

**THE UNITED REPUBLIC OF TANZANIA, PRESIDENT'S OFFICE,  
ETHICS SECRETARIAT**

# **STRATEGIC PLAN**

**2013/14 to 2017/18**

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## ABBREVIATIONS

ASZ	Assistant Secretary Zonal Offices
CA	Chief Accountant
CBOs	Community Based Organizations
CGA	Control General Auditor
CIA	Chief Internal Audit
CSOs	Civil Society Organizations
DAHRMD	Director of Administration and Human Resource Management
DPME	Director of Planning, Monitoring and Evaluation
ES	Ethics Secretariat
FBOs	Faith Based Organizations
FYDP	Five Year Development Plan
HIV/AIDS	- Human Immuno-deficiency Virus / Acquired Immune Deficiency Syndrome
IEC	Information Education and Communication
KPIs	Key Performance Indicators
LGAs	Local Government Authorities
LSU	Legal Service Unit
M&E	Monitoring and Evaluation
MDAs	Ministries Departments and Agencies
MIS	Management Information System
NAC SAP	National Anti Corruption Strategy and Action Plan
NGOs	Non Governmental Organizations
NSGRP	National Strategy for Growth and Reduction of
OPRAS	Open Performance Review and Appraisal
OWIs	Oversight and Watchdog Institutions
PA	Professional Associations
PCCB	Prevention and Combating Corruption Bureau
PESTEL	Political Economical Social, Technological Environmental and Legal
PLCE	Public Leadership Code of Ethics
PO	Principal Officer
PSA	Principal System Analyst
PSC	Public Service Commission
PSO	Principal Supply Officer
SPL	Secretary of Political Leaders
SPS	Secretary of Public Service Leaders
SWOC	Strength Weakness Opportunity and Challenge System
TDV	Tanzania Development Vision
TNA	Training Need Assessment

## **PREFACE**

### **Statement of Ethics Commissioner**

This Strategic Plan is for the President's Office, Ethics Secretariat which covers the period of five years from 2013/14 to 2017/18. It provides the strategic direction and guides the implementation process of the Ethics Secretariat mandates and functions in the next five years. It is an embrace opportunity based plan rather than a need based plan due to fundamental departure from previous implementation styles of national plans and programmes of three years to five years. Based on the paradigm shift from three years to five years planning horizon, the achievements, challenges and critical issues emerged during the implementation process by the Plan ended 2011/12 provides a benchmark for this Plan.

The Plan takes a generic approach to realise the organization's Vision, Mission, Core Values and functions in line with Tanzania Development Vision (TDV 2025), Five Year Development Plan (FYDP 2011/12- 2015/16), National Strategy for Growth and Reduction of Poverty (NSGRP II), Public Leadership Code of Ethics Act, 1995 (Cap. 398) and Ruling Party Election Manifesto (2010-2015). The main focus of this plan is to improve behavior and ethical conduct of Public Leaders, improving service delivering capacity and management systems. Also the plan focuses on the effective implementation of the National Anti- Corruption Strategy and HIV/AIDs interventions at work place.

Performance review of the ended Plan reflects great achievements of the Ethics Secretariat in monitoring and promotion of Ethical conduct among Public Leaders. Lesson learned during the implementation of the ended Plan reveals that much needs to be done to accommodate new emerging challenges emanated from unethical prevalence and stakeholders' expectations on Ethics Secretariat.

Therefore, this Plan provides a benchmark for effective implementation and full utilization of opportunities to improve ethical standard to the Public Leaders and enhance stakeholders trust to the Public Leaders and the Ethics Secretariat.

Finally I wish to call for the commitment of ES staff in the implementation of the Plan. Furthermore, I request support from Public Leaders, customers and stakeholders.

Honorable Judge (Rtd) Salome Suzette Kaganda  
**ETHICS COMMISSIONER**

## **Executive Summary**

This is a reviewed Medium Term Strategic Plan for the President's Office, Ethics Secretariat which covers five years from 2013/14 to 2017/18. The review of this Plan has been necessitated by lapse of time of the previous Strategic Plan and the need for the organisation to improve its performance.

In order to fulfill the above aspiration we have articulated our Vision as, "A centre of excellence in promoting and monitoring of Public Leadership Ethics." The new Mission Statement is "To promote and monitor ethical standards of Public Leaders through education, investigation, Assets Declaration and verification in order to enhance good governance for the National Development".

This Strategic Plan has four chapters. Chapter one presents the introduction; Chapter two contains the situational analysis, while chapters three and four contain the Plan and the Results Framework respectively. The Organization Chart, Strategic Plan Matrix and Results Framework Matrix are annexure to the Plan.

In preparing this Strategic Plan several sources were consulted including but not limited to Tanzania Development Vision (TDV 2025), National Strategy for Growth and Reduction of Poverty (NSGRP II), Ruling Party Election Manifesto (2010-2015), The Constitution of the United Republic of Tanzania, 1977 (Cap. 2), Public Leadership Code of Ethics Act, 1995 (Cap. 398), The National Framework for Good Governance of 1999 and Five Years Development Plan (2011/12-2015/16). The preparation of the Plan involved Situational Analysis which included Performance Review, Stakeholders' Analysis, and SWOC Analysis. Furthermore the critical issues facing the institution were identified to form the basis for objectives, strategies, targets and key performance indicators.

The plan has four objectives whereby two objectives (A&B) are generic objectives which cut across to all MDAs and LGAs namely; Objective A: HIV/AIDS infections reduced and support services improved and Objective B: Effective implementation of National Anti-Corruption Strategy. The remaining two objectives namely; Objective C: Ethical Conduct of Public Leaders Improved and Objective D: ES capacity to deliver services improved has been developed to accommodate way forward, critical issues and new emerged challenges.

## CHAPTER ONE

### I.0 INTRODUCTION

#### I.1 Introduction

This Strategic Plan is for the President's Office, Ethics Secretariat which covers the period of five years from 2013/14 to 2017/18. It is an embrace opportunity based Plan rather than a need based Plan due to fundamental departure from previous implementation styles of national plans and programmes of three years to five years. The Plan provides a strategic direction in the next five years period and explains Vision, Mission, Core Values, Objectives, Strategies, Targets and Key Performance Indicators in line with the mandate and functions of Ethics Secretariat.

#### I.2 Methodology

The review of this Medium Term Strategic Plan has been done in a participatory approach whereby ES divisions, units, Zonal Offices and sections were involved. Experts from the President's Office Public Service Management facilitated the review of the Plan. The Plan was made in reference to different National development Frameworks such as; Tanzania Development Vision 2025 (TDV 2025), National Strategy for Growth and Reduction of Poverty (NSGRP II), Five Years Development Plan 2011/12 to 2015/16 (FYDP), Sectoral policies and strategies. Furthermore, the ES documents were used in the preparation of this Plan, among others include, the ES Strategic Plan for the period from 2009/10 to 2011/12, the Annual Performance Reports from 2009/10 to 2011/12 and the Public Leadership Code of Ethics (PLCE) Act No. 13 of 1995 (Chapter 398).

#### I.3 Purpose

This Strategic Plan provides a strategic direction and guidance in the implementation of the Ethics Secretariat mandates and functions for the five years period. The plan also intends to create a common understanding of Ethics Secretariat's stakeholders and customers in order to provide a basis for accountability in the process of implementing the Public Leadership Code of Ethics Act No. 13 of 1995 (Cap 398).

#### I.4 Layout of the Plan

This Plan is laid out into four chapters and three annexes as follows.

- **Chapter One:** Introduction which contains Background, Approach, Purpose and Layout of the Plan;
- **Chapter Two:** Situational Analysis which covers Performance Review for the period of 2009/10 to 2011/12, Stakeholders Analysis, SWOC Analysis, Recent Initiatives and Critical Issues.



- **Chapter Three:** The Plan which explains Vision, Mission, Core Values, Objectives, Strategies, Targets and Key Performance Indicators;
- **Chapter Four:** The Result framework which contains Monitoring plan, evaluation plans and Performance Reporting Plan
- **Annexes:** Organization structure and Strategic plan matrix

## CHAPTER TWO

### 2.0 SITUATIONAL ANALYSIS

#### 2.1 Historical Background

The history of the Ethics Secretariat can be traced as far back as 1965 whereby the Government established the Permanent Commission of Inquiry to investigate complaints on abuse of power in the Public Service. In 1967 the Government introduced the Arusha Declaration which intended to ensure that Party and Government Leaders observed ethical standards, which were stipulated into the Leadership Code. In order to ensure the implementation of the Leadership Code the Committee for the Enforcement of the Leadership Code was established in 1973, which later was transformed into the Commission in 1987. However, due to global socio-economic and political reforms the Commission was abolished in 1992.

After the abolition of the Commission there was no any other institution to monitor Public Leadership Ethics, this led to wide spread abuse of power. It was therefore necessary to establish an institution to monitor Public Leadership Ethics so as to restore public trust and confidence to the Government. In order to bridge this gap, the Constitution of the United Republic of Tanzania 1977 (Cap.2) was amended under Article 132 which established the Ethics Secretariat. The Ethics Secretariat has been conferred with the mandate to supervise the implementation of the Public Leadership Code of Ethics Act No 13 of 1995 (Cap, 398).

The Ethics Secretariat is headed by the Ethics Commissioner, who is appointed by the President and is the Head and Chief Executive of the Ethics Secretariat. The President also provides for the staffing of the Secretariat and for the taking by them of the oath of secrecy in respect of matters handled by them.

#### 2.2 Mandate

The mandate of the Ethics Secretariat is established by section 132 of the Constitution of the United Republic of Tanzania of 1977, (Cap 2) to implement the Public Leadership Code of Ethics Act, No. 13 of 1995 as amended by the Act No. 5 of 2001.

Specifically the Ethics Secretariat has the following power:-

- To receive and entertain all allegations in respect of any public leader, whether oral or written, from the members of public without inquiring as to the names and addresses of the persons who have made the allegations;
- To initiate and conduct any investigation in respect of breach of Ethics prescribed under the Act;
- To authorize any officer of the Secretariat, supported by a warrant issued by a Magistrate, to investigate any bank account of a public leader;

- To require any person to disclose or produce any information on accounts, documents or articles as may be required; and
- To require a public leader suspected to have submitted a false declaration to confirm or amend the declaration.

