



# OPERATIONAL PLAN 2016-2020

## OFFICE OF THE AUDITOR GENERAL OF NEPAL



#### **Preamble**

The Office of the Auditor General of Nepal (OAGN) has formulated a five-year strategic plan (2016-2020). The purpose of the strategic plan is to ensure that all resources are focused on the most demanding areas, which lead to the creation of value for its stakeholders and thereby contribute to enhance accountability and transparency in the Public Financial Management system in Nepal.

The strategic plan has set the vision, mission, strategic imperatives and objectives for the next five years. The plan has key performance indicators defined for each strategic objective to help measure progress, make mid-way corrections, and assess outcome. The plan also identifies the strategic initiatives to achieve the strategic objectives remaining committed to the mission and reach the vision.

Not only to implement strategy but to carry out audit and other support services, OAGN needs to have a system of operational planning. Considering this, the operational plan has been prepared to facilitate implementation of the strategic plan. This plan not only has covered the strategic initiatives and activities but also the routine activities the OAGN has to perform each year. OAGN has developed this operational plan with the technical support of the Office of the Auditor General of Norway. So, OAGN expresses gratitudes to the OAG Norway for technical support.

Every staff member in the office should understand his or her role, and their responsibilities towards achieving the expected results. This plan aims at establish better linkage with strategy and provide guidance to the staffs as to who, what, when, and how to do designated activities for which he/she is responsible.



## Abbreviations of some Names used in this Operational Plan

| AAG<br>AAP | Assistant Auditor General<br>Annual Audit Plan | IDI<br>INTOSAI | INTOSAI Development Initiatives International Organization of Supreme Audit Institutions |
|------------|--|----------------|--|
| AG         | Auditor General                                | IR             | International Relation   |
| AIDS       | Acquired Immune Deficiency Syndrome            | ISSAIs         | International Standards of<br>Supreme Audit Institutions                                 |
| AOP        | Annual Operational Plan                        | IT             | Information Technology   |
| ASOSAI     | Asian Organization of Supreme                  | IT-FMIS        | Information Technology-Financial   |
|            | Audit Institutions                             |                | Management Information System  |
| CAO        | Chief Accounting Officer                       | LMBIS          | Line Ministry Budget Information system  |
| CDO        | Chief District Officer                         | MOF            | Ministry of Finance  |
| CEO        | Chief Executive Officer                        | MOU            | Memorandum of Understanding  |
| COE        | Code of Ethics                                 | NPC            | National Planning Commission   |
| COP        | Calendar of Operation                          | NPSAS          | Nepal Public Sector Accounting Standards   |
| CPA        | Citizen Participatory Audit                    | NRB            | Nepal Rastra Bank  |
| CPI        | Corruption Perception Index                    | O&M            | Organization and Management  |
| CSO        | Civil Society Organizations                    | OAGN           | Office of Auditor General Nepal  |
| DAG        | Deputy Auditor General                         | ОРМСМ          | Office of Prime Minister and Council of Ministers  |
| DG         | Directorate General                            | PA             | Performance Audit  |
| DIR        | Director                                       | PAC            | Public Accounts Committee  |
| DTCO       | District Treasury Controller Office            | PAG            | Performance Audit Guidelines   |
| EWP        | Electronic Working Paper                       | QA             | Quality Assurance  |
| FA         | Financial Audit                                | QC             | Quality Control  |
| FCGO       | Financial Comptroller General Office           | SAIs           | Supreme Audit Institutions   |
| GON        | Government of Nepal                            | SOEs           | State Owned Enterprises  |
| HR         | Human Resource                                 | TNA            | Training Need Assessment   |
| HRD        | Human Resource                                 | TOT            | Training of Trainers   |
|            | Development                                    |                |  |
| IAU        | Internal Audit Unit                            | TSA            | Treasury Single Account  |
| ICAN       | Institute of Chartered                         | VAT            | Value Added Tax  |
|            | Accountants of Nepal                           |                |  |
| ICT        | Information and                                |                |  |
|            | Communication Technology                       |                |  |



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#### **Background**

OAGN has devolved Strategic plan for 2016 to 2020. This Strategic Plan includes foundational elements; vision, Mission, Core Values, five Strategic Imperatives and fifteen Strategic Objectives. To achieve strategic objective, strategic plan has also identified strategic initiatives for all the strategic objectives. The Overview of Strategic Plan is provided in *Annex-1*. To implement strategic initiatives and activities identified in the strategic plan, the OAGN has developed a system of operational planning. The operational plan contains strategic activities as well as regular task of the OAGN.

This operational plan has been prepared holding three days operational planning workshop with the technical support of the Office of the Auditor General of Norway. The workshop was participated by twenty officials including Deputy Auditor General. As an output of the workshop, the Strategic Planning Team finalised the Draft Operational plan which was distributed to all directorates within OAGN for comments and feedback. The plan was finalised considering comments and feedback received from different directorates.

