.1. North West Department of Health(NWDoH) prides itself in promoting a culture of integrity and ethics by requiring all employees to refrain from any form of fraud and corrupt activities.

5.2. North West Department of Health(NWDoH) shall not tolerate any form fraud and corrupt activities by employees, service providers and other stakeholders.

6. OBJECTIVES

The North West Department of Health Anti-Fraud and Corruption Policy serves the following main objectives:

6.1 To regulate the management of fraud and corruption in the Department;

6.2 To promote zero tolerance towards fraud and corruption in all forms and any magnitude;

6.3 To reduce the opportunity for fraud and corruption by introducing preventative and detective measures into the organization's control environment;

6.4 To ensure that the management of the Department meet their statutory responsibilities towards fraud, as per the PFMA and the requirements of Minimum Anti-Corruption Capacity (MACC), PRECCA and other relevant legislations;

6.5 To encourage management and staff to report their suspicions while guaranteeing anonymity in line with the requirements of the Whistle Blowing Policy;

7. LEGISLATIVE AND RELATED PRESCRIPTS MANADATE

7.1. Section 195(1) (a) of the Constitution of Republic of South Africa, states:

Public administration must be governed

by the democratic values and principles enshrined in the Constitution, including the following principle

“high standard of professional ethics must be promoted and maintained”.

7.1 Sec 38(1)(a)(i) of the Public Finance Management Act, stipulates that the Accounting Officer is responsible for ensuring that the Department, trading entity or constitutional institution has and maintains effective, efficient and transparent system of financial and risk management and internal control.

7.2 Sections 3.2.1 and 27.2.1 of the Treasury Regulations require that risk assessment is conducted on regular basis and a risk management strategy, which includes a fraud prevention plan, is used to direct internal audit effort. The strategy must be clearly communicated to all employees to ensure that risk management is incorporated into the language and culture of the Department or entity.

7.3 The other legislative instruments that inform and guide the development of this policy are as listed below:

7.3.1 Prevention and combating of corrupt activities Act 12 of 2004 (PRECCA)

7.3.2 Prevention of Organized crime Act 121 of 1998 (POCA)

7.3.3 Promotion of Access to information Act 2 of 2000 (PAIA)

7.3.4 Promotion of Administrative Justice Act 3 of 2000 (PAJA)

7.3.5 SIU and Special Tribunals Act 74 of 1996 as amended (SIU Act 2005)

7.3.6 Witness Protection Act 112 of 1998

7.3.7 Financial Intelligence Centre Act 38 of 2001 as amended (FICA)

7.3.8 Criminal Procedure Act 51 of 1977 as amended (CPA)

7.3.9 Protection of Personal Information Act, 2013

8. SCOPE AND APPLICATION OF THE POLICY

8.1 This policy applies to every employee and/or stakeholders of North West Department of Health irrespective of position, authority and political or social affiliation. Employees and stakeholders in the context of this Policy include but not limited to;

8.1.1 Casual labourers

8.1.2 Interns

8.1.3 Full time employees

- 8.1.4 Part time employees
- 8.1.5 Contract employees
- 8.1.6 Permanent employees
- 8.1.7 Contractors or consultants
- 8.1.8 Private and public partners
- 8.1.9 Governance structures within the Department
- 8.1.10 Institutions funded by the Department in part or in full.

9. ROLES AND RESPONSIBILITIES

9.1 ACCOUNTING OFFICER

- 9.1.1 The Accounting Officer bears the ultimate responsibility for setting up and implementation of fraud and corruption systems including fraud and corruption risk management within the Institution.
- 9.1.2 This includes the coordination of risk assessments, overseeing the investigation of suspected fraud and corruption, and facilitation for the reporting of such.
- 9.1.3 The Accounting officer can delegate such responsibility but not the accountability thereof.