## **2.3 Functions**

The Ethics Secretariat performs the following functions:-

- To receive and verify Declarations of Assets and Liabilities which are required to be made by Public Leaders under the Constitution of the United Republic of Tanzania or any other law as per the identified time deadlines and composition rules.
- To receive allegations and notifications of breach of the Code of Ethics from members of the public.
- To conduct preliminary investigations into allegations or complaints against any Public Leader in relation to compliance with the Public Leadership Code of Ethics.
- To report to the President with respect to matters relating to the ES's jurisdiction under the Public Leadership Code of Ethics Act. No. 13 of 1995.
- To enter in the Register the particulars of Assets and Liabilities declared by Public Leaders.
- To conduct physical verification of Assets and Liabilities declared by Public Leaders.
- To conduct awareness campaigns on the Public Leadership Code of Ethics Act among the Public Leaders and the public in general.

## **2.4 Current Vision and Mission**

### **2.4.1 Vision**

To be the centre of excellence for the efficient and effective promotion and enforcement of ethical principles

### **2.4.2 Mission**

To provide leadership in promoting and enforcing the standards of ethical behavior and conduct by ensuring compliance with the Public Leadership Code of Ethics Act No.13 of 1995 and actively seeking support and partnership with all stakeholders.

## **2.5 Performance Review**

### **2.5.1 Objective A: HIV/AIDS infections reduced and related services improved.**

#### **Achievements**

- 163 ES staff were trained on HIV/AIDS.
- HIV/AIDS situation analysis was carried out

- 8 ES staff living with HIV/AIDS were provided with care and support.

#### **Challenges**

- Readiness of staff to undergo Voluntary Counselling and Testing on HIV/AIDS.
- Budget constraints

#### **Way Forward**

- Customize and implement HIV/AIDS programs and interventions
- Develop and implement strategies to mobilize funds on strategic areas

### **2.5.2 Objective B: Ethics Secretariat Service Delivery Improved.**

#### **Achievements**

- Organization structure has been reviewed and implemented.
- Management Information System (MIS) has been designed.
- 51 New Ethics Secretariat staff have been recruited.
- 150 ES staff were trained on various capacity gaps.
- 55 ES staff were promoted.
- 52 ES staff were confirmed.
- Draft scheme of Service for ES staff was formulated.
- Working tools and equipment were procured.
- Client Service Charter was reviewed.

#### **Challenges**

- Budget constraints.
- Scheme of Service for ES staff was not approved.
- Inadequate investment on ICT infrastructures.

#### **Way Forward**

- Strengthen performance management systems.
- Increase investments on ICT infrastructures.
- Carry out impact evaluation surveys
- Establish and strengthen M&E system.
- Develop and implement strategies to mobilize funds on strategic areas.
- Establish and customize complaints handling mechanism.
- Construct Ethics Secretariat's office buildings.
- Solicit approval of new Scheme of Service.
- Human Resource Development Plan developed.
- Procure working tools and ICT equipments.

### **2.5.3 Objective C: Ethical Conduct, Transparency and Accountability by Public Leaders enhanced and openly discussed.**

#### **Achievements**

- 583 complaints against the breach of PLCE Act No. 13 of 1995 were received and processed.
- 33 investigations against the breach of PLCE Act No. 13 of 1995 were conducted.
- Seminars on Leadership ethics conducted to 2,215 Public Leaders from 77 MDAs.
- 24 Public Leaders were convicted by the Ethics Tribunal on breach of the PLCE Act No. 13 of 1995.
- Assets and Liabilities Declaration Form made available through ES website.
- Establishment and operationalization of Ethics Tribunal.
- 46 stakeholders were engaged on ethics promotion and monitoring.
- PLCE Act No. 13 of 1995 review draft in place.
- The level of compliance with the PLCE by the Public Leaders increased from 86.6% in 2009/10 to 96.5% in 2011/12.
- Verification of Assets and Liabilities conducted for 1,156 Public Leaders.

#### **Challenges**

- Lack of effective investigation systems and procedures.
- Lack of instruments, systems, procedures and processes to prevent instances of conflict of interest.
- Inadequate political will to support implementation of PLCE.
- Inadequate funds, modern equipment and facilities to conduct investigations.
- Inadequate skills on investigations.

#### **Way Forward**

- Conduct research on areas of prevalence of ethical breaches.
- Develop investigation systems and procedures.
- Develop short and long term ethics promotion programs.
- Develop and implement strategies to mobilize funds on strategic areas.
- Use of modern equipment in investigations.
- Develop instruments, systems, procedures and processes to prevent instances of conflict of interest.
- Strengthen the capacity of Ethics Tribunal.
- Establish complaints handling mechanisms.
- Finalize the review of PLCE Act No. 13 of 1995.
- Develop Assets verification guideline.

## **2.5.4 Objective D: Public awareness on the Public Leadership Code of Ethics Act raised**

### **Achievements**

- Simplified version of the Public Leadership Code of Ethics reviewed and 1,500 copies disseminated.
- 7 National exhibition events were actively participated and a total of 10,812 citizens were educated on Public Leaders ethics.
- 11 commercial TV graphics on ethics leadership were broadcasted and 614 radio programs were aired on different radio stations.
- Ethics campaigns in 4 schools were conducted.
- 22,000 calendars that provide Public Leadership Code of Ethics education were printed and disseminated.
- 2,800 brochures that provide Public Leadership Code of Ethics education were printed and disseminated.
- 6,000 flyers that provide Public Leadership Code of Ethics education were printed and disseminated.
- 2,000 Journals/ Newsletters that provide Public Leadership Code of Ethics education were printed and disseminated.

### **Challenges**

- Budget constraints.
- Unconducive working environment.
- Inadequate skills.
- Lack of IEC strategy.

### **Way Forward**

- Develop and implement strategies to mobilize funds on strategic areas.
- Develop IEC strategy.
- Effective use of e-government systems.
- Develop sustainable programmes for ethics promotion and monitoring framework.
- Develop ethics promotion teaching manuals for primary schools, secondary schools and higher learning institutions.
- Develop training manual on public leadership ethics.

## 2.6 Stakeholders Analysis.

This analysis provides details on the type of services offered by Ethics Secretariat to stakeholders and their expectations on the Ethics Secretariat services.

**Table 2.6: Stakeholders Analysis**

S/No	Stakeholder	Services Offered	Expectations
1	Members of the Public	Information on ES mandate and functions.	Timely and accurate information on ES functions.
		Public education and awareness to the Public Leaders.	Relevance of the awareness programs
		Feedback on the progress of complaints or any other issues raised	Timely response/solution.
2	Parliament	Information on Public Leaders ethical issues	Timely, reliable and accurate information on Public Leaders ethical matters
		Annual Performance reports	Accurate and timely reports
3	Development Partners	ES Project Performance Reports	Timely and Quality Reports.
4	MDAs, RSs and LGAs.	Information on unethical behaviors and breaches by Public Servants.	Timely and accurate Information
		Orientation on Public Leaders Ethics	Relevant orientation.
		Technical Support on ethical issues	Timely and quality technical support
		Feedback on the progress of complaints or any other issues raised	Timely response/solutions
		Quarterly, Mid Year and Annual	Timely and accurate reports

S/No	Stakeholder	Services Offered	Expectations
		performance reports	
5	Ethics Secretariat's Staff	Information on ES processes and procedures	Timely and accurate information
		Capacity building	Timely and relevant in accordance to training program
		Promotion	Timely as per scheme of service.
		Working facilities	Timely, quality and adequate
		Remuneration	Timely and attractive remuneration.
6	Public Leaders	Orientation on the Public Leaders Ethics.	Timely and relevant orientation
		Issuance of Declaration Forms	Timely distribution and easy access.
		Information on relevant amendment of the Code of Ethics	Timely information
		Advice on ethical issues	Timely and relevant advice
		Information on complaints lodged against them	Timely and accurate feedback Justice as regards to investigation of complaints
7	OWIs, PCCB, PSC, CHRGG, CGA and Police Force.	Information on ethics.	Timely and easy access of information.
		Technical Assistance	Quality, timely and relevant technical assistance
8	CSOs, FBOs, NGOs and CBOs	Information on Ethics Secretariat functions and mandate.	Timely and accurate information
		Technical Assistance	Quality, timely and relevant technical assistance
		Capacity Building	Relevant and timely capacity building
9	Media	Information on Public Leaders Ethical issues.	Timely, accurate and easy access of information.



<b>S/No</b>	<b>Stakeholder</b>	<b>Services Offered</b>	<b>Expectations</b>
10	Professional Associations (PAs)	Information on Ethics Secretariat functions and mandate.	Timely, accurate and easy access of information
		Technical Assistance	Quality, timely and relevant technical assistance
		Capacity Building	Relevant and timely capacity building

## 2.7 SWOC Analysis.

The SWOC analysis determines the internal and external factors that influence Ethics Secretariat's implementation process. Specifically it evaluates the Strengths, Weakness, Opportunities and Challenges (SWOC) involved in implementation process. The analysis has significant impact in identifying strategies for effective implementation of the Ethics Secretariat's functions.

**Table 2.7: SWOC Analysis**

S/No.	CRITERION	STRENGTH	WEAKNESS	OPPORTUNITIES	CHALLENGES
I	HUMAN RESOURCES	<ul style="list-style-type: none"> <li>• Existence of skilled, experienced, knowledgeable and responsive leaders</li> <li>• Committed staff</li> <li>• Existence of knowledgeable and skilled staff</li> </ul>	<ul style="list-style-type: none"> <li>• Unconducive working environment</li> <li>• Inadequate human resource</li> <li>• Insufficient necessary skills to cater for ES functions</li> <li>• Absence of training programmes based on TNA</li> <li>• Lack of scheme of service</li> </ul>	<ul style="list-style-type: none"> <li>• Availability of skilled personnel in the labour market</li> <li>• Availability of training institutions</li> <li>• Existence of public service reforms</li> <li>• Existence of DPs to support capacity building program</li> </ul>	<ul style="list-style-type: none"> <li>• Deterioration of ethics within the community</li> <li>• Existence of bureaucratic recruitment processes</li> <li>• Budgetary constraint</li> <li>• HIV/AIDSs</li> <li>• Labour turnover</li> </ul>

S/No.	CRITERION	STRENGTH	WEAKNESS	OPPORTUNITIES	CHALLENGES
2	CUSTOMER PERSPECTIVE	<ul style="list-style-type: none"> <li>• Existence of Public Leadership Code of Ethics handbook</li> <li>• Existence of ES website</li> <li>• Existence of a Complaints Handling Desk</li> <li>• Existence of SP</li> <li>• Existence of Client Service Charter</li> <li>• Existence of Zonal Offices</li> </ul>	<ul style="list-style-type: none"> <li>• Inadequate implementation of Client Service Charter</li> <li>• Inadequate customer care knowledge</li> <li>• Inadequate facilities to deliver services</li> </ul>	<ul style="list-style-type: none"> <li>• Public trust on the role of ES in ethics promotions</li> <li>• Skilled , experienced and knowledgeable public leaders</li> <li>• Existence of customs, norms and religious beliefs</li> <li>• Public demand to promote ethics</li> </ul>	<ul style="list-style-type: none"> <li>• Limited resources</li> <li>• Inadequate cooperation from public leaders</li> <li>• Negative perception of the public on the role and mandate of the ES</li> <li>• Lack of offices in each region</li> </ul>
3	STAKEHOLDERS PERSPECTIVE	<ul style="list-style-type: none"> <li>• Leadership Commitment</li> <li>• Stakeholders trust in promoting and monitoring ethics in the public sector</li> </ul>	<ul style="list-style-type: none"> <li>• Inadequate negotiation and consultation skills</li> </ul>	<ul style="list-style-type: none"> <li>• Existence of Public Private Partnership</li> <li>• Stakeholders readiness to support ethics promotions</li> <li>• Existence of other watchdog institutions with related mandates</li> </ul>	<ul style="list-style-type: none"> <li>• Inadequate resources</li> </ul>

S/No.	CRITERION	STRENGTH	WEAKNESS	OPPORTUNITIES	CHALLENGES
4	INTERNAL PROCESSES	<ul style="list-style-type: none"> <li>• Existence of Public Leadership Code of Ethics Act No 13 of 1995</li> <li>• Existence of organization structure</li> <li>• Existence of Code of conduct for investigators</li> <li>• Existence of Workers Council</li> <li>• Existence of Management and staff meetings</li> <li>• Existence of mechanism to receive feedback.</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of formalized Operational manuals</li> <li>• Inadequate working facilities and equipment</li> <li>• Poor records management</li> <li>• Weak ICT infrastructure</li> </ul>	<ul style="list-style-type: none"> <li>• Existence of Policies, Laws, Rules, Regulations, Codes, Orders, Circulars, Guidelines and Manuals which guide public service delivery</li> </ul>	<ul style="list-style-type: none"> <li>• Inadequate political will and commitment to support ES functions.</li> </ul>

S/No.	CRITERION	STRENGTH	WEAKNESS	OPPORTUNITIES	CHALLENGES
5	Political Economical Social, Technological Environmental and Legal(PESTEL Analysis)		<ul style="list-style-type: none"> <li>• Low level of usage of technology</li> <li>• Absence of national policy on ethics</li> </ul>	<ul style="list-style-type: none"> <li>• Existence of national agenda on good governance</li> <li>• Existence of a stable government</li> <li>• Top leadership commitment</li> <li>• Rapid increase in ICT facilities and users</li> <li>• Existence of regional and international agenda on good governance</li> </ul>	<ul style="list-style-type: none"> <li>• Absence of infrastructures to support people with special need</li> <li>• Globalization</li> </ul>

## **2.8 Recent initiatives for improving Performance**

- IEC equipment were procured
- Ethical campaigns to MDAs were established
- 35 investigators were trained on investigation techniques skills
- Investigation equipments were procured
- ES website was developed and operationalized
- Two plots for building offices were obtained
- Ethics campaigns were conducted in high leaning institution and primary and secondary schools, higher learning institutions)
- Data collection for developing internal risk management register was carried out
- Complaints registers for both staff and clients was established
- Code of conduct for ES Investigators was developed
- Code of conduct for ES staff was developed

## **2.9 Critical Issues**

- Absence of training manual on public leadership Ethics.
- Absence of investigation systems and procedures.
- Weak the Public Leadership Code of Ethics Act
- Limited investigation powers
- Lack of long term strategy on ethics promotion
- Inadequate capacity of human and financial resources
- Unconducive working environment and conditions t
- Weak HIV and AIDS strategy at workplace
- Absence of M&E System.
- Insufficient Information, Communication and Technology (ICT)
- Increasing unethical prevalence
- Absence of IEC Strategy
- Absence of Risk Management Plan
- Absence of Complaints handling mechanisms
- Absence of National ethics policy

## CHAPTER THREE

### 3.0 THE PLAN

#### 3.1 Vision

A centre of excellence in promoting and monitoring of public leadership ethics.

#### 3.2 Mission

To promote and monitor ethical standards of public leaders through education, investigation, assets declaration and verification in order to enhance good governance for National development.

#### 3.3 Core Values

- **Integrity:** We offer our services with honesty and respect to our clients
- **Impartiality:** We treat our clients fairly
- **Confidentiality:** We ensure proper use of official information
- **Accountability:** We are responsible and answerable for our action and inaction
- **Teamwork:** We work in synergy to realize our organizational goal

#### 3.4 Objectives

##### 3.4.1 Objective A: HIV/AIDS infections reduced and support services improved

##### Rationale

HIV/AIDS is a national disaster; it destroys both trained and experienced Human Resource as well as social fabric. It has significant negative impact on productive manpower and social stability at both family and national levels. Ethics Secretariat recognizes HIV/AIDS has been a problem and jeopardizes efficiency because it affects work force. Ethics Secretariat intended to sensitize staff to undergo HIV/AIDS counseling and voluntarily testing so as to know their status which will help them to take precautions against further infections. For this reason, Ethics Secretariat aspires to reduce HIV/AIDS infections rate and providing support to staff.

##### Strategies

- Strengthen HIV/AIDS strategy

##### Targets

- HIV/AIDS Strategic plan reviewed and implemented by June, 2018
- 269 ES staff sensitized on HIV/AIDS by June, 2018

### **Key Performance Indicators (KPIs)**

- ES staff HIV/AIDS infection rate.
- % ES staff attending HIV/AIDS voluntary testing.
- % ES staff satisfied with the quality of HIV/AIDS supportive services.
- % of ES staff aware of HIV/AIDS prevention and transmission methods

### **3.4.2 Objective B: Effective implementation of National Anti-Corruption Strategy enhanced.**

#### **Rationale**

Corruption is among prevailing unethical practices which affect development of Tanzania and cut across both Private and Public Sectors. To address this challenge the Government has directed all MDAs to implement National Anti-Corruption Strategy and other corruption interventions at workplaces. Ethics Secretariat being Government organization responsible for promotion of ethics to Public Leaders need to be well informed on corruption issues. For this reason; ES has adopted this objective of enhancing effective implementation of National Anti-Corruption Strategy.

#### **Strategy**

- Customize workplace Anti-Corruption strategy

#### **Targets**

- Anti-Corruption programmes developed and implemented by June, 2018
- Integrity Committee operationalized by June, 2018

### **Key Performance Indicators (KPIs)**

- % of corruption related complains among ES staff.
- Perception of stakeholders on corruption at ES.
- % of ES staff aware on National Anti- corruption Strategy

### **3.4.3 Objective C: Ethical Conduct of Public Leaders Improved.**

#### **Rationale**

Public Leaders play a significant role in decision making process which is important in promoting democracy, Good Governance and proper utilization of National resources. Existing of unethical practices among Public Leaders are threat to Good Governance and may lead to inefficiency in Government operations. It destroys the effectiveness of the Government and undermines Public trust and confidence which are the foundation of the country's stability. Ethical conduct of Public Leaders provide a basis for enhancing public confidence in the integrity of public leaders and in the decision making process. Ethics Secretariat charged with mandate to promote ethical conduct of Public Leaders to ensure compliance on the Public Leadership Code.



## **Strategies**

- Promote awareness on Ethical conduct.
- Monitor Ethical conduct of Public Leaders.

## **Targets**

- Ethics promotion programs for Public Service Leaders developed and implemented by June, 2018.
- Ethics promotion programs for Political Leaders developed and implemented by June, 2018.
- Ethics promotion programs for Public Leaders in 7 Zonal Offices developed and implemented by June, 2018.
- IEC Strategy developed and implemented by June, 2018
- Programme for collaboration with stakeholders in promotion of Political Leaders' ethics reviewed and implemented by June, 2018
- Programme for collaboration with stakeholders in promotion of Public Service Leaders' ethics reviewed and implemented by June, 2018
- Programme for collaboration with stakeholders in promotion of Public Leaders' ethics in 7 zones reviewed and implemented by June, 2018
- Public Leadership Code of Ethics Act reviewed and disseminated by June, 2018
- Public Leadership Code of Ethics Regulation prepared and disseminated by June, 2018
- 3 studies on Public Service Leaders ethics conducted by June, 2018
- 3 studies on Political Leaders ethics conducted by June, 2018
- 2 studies on Public Leaders ethics in 7 zones conducted by June, 2018
- Investigation system on ethics of Public Service Leaders developed and implemented by June, 2018
- Investigation system on ethics of Political Leaders developed and implemented by June, 2018
- Investigation system on ethics of Public Leaders developed and implemented in 7 Zones by June, 2018
- Assets declaration and verification systems for Public Service Leaders developed and implemented by June, 2018
- Assets declaration and verification systems for Political Leaders developed and implemented by June, 2018
- Assets declaration and verification systems for Public Leaders in 7 Zones developed and implemented by June, 2018
- ES Legal services provided by June, 2018
- Ethics Tribunal facilitated to manage allegations by June, 2018
- National Ethics policy developed and implemented by June, 2018

### **Key Performance Indicators (KPIs)**

- % of Public Leaders complies with the ethical standards as prescribed in the PLCE.
- Public perception on Public Leaders accountability;
- % of complaints received and analyzed
- % of complaints on the breach of PLCE investigated.
- % of investigations referred to Ethics Tribunal heard and found with guilty.
- % of Public Leaders Assets and Liabilities physically verified and proved to be correct (disaggregated by gender and leadership cadre).
- % of Asset and Liabilities Declaration perused and proved to be correct (disaggregated by gender and leadership cadre)
- % of completed research studies on which results are reported in annual performance reports

### **3.4.4 Objective D: ES capacity to deliver services improved.**

#### **Rationale**

Service Delivery improvement throughout the Public Sector in Tanzania has been given great emphasis. Ethics Secretariat has been facing shortage of office accommodation, adequate modern working tools, sustainable human resource planning and enough financial resources to deliver quality services. Enhancing ES institutional capacity is fundamental for improved service delivery which entails improving working environment, review Client Service Charter and building human resource capacity and staff welfare.