9.2 SENIOR MANAGEMENT

- 9.2.1 Senior management is to be committed to eradicating fraud and corruption and ensuring that the institution strives to be as ethical as possible in all its dealings with the public and other stakeholders.
- 9.2.2 In this regard, senior management will ensure that they do not become complacent in dealing with fraud and corruption and that they will ensure the Department's fraud and corruption strategy which is inclusive of the fraud prevention plan is reviewed and updated regularly.
- 9.2.3 Furthermore, senior management will ensure that all employees and stakeholders are made aware of Department's policy on Anti-Fraud and Corruption and the Anti-Fraud and Corruption strategies through various initiatives of awareness and training.
- 9.2.4 Senior management is also expected to cooperate fully with appointed investigation officer(s) in the event that any investigation commissioned by the Executive Authority, Accounting Officer and any other Organs of State.

9.3 MIDDLE MANAGEMENT AND LINE MANAGEMENT

- 9.3.1 Middle and Line management has the responsibility of ensuring that the Department's ethical culture is cascaded down to the employee at the lowest level and also ensuring that their inputs into the organisation's ethical culture and integrity reach the relevant authorities for consideration and inclusion into the policies and procedure manuals.
- 9.3.2 Line management is also responsible, in line with the policy prescripts and Anti-Fraud and Corruption Strategy document, for the development and implementation of internal controls specific to their area of operation that will help prevent, detect and resolve issues pertaining to fraud and corruption.
- 9.3.3 Line management is further expected to cooperate fully with appointed investigation officer(s) in the event that any investigation which will be conducted as commissioned by the Executive Authority, Accounting Officer or Senior Management.

9.4 OTHER OFFICIALS

- 9.4.1 Other officials should promote anti-fraud and anti-corruption activities in their respective functions by participating in anti-fraud and anti-corruption campaigns.
- 9.4.2 To report any fraud and corruption activities to their immediate supervisor, Ethics Management Office or through National Anti-Corruption Hotline.
- 9.4.3 Implementing the delegated action plans to address the identified fraud risks.
- 9.4.4 Co-operating with other role players in the anti-fraud and anti-corruptions activities and providing information as required.

9.5 CHIEF RISK OFFICER

- 9.5.1 Raise fraud awareness to management and other employees of the Department.
- 9.5.2 Facilitates the fraud risk assessment process,
- 9.5.3 Assist in developing policies and strategies to mitigate fraud risks,
- 9.5.4 Advice on matters relating to anti-fraud and corruption management.

9.6 RISK MANAGEMENT COMMITTEE

- 9.6.1 Review and recommend for the approval, by the Executive Authority/ Accounting Officer, the:
- a) Anti-Fraud and Corruption Policy;
 - b) Anti-Fraud and Corruption Strategy;
- 9.6.2 Assess the level of fraud and corruption risks, discuss corrective actions and make recommendations to the Accounting Officer when necessary.

9.7 PROVINCIAL RISK MANAGEMENT UNIT (PROVINCIAL TREASURY)

- 9.7.1 Monitoring and assessing the implementation of risk management.
- 9.7.2 Build risk management capacity.
- 9.7.3 Enforce compliance with PFMA pertaining to implementation of specific prescripts on risk management

9.8 CLUSTER AUDIT COMMITTEE

- 9.8.1 Audit committee has the responsibility for reviewing the Department's internal control and risk management systems, including the design and implementation of anti-fraud and corruption programmes and controls.
- 9.8.2 They also monitor the integrity of the financial statements.
- 9.8.3 Department's performance in fraud prevention, and reviews the investigation log of cases.
- 9.8.4 The audit committee reviews arrangements by which employees can confidentially raise concerns about possible wrongdoing (whistle-blowing mechanisms), and
- 9.8.5 Their objective is to ensure that arrangements are in place for the proportionate and independent investigation of such matters and for appropriate follow-up action.

9.9 PROVINCIAL INTERNAL AUDIT (PIA)

- 9.9.1 Provincial Internal Audit is responsible for providing independent assurance on the effectiveness of the Enterprise Risk Management including fraud risks.

9.10 EXTERNAL AUDIT (AUDITOR GENERAL OF SOUTH AFRICA)

9.10.1 The Auditor-General is responsible for performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgement, including the assessment of the risk of material misstatement of the financial statements, whether due to fraud or error.