#### **Strategies**

- Improve working environment.
- Strengthen ICT.
- Manage human resource.
- Manage physical and financial resources.
- Develop and implement ethics feedback mechanism.
- Institutionalize Performance Management Systems.

#### **Targets**

- 3ES office buildings constructed by June, 2018.
- Office goods and services provided by June, 2018.
- Statutory entitlements provided to ES staff by June, 2018.
- ICT strategy developed and implemented by June, 2018.
- Human Resource Plan developed and implemented by June, 2018.
- Staff social welfare programmes implemented by June, 2018.
- Procurement Plan developed and implemented by June, 2018.
- Preparation of Plan and budget coordinated by June, 2018.
- Financial internal control system updated and implemented by June, 2018
- Risk Management Plan developed and implemented by June, 2018.

- ES financial and accounting services provided by June, 2018.
- ES internal financial management system reviewed and implemented by June, 2018.
- Financial resources mobilized by June, 2018.
- Complaints handling system developed and implemented by June, 2018.
- M&E System developed and implemented by June, 2018.
- Strategic Plan Reviewed by June, 2018.
- Client Service Charter reviewed and implemented by June, 2018

### **Key Performance Indicators (KPIs)**

- % of stakeholders satisfied with the quality of services offered by ES
- % of ES annual targets in the Strategic plan on track
- % of ES Staff voluntarily leaving the Organization

## **Chapter 4: Results Framework**

### **4.1 Purpose and Structure**

This Chapter intends to show how the results envisioned in the President's Office, Ethics Secretariat (ES) Strategic Plan will be measured as well as the benefits that will accrue to clients and other stakeholders. The Results Framework shows the beneficiaries of ES services; the overall Development Objective (Goal) which is basically the overall impact of ES activities; how ES objectives being implemented are linked to MKUKUTA, National Five Years Development Plan and Ruling Party Election Manifesto 2010; Results Chain; the Results Framework Matrix, the Monitoring Plan; the Planned Reviews; the Evaluation Plan and finally the Reporting Plan.

Generally, the Chapter will provide a basis on how the various interventions to be undertaken in the course of the Strategic Planning Cycle, will lead to achievement of the Development Objective, how will the various interventions be monitored, what kind of reviews that will be undertaken over the period, what type of evidence based evaluation studies that will be undertaken to show that the interventions have either lead or are leading to achievement of the intended outcomes, and finally how the indicators and progress of the various interventions will be reported and to which stakeholders.

### **4.2 The Development Objective (Goal)**

The overriding objective of ES is improved ethical standards of public leaders to enhance good governance for national development. The overriding development objective represents the highest level of results envisioned by ES. However, other key players also significantly contribute towards the achievement of this Development Objective. The achievement of this Development Objective, among others, will be influenced by the level of financial resources available, staff and management commitment, and the demand for accountability on the part of citizens, as well as ES capacity at both strategic and operational levels.

### **4.3 Beneficiaries of ES Services**

ES is comprised of two levels of beneficiaries of services. The first level involves the direct beneficiaries of the services offered by ES. These include Public Leaders, Citizens and ES employees. The second level main beneficiaries involve MDAs, LGAs, DPs and CSOs. ES strives to implement policies, strategies and laws that will provide an enabling environment for promoting ethical leadership and good governance for sustainable socio-economic development.

#### **4.4 Linkage with National Planning Frameworks**

This Strategic Plan has four Objectives which contribute to MKUKUTA Clusters and goals, the National Five Year Development Plan goals and the Election Manifesto 2010. They are linked to MKUKUTA Good Governance and Accountability Cluster III, goal one - ensuring systems and structures of governance are democratic effective accountable and corruption free at all levels, under operational target A - principles of transparency, efficiency, accountability and inclusiveness at all levels ensured. The Objectives are also linked to the National Five Year Development Plan under the goal Governance and Rule of Law.

#### **4.5 Results Chain**

ES's Results Chain consists of inputs, activities, outputs and outcomes, which broadly contribute to MKUKUTA II, National Five Year Development Plan as well as Ruling Party Election Manifesto 2010. A combination of the objectives and targets in the Strategic Plan and Activities and Inputs in the Medium Term Expenditure Framework (MTEF) forms ES's Results Chain. The basic assumption is that, there is causal linkage in the various elements of ES's Results Chain. The inputs i.e. utilization of resources will lead to achievement of the activities, which will contribute to achievement of outputs. Achievement of outputs will lead to achievement of objectives. Achievement of ES's Development Objective in the medium term will contribute to the achievement of MKUKUTA, National Five Year Development Plan as well as Ruling Party Election Manifesto 2010. This chain of results will justify ES's use of the tax payer's money into the various interventions and thus contribute to the development of the country through improved performance.

#### **4.6 The Results Framework Matrix**

This matrix contains ES's overall Development Objective (i.e. the Goal), objectives, planned outcomes and outcome indicators. It envisions how the development objective will be achieved and how the results will be measured. The indicators in the matrix will be used to track progress towards the achievement of the intermediate outcomes and objectives. It should be noted that achievement of ES's overall objective will be contributed by several other players, and may not be completely attributed to interventions under this Strategic Plan. The Results Framework Matrix is detailed below:

**Table 4.6: Results Framework Matrix**

Development Objective	Objective Code	Objective	Planned Outcomes	Key Performance Indicators
Improved ethical leadership in Tanzania to enhance Good Governance for National Development	A	HIV and AIDS Infections Reduced and Supportive Services Improved	1. Reduced prevalence rate at ES.	<ul style="list-style-type: none"> <li>ES staff HIV/AIDS infection rate.</li> </ul>
			2. Improved supportive services to ES Staff Living with HIV/AIDS.	<ul style="list-style-type: none"> <li>% ES staff satisfied with the quality of HIV/AIDS supportive services.</li> </ul>
			3. Increased number of ES Staff attending HIV/AIDS voluntary testing	<ul style="list-style-type: none"> <li>% ES staff attending HIV/AIDS voluntary testing.</li> </ul>
			4. Increased level of awareness among ES staff.	<ul style="list-style-type: none"> <li>% of ES staff aware of HIV/AIDS prevention and transmission methods</li> </ul>
	B	Effective implementation of National Anti-Corruption Strategy enhanced.	1. Reduced complaints related to corruption from the Public on ES staff.	<ul style="list-style-type: none"> <li>% of corruption related complaints among ES staff</li> </ul>
			2. Increased ES staff awareness on corruption	<ul style="list-style-type: none"> <li>% of ES staff aware on National Anti-corruption Strategy</li> </ul>
			3. Increased Public trust to the ES and Government.	<ul style="list-style-type: none"> <li>Perception of stakeholders on corruption at ES</li> </ul>
	C	Ethical Conduct of Public Leaders Improved.	1. Increased transparency and accountability of Public Leaders	<ul style="list-style-type: none"> <li>% of Public Leaders complies with the ethical standards as prescribed in the PLCE.</li> <li>Public perception on Public Leaders accountability</li> </ul>
			2. Improved ES response to complaints raised by citizens	<ul style="list-style-type: none"> <li>% of complaints received and analyzed</li> <li>% of complaints on the breach of PLCE investigated.</li> </ul>

Development Objective	Objective Code	Objective	Planned Outcomes	Key Performance Indicators
				<ul style="list-style-type: none"> <li>• % of investigations referred to Ethics Tribunal heard and found with guilty.</li> </ul>
			3. Improved systems for management of conflict of interest	<ul style="list-style-type: none"> <li>• % of Public Leaders Assets and Liabilities physically verified and proved to be correct (disaggregated by gender and leadership cadre).</li> <li>• % of Asset and Liabilities Declaration perused and proved to be correct (disaggregated by gender and leadership cadre)</li> <li>• % of completed research studies on which results are reported in annual performance reports.</li> </ul>
	D	ES Capacity to Deliver Services Improved.	1. Improved performance	<ul style="list-style-type: none"> <li>• % of ES annual targets in the Strategic plan on track</li> </ul>
			2. Improved public trust and ES image	<ul style="list-style-type: none"> <li>• % of stakeholders satisfied with the quality of services offered by ES</li> </ul>
			3. Reduced labour turnover	<ul style="list-style-type: none"> <li>• % of ES Staff voluntarily leaving the Organization</li> </ul>

## **4.7 Monitoring, Planned Reviews and Evaluation Plan**

This subsection details the Monitoring Plan, Planned Reviews and Evaluation Plan for the period covering the five years of the strategic planning cycle from 2013/14 - 2017/18.

### **4.7.1 Monitoring Plan**

The Monitoring Plan consists of indicators, indicator description, baseline, indicator targets values, data collection and methods of analysis, indicator reporting frequencies and the officers who will be responsible for data collection, analysis and reporting. Though the 10 outcome indicators will be reported on annual basis, tracking of the indicators will be made on quarterly basis. The monitoring and evaluation plan is detailed below:



**Table 4.7.1: Monitoring Plan**

SN	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsible Person	
		Date	Value	Yr 1	Yr 2	Yr 3	Yr 4	Yr 5	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification			
<b>OBJECTIVE A: HIV AND AIDS INFECTIONS REDUCED AND SUPPORTIVE SERVICES IMPROVED</b>															
1.	<p><i>ES Staff HIV/AIDS infection rate.</i></p> <p><b>Definition:</b> This indicator measures the rate of infection among ES Staff.</p> <p><b>How to measure:</b> Number of ES staff affected annual against the total number of ES staff.</p>	July 2013	1.2%	1.0%	0.7%	0.5%	0.2%	0%	ES	Desk review Reports from testing organization	Annually	Survey, Raw data from testing organization	Annually	DAHRM	
2.	<p><i>% of ES Staff attending voluntary HIV/AIDS testing.</i></p> <p><b>Definition:</b> This indicator measures the rate of HIV/AIDS testing among ES staff.</p> <p><b>How to measure:</b> Number of staff tested on HIV/AIDS against total number of ES staff.</p>	July 2013	84%	90%	93%	96%	98%	100%	ES	Desk review Reports from testing organization	Annually	Survey, Raw data from Reports	Annually	DAHRM	
3.	<p><i>Percent of ES staff satisfied with quality of HIV/AIDS supportive service.</i></p> <p><b>Definition:</b> This indicator measures the quality of HIV/AIDS supportive services provided to ES staff living with HIV/AIDS.</p> <p><b>How to measure:</b> Through survey on the perception of ES staff on the quality of HIV/AIDS supportive services.</p>	July 2013	75%	80%	84%	86%	88%	90%	ES	Questionnaire	Annually	Raw data from Questionnaire	Annually	DAHRM	

SN	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsible Person
		Date	Value	Yr 1	Yr 2	Yr 3	Yr 4	Yr 5	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
4.	<p>% of ES staff aware of HIV/AIDS prevention and transmission methods.</p> <p><b>Definition:</b> This indicator measures the level of awareness of HIV/AIDS prevention and transmission.</p> <p><b>How to measure:</b> Through survey on the perception of ES staff on the awareness of HIV/AIDS prevention and transmission.</p>	July 2013	88%	90%	92%	94%	96%	98%	ES	Questionnaire	Annually	Raw data from Questionnaire	Annually	DAHRM
<b>OBJECTIVE B: EFFECTIVE IMPLEMENTATION OF NATIONAL ANTI-CORRUPTION STRATEGY ENHANCED.</b>														
1.	<p>% of corruption related complaints among ES staff</p> <p><b>Definition:</b> This indicator measures the rate of corruption related complaints among ES staff.</p> <p><b>How to measure:</b> Number of staff convicted to corruption related complaints against total number of staff</p>	July 2013	4%	3%	2%	1%	1.5%	0%	ES	Complaints Register	Annually	Raw data Complaints Register	Annually	DAHRM
2.	<p>% of ES staff aware on National Anti-corruption Strategy.</p> <p><b>Definition:</b> This indicator measures the level of awareness on corruption related issues.</p> <p><b>How to measure:</b> Number of staff aware on National Anti Corruption Strategy against the total number of staff</p>	July 2013	86%	88%	90%	94%	96%	98%		Questionnaire	Annually	Raw data mini survey	Annually	DAHRM

SN	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsible Person	
		Date	Value	Yr 1	Yr 2	Yr 3	Yr 4	Yr 5	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification			
3.	<p><i>Perception of stakeholders on corruption at ES.</i></p> <p><b>Definition:</b> This indicator measures the level of satisfaction of the stakeholders on services provided by ES.  <b>How measure:</b> Through survey on the perception of stakeholders on corruption at ES.</p>	July 2013	Very Low possibility of corruption at ES						Corruption free office	ES	Questionnaire	Annually	Survey, Raw data from Questionnaire	Annually	DAHRM

**OBJECTIVE C: ETHICAL CONDUCT OF PUBLIC LEADERS IMPROVED.**

1.	<p><i>% of Public Leaders complies with the ethical standards as prescribed in the PLCE.</i></p> <p><b>Definition:</b> Comply means adherence of Public leaders with the ethical standards requiring filling an asset declaration and behavior includes:- Submission deadline, correct declarations &amp; ethical practices (proper use of power, declare interest, proper use public resources) as stipulated in the PLCE. Public Leaders mean Leaders as prescribed in the PLCE, it include Political Leaders and Public Service Leaders.</p> <p><b>How measure:-</b> Survey will be conducted, Public leaders will be interview regarding and behavior adherence to ethical standards (Submission deadline, correct declarations &amp; ethical practices (proper use of power, declare interest, proper use public resources as stipulated in the PLCE).</p>	July 2013	To be computed					To be computed	ES	Interview and Documentary Review Public Leaders	Twice per life span of the plan	Raw data from Survey	Twice per life span of the plan	SPL/SPS/AS-ZO
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2.	<p>Public perception on Public Leaders accountability.</p> <p><b>Definition:-</b> Views or insights on the accountability by public leaders. Perception levels are expressed in 3 likert scale (Good, Neutral and Bad).</p> <p><b>How to measure:-</b> This is measured by adding up public responses for each category; dividing with the total sampled public responses; times 100 at a given period of time</p>	July 2013	To be computed						To be computed	ES	Interview and Documentary Review Public Leaders	Twice per life span of the plan	Raw data from Survey	Twice per life span of the plan	SPL/SPS/AS-ZO
3.	<p>% of Public Leaders Assets and Liabilities physically verified and proved to be correct (disaggregated by gender and leadership cadre).</p> <p><b>Definition:</b> Percentage of Asset and Liabilities Declaration ((ALD) forms filled by leaders, physically verified by ES staff and proved to be correct.</p> <p><b>How measure:-</b> This is measured by counting declarations physically verified by ES staff and proved to be correct; dividing by all declarations sampled for physical verification; times 100 at a given period of time</p>	July 2013	50%	60%	70 %	80 %	90 %	100%		ES	Physical Verification, Asset and Liabilities Verification Report	Annually	Raw data from Verification Report	Annually	SPL/SPS/AS-ZO
	<p>% of Asset and Liabilities Declaration perused and proved to be correct (disaggregated by gender and leadership cadre)</p> <p><b>Definition:-</b> Percentage of Asset and Liabilities Declaration ((ALD) forms filled by leaders, perused and proved to be correct.</p> <p><b>How to measure:-</b></p>	July 2013	90%	92%	94 %	96 %	98 %	100%		ES	Desk review Asset and Liabilities Verification Report	Annually	Raw data from Verification Report	Annually	SPL/SPS/AS-ZO

	This is measured by counting ALD forms verified by ES staff and proved to be correct; dividing by all ALD submitted by Public Leaders; times 100 at a given period of time													
4.	<p>% of completed research studies on which results are reported in annual performance reports.</p> <p><b>Definition:</b> This indicator measures the rate of research/studies completed initiated and completed.</p> <p><b>How to measure:</b> Number of research studies completed against total number of research studies planned.</p>	July 2013	100% (3/3x100)	92%	94%	96%	98%	100%	ES	Survey	Annually	Raw data from Survey	Annually	SPL/SPS/AS-ZO
5.	<p>% of complaints received and analyzed.</p> <p><b>Definition:-</b> The indicator measures the number of issues analyzed. Issues under this indicator means breaches which related to conflict of interest, abuse of power, embezzlement of funds, nepotism, assets declarations, etc.</p> <p><b>How to measure:-</b> Numerator is issues analyzed. It include actions taken by ES in response to the issues/breaches reported by citizens. Denominator is the total number of issues/breaches reported</p>	July 2013	85%	88%	94%	96%	98%	100%	ES	Documentary Review	Annually	Raw data from: <ul style="list-style-type: none"> <li>Investigation Reports,</li> <li>Complaints Register, Annual Performance Report</li> </ul>	Annually	SPL/SPS/AS-ZO
6.	<p>% of complaints on the breach of PLCE investigated.</p> <p><b>Definition:</b> This indicator measures the rate of ES response to issues raised by citizen.</p>	July 2013	40%	45%	50%	55%	60%	65%	ES	<ul style="list-style-type: none"> <li>Investigation Reports,</li> <li>Complaints Register,</li> <li>Annual Performance Report</li> </ul>	Annually	Raw data from: <ul style="list-style-type: none"> <li>Investigation Reports,</li> <li>Complaints Register,</li> <li>Annual Performance Report</li> </ul>	Annually	SPL/SPS/AS-ZO

	<b>How to measure:</b> Number of complaints on the breach of PLCEA investigated against the total number received.													
7.	<i>% of allegations referred to ethics tribunal resulting in conviction</i>  <b>Definition:</b> This indicator measures the rate of allegation with relevant evidence and argument which resulting in conviction. It determines the capacity of investigators in collecting relevant evidence and recording argument.  <b>How to measure:</b> Number of allegations referred to ethics tribunal resulting in conviction against total number of allegation referred.	July 2013	60%	65%	70%	75%	80%	85%	ES	<ul style="list-style-type: none"> <li>• Preliminary Investigation Reports,</li> <li>• Assets and Liabilities Declaration Forms,</li> <li>• Asset and Liabilities Verification Report</li> </ul>	Annually	Raw data from: <ul style="list-style-type: none"> <li>• Preliminary Investigation Reports,</li> <li>• Assets and Liabilities Declaration Forms,</li> <li>• Asset and Liabilities Verification Report</li> </ul>	Annually	PLO

**OBJECTIVE D: ES CAPACITY TO DELIVER SERVICES IMPROVED.**

1.	<i>% of stakeholders satisfied with the quality of services offered by ES</i>  <b>Definition:</b> The indicator measures the level of satisfaction of stakeholders on quality of services offered by ES.  <b>How to measure:</b> Through survey on the perception of stakeholders on the quality of ES services.	July 2013	75%	78%	82%	86%	90%	95%	ES	Survey	Annually	Raw data from Survey	Annually	DAHRM & DPME
2.	<i>% of ES annual targets in the Strategic plan on track</i>  <b>Definition.</b> The indicator measures the capacity of ES on implementation of work plan. Targets are levels of achievement planned which can be in terms of number, percent or word. Targets in the work plan on track means targets	July 2013	65%	70%	75%	80%	85%	90%	ES	Survey	Annually	Raw data from Survey	Annually	DPME

	<p>which are above 50 percent of the planned annual target.</p> <p><b>How to measure:</b>  Numerator is the number of targets in the work plan on track.  Denominator is the total number of targets in the work plan.</p>													
3.	<p>% of ES Staff voluntarily leaving the Organization.</p> <p><b>Definition.</b>  The number of ES staff who willingly at own accord decides to leave the institution.</p> <p><b>How to measure.</b>  This is measured by adding up the number of staff who willingly opt to leave the institution</p>	July 2013	3%	2.5%	2%	1.5 %	1%	0	ES	Human Resources Report	Annually	Human Resources Report	Annually	DAHRM

## 4.7.2 Planned Reviews

This will consist of review meetings, planned milestones reviews and rapid appraisals including their frequencies.

### 4.7.2.1 Review Meetings

This will involve various meetings that will be conducted to track progress on the milestones, activities and targets/outputs critical for achievement of organizational objectives. This will also involve determining type of meetings, frequency, designation of chairpersons and participants in each meeting.