10. IMPLEMENTATION PLAN FOR THE PREVENTION OF FRAUD AND CORRUPTION

- 10.1** The Implementation Plan must be integrated into the departmental Anti-Fraud and Corruption Strategy.
- 10.2** The Implementation Plan must outline the framework for the Department's approach to the prevention, detection, investigation and resolution including reporting.
- 10.3** The Implementation Plan must show the mechanisms by which policy prescripts are to be disseminated to management, staff, governance structures and all other stakeholders including the public.

11. REPORTING FRAUD AND CORRUPTION

11.1 Reporting of Fraud and Corruption in the context of this policy refers to distinct processes that will be covered in detail in the Implementation Plan for the Prevention of Fraud and Corruption.

11.1.1 Whistle blowing

- a) It is every employee's responsibility to report fraud or corruption as soon as there is reasonable ground to suspect it and evidence that leads to any investigation is available.
- b) The Department must ensure that whistle blowing or reporting mechanisms are put in place, are well managed and maintained as well as being communicated internally to all employees and externally to all the stakeholders and the community
- c) It is the responsibility of the Department to educate the Public on reporting any suspected fraud or corruption activities by any official of the Department or a representative.

11.1.2 Fraud and Corruption reports

- a) The Department must keep a database of all the fraud and corruption cases reported through internal and external reporting mechanisms or through the National hotline.
- b) The Department must be required in accordance with set prescripts to report information on risk assessments (inclusive of fraud and ethics risk assessments) to National Treasury, through the Provincial Treasury.
- c) All other information on fraud and corruption must be reported to the DPSA, PSC and Law Enforcement Agencies in line with their requirements.

11.1.3 Raising Awareness

- a) Raising awareness is an important aspect of fraud and corruption prevention for any organisation. It also brings about transparency in the organisation's dealings and thus improves public confidence in the organisation.
- b) This Policy wishes to state that the Department must actively commit to raising awareness through methods that will be outlined in the Fraud prevention plan. These methods may include but not limited to media publications, radio statements and community road shows.

12. INTERNAL INVESTIGATIONS

- 12.1. The Executive Authority/Accounting Officer in consultation with the Chief Investigation Officer shall nominate an investigation officer for each case from within a pool of investigation officers.
- 12.2. This Policy seeks to make it clear that workplace investigations shall respect employee's rights as stated in the Labour Relations Act and other relevant statutory instruments.
- 12.3. Where a case of fraud or corruption is suspected then it is recommended that a preliminary investigation be conducted.

13. EXTERNAL INVESTIGATIONS

13.1. In terms of this policy, external investigations refer to investigations being conducted by another person who is not an employee of the Department. This definition also includes any agency contracted to carry out any form of investigation including forensic audits by the Auditor General or any audit firm. Matters/ cases that will require external investigations (such as criminal cases to SAPS, NIA or SIU).

14. MONITORING AND REVIEW

14.1. This shall be reviewed annually or as and when necessary to ensure alignment and relevance to any significant changes in the profession, regulatory, governance and any other environments that affect functionality of the risk management process.

14.2. Monitoring of the Policy will be done by the Senior Manager responsible for Risk and Ethics Management.

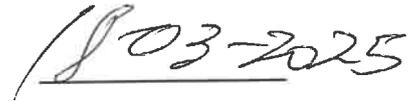
15. POLICY APPROVAL:

RECOMMENDED/ ~~NOT RECOMMENDED~~



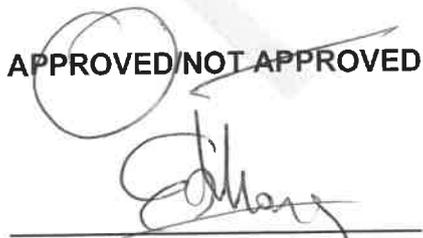
MR L GOPANE

CHAIRPERSON: RISK MANAGEMENT COMMITTEE



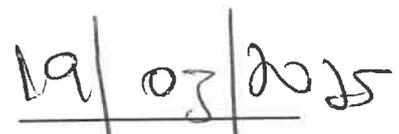
DATE

APPROVED/ ~~NOT APPROVED~~



MR O.E MONGALE

SUPERINTENDENT GENERAL: NWDOH



DATE