**Table 4.7.2.1: Review Meetings**

Sn.	Type of Meeting	Frequency	Designation of the Chairperson	Participants
1.	Weekly review meetings	Weekly	Heads of Sections, Zones and Units	All staff in Sections, Zones and Units
2.	Management meetings	Fortnightly	Ethics Commissioner/Heads of Zones	All heads of Divisions/Sections, Zones and Units
3.	Quarterly review meetings	Quarterly	Ethics Commissioner/Heads of Zones	All heads of Divisions/Sections, Zones and Units
4.	Annual review meetings	Annually	Ethics Commissioner/Heads of Zones	All heads of Divisions/Sections, Zones and Units

### 4.7.2.2 Planned Milestones Review

The plan is to carry out a total of ten (10) formal reviews during the Strategic Planning Cycle. This will involve carrying out five (5) midyear reviews and five (5) annual reviews. The reviews will be tracking progress on implementation of the milestones and targets on semiannual and annual basis. A total of 94 milestones will be tracked during the period of five years.

During the first year (2013/14), one annual review will be conducted in June 2014. The review will focus on determining whether the planned activities are moving towards achieving the annual targets and will find out whether they are on track, off track or at risk. The reviews will be based on a total of 27 pre-planned milestones. In addition, the review will track any changes in terms of outputs realized over the period as well as assessing issues, challenges and lessons learnt over the year and to what extent the outputs delivered are contributing towards



achievement of the objectives. The review findings will be used to adjust implementation strategies whenever necessary. The respective Directors will take a lead in the review process.

During the second year (2014/15), third year (2015/16) and fourth year (2016/17) six more reviews will be undertaken i.e. two reviews per year. Like in the first year of the plan, the reviews in these years will also focus on performance against planned activities. Whereas during the second year, third year, and fourth year a total of 46 milestones will be assessed; a total of 21 milestones will be due for assessment during the fifth year (2017/18). Additionally, the reviews to be conducted during the fifth year focus on determining whether the planned outputs over the five year period have been achieved against the indicators, and if not what could have been the reasons for the under achievement. All the five years outputs and milestones will be reviewed. The review will also assess as to what extent the achieved targets have contributed towards achievement of five year outcomes as well as issues, challenges and lessons learnt over the five years period. The Ethics Commissioner and Directors will take a lead in the review process on the completion of the Strategic Plan Cycle. The specific planned reviews, milestones timeframes and the responsible Divisions/Units are detailed below:

**Table 4.7.2.2: Planned Reviews**

Years	Planned Reviews	Milestones	Timeframe	Responsible Person
Year I 2013/14	Two Reviews Per Year - (Mid Year and Annual Reviews)	HIV/AIDS Strategic Plan at ES reviewed and implemented	June 2014	DAHRM
		52 ES staff sensitized on HIV/AIDS	June 2014	DAHRM
		ES Anti-corruption programme reviewed and implemented	June 2014	DAHRM
		Integrity Committee operationalized	June 2014	DAHRM
		Ethics promotion programs for Public Service Leaders developed and implemented	June 2014	SPS
		Ethics promotion programs for Political Leaders developed and implemented	June 2014	SPL
		Ethics promotion programs for Public Leaders in 7 Zones developed and implemented	June 2014	ASZ
		Programme for collaboration with stakeholders in promotion of Political Leaders' ethics reviewed and implemented	June 2014	SPL
		Programme for collaboration with stakeholders in promotion of Public Service Leaders' ethics reviewed and implemented	June 2014	SPS
		Programme for collaboration with stakeholders in promotion of Public Leaders' ethics in 7 zones reviewed and implemented	June 2014	ASZ
		Public Leadership Code of Ethics Act reviewed and disseminated	June 2014	PLO
		Public Leadership Code of Ethics Regulation prepared and disseminated	June 2014	PLO
		3 studies on Public Service Leaders ethics conducted	June 2014	SPS
		3 studies on Political Leaders ethics conducted	June 2014	SPL
		2 studies on Public Leaders ethics in 7 zones conducted	June 2014	ASZ
		Investigation system on ethics of Public Service Leaders developed and implemented	June 2014	SPS
Investigation system on ethics of Political Leaders developed and	June 2014	SPL		

Years	Planned Reviews	Milestones	Timeframe	Responsible Person
		implemented		
		Investigation system on ethics of Public Leaders developed and implemented in 7 Zones	June 2014	ASZ
		Assets declaration and verification systems for Public Service Leaders developed and implemented	June 2014	SPS
		Assets declaration and verification systems for Political Leaders developed and implemented	June 2014	SPL
		Assets declaration and verification systems for Public Leaders in 7 Zones developed and implemented	June 2014	ASZ
		Ethics Tribunal facilitated to manage cases	June 2014	PLO
		ES ICT Strategy approved by management	June 2014	PSA
		Human Resource Plan developed and implemented	June 2014	DAHRM
		Risk Management Plan developed and implemented	June 2014	CIA
		Financial resources mobilized	June 2014	DPME
Year 2 2014/15	Two Reviews Per Year - (Mid Year and Annual Reviews)	52 ES staff sensitized on HIV/AIDS	June 2015	DAHRM
		ES Anti-corruption programme reviewed and implemented	June 2015	DAHRM
		Ethics promotion programs for Public Service Leaders developed and implemented	June 2015	SPS
		Ethics promotion programs for Political Leaders developed and implemented	June 2015	SPL
		Ethics promotion programs for Public Leaders in 7 Zones developed and implemented	June 2015	ASZ
		Assets declaration and verification systems for Public Service Leaders developed and implemented	June 2015	SPS
		Assets declaration and verification systems for Political Leaders developed and implemented	June 2015	SPL
		Assets declaration and verification systems for Public Leaders in 7 Zones developed and implemented	June 2015	ASZ

Years	Planned Reviews	Milestones	Timeframe	Responsible Person
Year 3 2015/16	Two Reviews Per Year - (Mid Year and Annual Reviews)	Ethics Tribunal facilitated to manage cases	June 2015	PLO
		Financial resources mobilized	June 2015	DPME
		52 ES staff sensitized on HIV/AIDS	June 2016	DAHRM
		ES Anti-corruption programme reviewed and implemented	June 2016	DAHRM
		Ethics promotion programs for Public Service Leaders developed and implemented	June 2016	SPS
		Ethics promotion programs for Political Leaders developed and implemented	June 2016	SPL
		Ethics promotion programs for Public Leaders in 7 Zones developed and implemented	June 2016	ASZ
		Assets declaration and verification systems for Public Service Leaders developed and	June 2016	SPS
		Assets declaration and verification systems for Political Leaders developed and implemented	June 2016	SPL
		Assets declaration and verification systems for Public Leaders in 7 Zones developed and implemented	June 2016	ASZ
		National Ethics Policy submitted for endorsement by the Cabinet	June 2016	DPME
		Ethics Tribunal facilitated to manage cases	June 2016	PLO
		Risk Management Plan developed and implemented	June 2016	CIA
		Financial resources mobilized	June 2016	DPME
		Complaints handling system developed and implemented	June 2016	PLO
IEC Strategy developed and implemented	June 2016	GCU		
Year 4 2016/17	Two Reviews Per Year - (Mid Year and Annual Reviews)	52 ES staff sensitized on HIV/AIDS	June 2017	DAHRM
		ES Anti-corruption programme reviewed and implemented	June 2017	DAHRM
		Integrity Committee operationalized	June 2017	DAHRM
		Ethics promotion programs for Public Service Leaders developed and implemented	June 2017	SPS

Years	Planned Reviews	Milestones	Timeframe	Responsible Person
		Ethics promotion programs for Political Leaders developed and implemented	June 2017	SPL
		Ethics promotion programs for Public Leaders in 7 Zones developed and implemented	June 2017	ASZ
		Programme for collaboration with stakeholders in promotion of Political Leaders' ethics reviewed and implemented	June 2017	SPL
		Programme for collaboration with stakeholders in promotion of Public Service Leaders' ethics reviewed and implemented	June 2017	SPS
		Programme for collaboration with stakeholders in promotion of Public Leaders' ethics in 7 zones reviewed and implemented	June 2017	ASZ
		3 studies on Public Service Leaders ethics conducted	June 2017	SPS
		3 studies on Political Leaders ethics conducted	June 2017	SPL
		2 studies on Public Leaders ethics in 7 zones conducted	June 2017	ASZ
		Investigation system on ethics of Public Service Leaders developed and implemented	June 2017	SPS
		Investigation system on ethics of Political Leaders developed and implemented	June 2017	SPL
		Investigation system on ethics of Public Leaders developed and implemented in 7 Zones	June 2017	ASZ
		Assets declaration and verification systems for Public Service Leaders developed and implemented	June 2017	SPS
		Assets declaration and verification systems for Political Leaders developed and implemented	June 2017	SPL
		Assets declaration and verification systems for Public Leaders in 7 Zones developed and implemented	June 2017	ASZ
		National Ethics Policy submitted for endorsement by the Cabinet	June 2017	DPME
		Ethics Tribunal facilitated to manage cases	June 2017	PLO
		3 ES office buildings constructed	June 2017	DAHRM

Years	Planned Reviews	Milestones	Timeframe	Responsible Person
		Financial resources mobilized by June, 2018	June 2017	DPME
Year 5 2017/18	Two Reviews Per Year - (Mid Year and Annual Reviews)	52 ES staff sensitized on HIV/AIDS	June 2018	DAHRM
		ES Anti-corruption programme reviewed and implemented	June 2018	DAHRM
		Ethics promotion programs for Public Service Leaders developed and implemented	June 2018	SPS
		Ethics promotion programs for Political Leaders developed and implemented	June 2018	SPL
		Ethics promotion programs for Public Leaders in 7 Zones developed and implemented	June 2018	ASZ
		Public Leadership Code of Ethics Act reviewed and disseminated	June 2018	PLO
		Public Leadership Code of Ethics Regulation prepared and disseminated	June 2018	PLO
		Assets declaration and verification systems for Public Service Leaders developed and implemented	June 2018	SPS
		Assets declaration and verification systems for Political Leaders developed and implemented	June 2018	SPL
		Assets declaration and verification systems for Public Leaders in 7 Zones developed and implemented	June 2018	ASZ
		National Ethics Policy submitted for endorsement by the Cabinet	June 2018	DPME
		Ethics Tribunal facilitated to manage cases	June 2018	PLO
		3 ES office buildings constructed	June 2018	DAHRM
		ES ICT Strategy approved by management	June 2018	PSA
		Risk Management Plan developed and implemented	June 2018	CIA
		Financial resources mobilized	June 2018	DPME
		Complaints handling system developed and implemented	June 2018	PLO
		M&E System developed and implemented	June 2018	DPME
Strategic Plan reviewed	June 2018	DPME		

Years	Planned Reviews	Milestones	Timeframe	Responsible Person
		Client Service Charter reviewed and implemented	June 2018	DAHRM
		IEC Strategy developed and implemented	June 2018	GCU

### 4.7.2.3 Rapid Appraisals

This will also involve determining the type, description, questions, area of focus, methodology, and frequency of the rapid appraisal including the responsible person for conducting or managing the rapid appraisals.

**Table 4.7.2.3: Rapid Appraisal**

SN.	Rapid Appraisal	Description of the Rapid Appraisal	Appraisal Questions	Methodology	Timeframe	Responsible Person
1.	Complaints Management Survey	The survey aims to establish the effectiveness of ES to manage complaints.	<ul style="list-style-type: none"> <li>• Is the Public aware of complaints to be submitted to the ES?</li> <li>• Is the Public aware of the systems and procedures of complaints submission?</li> <li>• Are the systems and procedures of complaints management effective?</li> <li>• Are the evidence submitted before the Tribunal credible?</li> <li>• Are the recommendation provided by the ES Tribunal effective?</li> <li>• Are the sanctions provided under PLCE effective?</li> <li>• What is the perception of the public on the complaints handled by ES and Ethics Tribunal?</li> </ul>	Questionnaire, focus group discussions, interviews	2014/15	SPL
2.	Public Awareness Survey on ES mandate and functions	Awareness Survey intends to measure the level of understanding of the public on the Ethics Secretariat's functions and mandate.	<ul style="list-style-type: none"> <li>• Is the public aware of the public leadership code of ethics?</li> <li>• Are the stakeholders aware of the existence of ES Zonal offices?</li> <li>• Is the public aware of the existence of Ethics Secretariat?</li> <li>• Are the functions and mandate of</li> </ul>	Questionnaire, focus group discussions, interviews.	2015/16	SPS



SN.	Rapid Appraisal	Description of the Rapid Appraisal	Appraisal Questions	Methodology	Timeframe	Responsible Person
			<p>Ethics Secretariat known?</p> <ul style="list-style-type: none"> <li>• Is the public aware of their rights and responsibilities provided by the PLCE?</li> <li>• What is the public opinion on ES performance?</li> <li>• Is ES effective in promoting and monitoring Public Leadership Ethics?</li> </ul>			
3.	Efficacy of Public Leadership Code of Ethics Survey	This survey intends to assess the effectiveness and adequacy of the Public Leadership Code of Ethics.	<ul style="list-style-type: none"> <li>• Are Public Leaders aware of the Public Leadership Code of Ethics?</li> <li>• Are the Leadership ethics clearly understood by the Public Leaders?</li> <li>• Do Public Leaders comply with the Public Leadership Ethics?</li> <li>• What are the reasons for non-compliance?</li> <li>• Are provisions of the Public Leadership Code of Ethics adequate to compel compliance?</li> <li>• Are the sanctions provided under the Public Leadership Code of Ethics punitive enough?</li> </ul>	Interviews Questionnaire Group discussions	2013/14	SPL
4.	Service Delivery survey	This study will identify and analyses the level of customer satisfaction on service delivered by the Secretariat, factors affecting it and come up with recommendations for improvements	<ul style="list-style-type: none"> <li>• What kind of services is being offered by the Secretariat?</li> <li>• What are the key stakeholders?</li> <li>• What is the level of satisfaction?</li> <li>• What are factors affecting service delivered?</li> <li>• What can be done to improve the services?</li> </ul>	Questionnaires, surveys, Interviews focus group discussions	2014/15	DAHRM

SN.	Rapid Appraisal	Description of the Rapid Appraisal	Appraisal Questions	Methodology	Timeframe	Responsible Person
5.	HIV and AIDS assessment study.	Assesses the incidence of HIV and AIDS at ES, its consequences on service delivery, and what is currently being done to address the situation.	<ul style="list-style-type: none"> <li>• Are HIV and AIDS interventions being well implemented?</li> <li>• Are the interventions working?</li> <li>• Are they reducing spread of HIV and AIDS?</li> <li>• Are the costs of HIV and AIDS to the public service decreasing? (lost time, sickness)</li> <li>• Are staffs living with HIV and AIDS satisfied with support services provided?</li> </ul>	Conduct interviews and administer questionnaire, VCT records	2013/14	DAHRM
	Baseline Study	This study will collect baseline data for a number of indicators identified in the monitoring and Evaluation plan.	<ul style="list-style-type: none"> <li>• What is the current status for each of the indicators?</li> <li>• What are the reasons for not being achieved?</li> <li>• What should be done?</li> </ul>	Interview, Questionnaire, survey	2013/2014	DPME

### 4.7.3 Evaluation Plan

The Evaluation Plan consists of the evaluation studies to be conducted during the Strategic Planning Cycle, description of each study, the evaluation questions, the methodology, timeframe and the responsible person. One evaluation study will be conducted over the period of five years with a total of five evaluation questions. The evaluation studies intends to obtain evidence as to whether the interventions and outputs achieved have lead to the achievement of the outcomes as envisioned in the Strategic Plan outputs.

The Evaluation Plan matrix is detailed below:

**Table 4.7.3: Planned Evaluations**

SN	Evaluation	Description	Evaluation Questions	Methodology	Timeframe	Responsible Person
I.	Impact study on PLCE for Public Leaders	This study will evaluate the impact made by PLCE as a catalyst for enhancing good governance and rule of law for socio-economic development of the country. It will also come up with recommendations on improving public leadership ethics.	<ul style="list-style-type: none"> <li>• Are the Ethics promotion programs relevant to the Public Leaders expectations?</li> <li>• What are socio-economic factors hindering smooth implementation public leadership ethics</li> <li>• Is the public satisfied with the behavior and conduct of the Public Leaders?</li> <li>• Have the Ethics promotion programmes raised the level of understanding and compliance of PLCE?</li> <li>• What can be done to improve leadership ethics?</li> </ul>	Survey	2016/2017	DPME

#### 4.7.4 Reporting Plan

This subsection details the Reporting Plan which contains the internal and external reporting plan. The reporting plan is in accordance with statutory requirements, Medium Term Strategic Planning and Budgeting Manual or as may be required from time to time.

##### 4.7.4.1 Internal Reporting Plan

This Plan will involve preparation of four types of reports namely, Section Report, Division/Unit Report, Quarterly Report and Annual Report. The reports will be prepared on weekly, quarterly, annually or on demand basis as may be required from time to time. The Reporting Plan is detailed below:

**Table 4.7.4.1: Internal Reporting**

S/N	Type of Report	Recipient	Frequency	Responsible Person
1.	Section Report	Division/Unit Heads	Weekly	Heads of Sections/Zonal Offices
2.	Division/Unit Report	Ethics Commissioner	Fortnightly	Heads of Divisions/Units/Zonal Offices
3.	Quarterly Report	Ethics Commissioner	Quarterly	Heads of Divisions/Units/Zonal Offices
4.	Annual Report	Ethics Commissioner	Annually	Heads of Divisions/Units/Zonal Offices

##### 4.7.4.2 External Reporting Plan

This Plan will involve preparation of four types of reports namely performance report, financial report, annual report and five years outcome report. Performance report will be submitted to various external stakeholders, who include President's Office, State House, Prime Minister's Office, Ministry of Finance, as well as Development Partners. The Financial report will be submitted to Controller and Auditor General while the Annual report will be submitted to the President of the United Republic of Tanzania. The reports will be prepared on quarterly, semi annually, annually or on demand basis from time to time. The reporting plan will be in accordance with the statutory requirements as directed from time to time, as well as the Government Performance reporting requirements as stipulated in the Medium Term Strategic Planning and Budgeting Manual.

**Table 4.7.4.2: External Reporting**

S/N	Type of Report	Recipient	Frequency	Responsible Person
1.	Performance Reports	PMO/MOF/Development Partners/Planning Commission/ Public Service Commission	Quarterly	Heads of Divisions/Units
2.	Financial Statements	MOF/Controller and Auditor General	Semi Annually/ Annually	Chief Accountant
3.	Annual Reports	The President of the United Republic of Tanzania (Good Governance) / Parliament/MOF	Annually	Ethics Commissioner
4.	Five Years Outcome Report	The President of the United Republic of Tanzania (Good Governance)/ Parliament/MOF/ Planning Commission	Every Five Years	Ethics Commissioner

#### **4.7.5 Relationship between Results Framework, Results Chain, M&E and Reporting Arrangements**

##### **4.7.5.1 Level 1- Inputs**

The first level of the Results Framework tracks the allocation and use of resources on the various activities. Resources availability will be reviewed on weekly, fortnightly or monthly basis and will be reported on respective implementation reports. At this level indicators will focus on the number and quality of human resources available for various tasks, amount of time dedicated to tasks by staff, information flow between various levels, time spent on resolving problems, quality and timeliness of decisions and staff as well as predictability of resource flows, the alignment of resource flow to the activities and outputs.

##### **4.7.5.2 Level 2 – Activities**

The third level of the Results Framework focuses on realization of activities and linkage between activities and outputs. At this level indicators will focus on processes, activities programming and timeliness of implementation. Activities will be reviewed on weekly, fortnightly or monthly basis and will be reported on respective implementation reports. The reports will focus on quality and timeliness of the activities implemented and will inform corrective action if the activities are not being delivered on time, to the expected quality and if are not contributing to outputs.

#### **4.7.5.3 Level 3 – Outputs**

The third level of the Results Framework tracks the realization of the outputs that ES produces and which are attributed solely to ES. The outputs at this level will be measured by output Indicators and milestones and data collection and analysis will be done quarterly. Outputs or Milestones which have significant impact on achievement of the objectives will be reviewed quarterly and will be reported in Quarterly reports. The reports will focus on how the outputs produced are delivering the outcomes and will inform corrective action if the outputs are not being delivered effectively or are not contributing to outcomes.

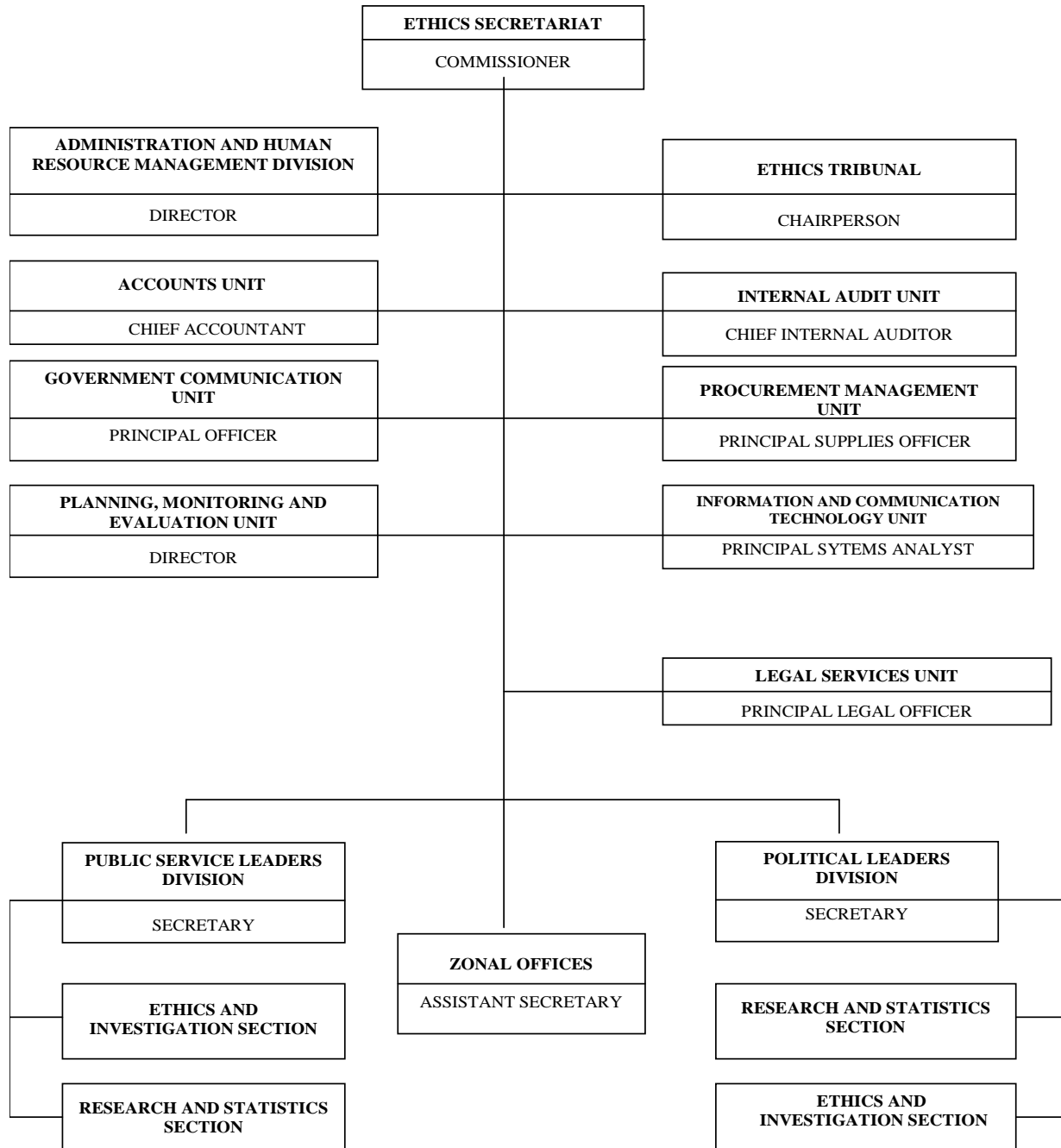
#### **4.7.5.4 Level 4 – Outcomes**

The fourth level of the Results Framework tracks the realization of the intermediate outcomes specified for each objective, though achievement of these outcomes may not be attributed to ES alone as there will be several players contributing to these outcomes. These intermediate Strategic Plan ES outcomes will be measured through outcome indicators whose data collection and analysis could be done annually. Indicators at this level are reported through the annual report or the five year outcome report. The annual reports and the five years outcome reports will be based on either sector or specific evidence based studies using national statistics. The reports focus on benefits delivered to ES clients and other stakeholders.

# ANNEXES

## Annex I: Organization Structure.

### ORGANIZATION STRUCTURE OF THE PRESIDENT’S OFFICE, ETHICS SECRETARIAT





**Annex II: Strategic Plan Matrix**

S/N o	OBJECTIVE	STRATEGY	TARGETS	RESPONSIBLE PERSON	KPI
A	HIV/AIDS infections reduced and support services improved	Strengthen HIV/AIDS strategy	HIV/AIDS Strategic plan reviewed and implemented by June, 2018	DAHRM	<ul style="list-style-type: none"> <li>• ES staff HIV/AIDS infection rate.</li> <li>• % ES staff attending HIV/AIDS voluntary testing.</li> <li>• Perception of staff on quality of HIV/AIDS supportive services.</li> </ul>
			269 ES staff sensitized on HIV/AIDS by June, 2018		
B	Effective implementation of national anti-corruption strategy enhanced	Customize workplace Anti-Corruption strategy	Anti-corruption programmes implemented by June,2018	DAHRM	<ul style="list-style-type: none"> <li>• % of corruption related complains among ES staff</li> <li>• Perception of stakeholders on corruption at ES</li> <li>• % of ES staff aware on National Anti- corruption Strategy</li> </ul>
			Integrity Committee operationalized by June, 2018	DAHRM	
C	Ethical Conduct of Public Leaders Improved	Promote awareness ethical conduct.	Ethics promotion programs for Public Service Leaders developed and implemented by June, 2018	SPS	<ul style="list-style-type: none"> <li>• % of Public Leaders complies with the ethical standards as prescribed in the PLCE.</li> <li>• Public perception on Public Leaders accountability</li> <li>• % of complaints received and analyzed</li> <li>• % of complaints on the breach of PLCE investigated.</li> <li>• % of investigations referred to</li> </ul>
			Ethics promotion programs for Political Leaders developed and implemented by June, 2018	SPL	
			Ethics promotion programs for Public Leaders in 7 Zonal Offices developed and implemented by June, 2018	ASZ	

S/N o	OBJECTIVE	STRATEGY	TARGETS	RESPONSIBLE PERSON	KPI
			IEC Strategy developed and implemented by June, 2018	PO	Ethics Tribunal heard and found with guilty. <ul style="list-style-type: none"> <li>• % of Public Leaders Assets and Liabilities physically verified and proved to be correct (disaggregated by gender and leadership cadre).</li> <li>• % of Asset and Liabilities Declaration perused and proved to be correct (disaggregated by gender and leadership cadre)</li> <li>• % of completed research studies on which results are reported in annual performance reports.</li> </ul>
			Programme for collaboration with stakeholders in promotion of Political Leaders' ethics reviewed and implemented by June, 2018	SPL	
			Programme for collaboration with stakeholders in promotion of Public Service Leaders' ethics reviewed and implemented by June, 2018	SPS	
			Programme for collaboration with stakeholders in promotion of Public Leaders' ethics in 7 zones reviewed and implemented by June, 2018	ASZ	
			Public Leadership Code of Ethics Act reviewed and disseminated by June, 2018	PLO	
			Public Leadership Code of Ethics Regulation prepared and disseminated by June, 2018	PLO	
		Monitor Ethical conduct of Public	3 studies on Political Leaders ethics conducted by June, 2018	SPL	

S/N o	OBJECTIVE	STRATEGY	TARGETS	RESPONSIBLE PERSON	KPI
		Leaders	3 studies on Public Service Leaders ethics conducted by June, 2018	SPS	
			2 studies on Public Leaders ethics in 7 zones conducted by June, 2018	ASZ	
			Investigation system on ethics of Political Leaders developed and implemented by June, 2018	SPL	
			Investigation system on ethics of Public Service Leaders developed and implemented by June, 2018	SPS	
			Investigation system on ethics of Public Leaders developed and implemented in 7 Zones by June, 2018	ASZ	
			Assets declaration and verification systems for Public Service Leaders developed and implemented by June, 2018	SPS	
			Assets declaration and verification systems for Political Leaders developed and implemented by June, 2018	SPL	

S/N o	OBJECTIVE	STRATEGY	TARGETS	RESPONSIBLE PERSON	KPI
			Assets declaration and verification systems for Public Leaders in 7 Zones developed and implemented by June, 2018	ASZ	
			ES Legal services provided by June, 2018	PLO	
			National Ethics policy developed and implemented by June, 2018	DPME	
			Ethics Tribunal facilitated to manage cases by June, 2018	PLO	
D	ES capacity to deliver services improved	Improve working environment	3 ES office buildings constructed by June 2018	DARHM	<ul style="list-style-type: none"> <li>• Perception of stakeholders on the quality of services offered by ES</li> <li>• % of ES annual targets in the Strategic plan on track</li> <li>• % of ES Staff voluntarily leaving the Organization</li> </ul>
			Office goods and services provided by June, 2018	DARHM	
			Statutory entitlements provided to ES staff by June, 2018	DAHRM	
		Institutionalize ICT	ICT strategy developed and implemented by June 2018	PSAA	
		Manage human resource	Human Resource Plan developed and implemented by June,2018	DARHM	
			Staff social welfare programmes implemented by june,2018	DARHM	

S/N o	OBJECTIVE	STRATEGY	TARGETS	RESPONSIBLE PERSON	KPI
		Manage physical and financial resources	Procurement Plan developed and implemented by June, 2018.	PSO	
			Preparation of Plan and budget coordinated by June 2018	DPME	
			Financial internal control systems updated and implemented by June, 2018	CIA	
			Risk Management Plan developed and implemented by June, 2018	CIA	
			ES financial and accounting services provided by June 2018	CA	
			ES internal Financial management systems reviewed and implemented by June, 2018	CA	
			Financial resources mobilized by June, 2018	DPME	
		Develop and implement ethics feedback mechanism	Complaints handling system developed and implemented by June, 2018	SPS	
		Institutionalize Performance Management Systems	M&E System developed and implemented by June, 2018.	DPME	
			Strategic Plan Reviewed by June, 2018	DPME	

S/N o	OBJECTIVE	STRATEGY	TARGETS	RESPONSIBLE PERSON	KPI
			Client Service Charter reviewed and implemented by June,2018	DAHRM	