#### **Objective of This Operational Plan**

The prime objective of this plan is to identify activities to implement the strategic plan and other audit and related support services to move towards achievement of mission and vision of the strategic plan. The plan aims to provide better linkage with strategic plan and provide guidance as to who, when and what need to be done regarding to the activities included in the plan.

## **Communication of Operational Plan**

The orientation programme was organised for all the staffs at Divisional Level. All the staffs were provided with printed as well as digital copies of approved operational plan.

The plan was also uploaded into office website.

#### **Current Situation**

#### 1. Internal Environment

Internal environment with which OAGN operating now is discussed below:

#### 1.1 Major Responsibilities

Office of the Auditor General of Nepal (OAGN) receives its mandate through The Constitution of Nepal, 2015. Part 22 of the constitution in Article 240 and 241 contains provisions relating to appointment of Auditor general, terms of office, remuneration, functions, duties and powers of the Auditor-General.

As per this mandate, OAGN is empowered to carry out audits of the accounts of the office of the President and Vice-president, the Supreme Court, Federal Legislature-Parliament, Provincial Parliament, Provincial Government, Local Bodies, Constitutional bodies and their offices, the courts, the Office of the Attorney General, Nepal Army, Nepal Police or Armed Police Force including all federal and provincial government offices in such manner as may be determined by law, with due consideration given to the regularity, economy, efficiency, effectiveness and the propriety thereof.

The constitution requires consulting with Auditor General while appointing auditor of the corporate bodies in which Government or provincial government own more than 50 percent of share or property. The Auditor General may issue directions regarding the principles to be applied in conducting audits of such corporate bodies.

The Auditor General has also a role to approve the formats of accounts to be maintained by the entities to be audited by him.

As per constitutional provision, any other entities may be prescribed to be audited by the Auditor General through making federal law in this regards.

Audit Act, 1991 contains various provisions about audits to be carried out. This law empowers Auditor General to conduct audits of corporate bodies in which government owns 100 percent share.

As per constitution, Auditor General has to submit his annual report to the president. In addition to annual report Auditor General may submit other reports regarding work done by him/her relating to the provinces.

Various other laws contain provisions which empowers Auditor General to conduct audit of the entities governed by those laws. Such laws include Nepal Rastra Bank Act, Nepal Academy of Science and Technology etc.

Based on above discussed constitutional and legal provision, OAGN conducts financial, compliance, performance audits and some specialised audits such as audit of public debts, information technology audit, environmental audit, disaster management audit etc.

#### 1.2 Staff Positions

The leadership structure of the OAGN consists of the AG, four DAGs and 14AAGs. There are four sector wise divisions headed by the DAG, fourteen General Directorates headed by the AAGs and 27 Directorates headed by Directors. The audit of entities is carried out by therespective directorates by a team consisting Directors, Audit Officers, Audit Superintendents and Audit Inspectors as required. The total staff force as on 2015 December end is as follows:

| Class                              | Designation   | Approved posts | Filled position | Vacant positions |
|------------------------------------|---|----------------|-----------------|------------------|
| Special Class                      | Deputy Auditor<br>General   | 4              | 3               | 1                |
| Gazetted 1 <sup>st</sup><br>Class  | Assistant Auditor<br>General  | 14             | 13              | 1                |
| Gazetted 2 <sup>nd</sup> Class     | Director  | 86             | 83              | 3                |
| Gazetted 3 <sup>rd</sup><br>Class  | Audit Officer   | 167            | 144             | 23               |
| Gazetted 3 <sup>rd</sup><br>Class  | Telephone Officer   | 1              | 1               |                  |
| Non-Gazetted 1 <sup>st</sup> Class | Audit<br>Superintendent   | 82             | 72              | 10               |
| Non-Gazetted 1 <sup>st</sup> Class | Computer<br>Operator/ Typist  | 13             | 11              | 2                |
| Non-Gazetted 2 <sup>nd</sup> Class | Audit Inspector   | 25             | 19              | 6                |
| Non-Gazetted 2 <sup>nd</sup> Class | Asst. Computer<br>Operator, Typist<br>Second, Junior<br>Mechanics, Junior<br>Electronics, Canter<br>Assistant | 15             | 9               | 6                |
| Class Less<br>posts                | Driver and Office<br>Assistant  | 41             | 34              | 7                |
|                                    | Total   | 448            | 389             | 59               |

#### 1.3 Financial resources in last three years

Financial resources mobilised by OAGN in last 3 years is as below:

| Year                | 203    | 12/13   | 2013/  | 14      | 2014/15 |         |  |  |
|---------------------|--------|---------|--------|---------|---------|---------|--|--|
|                     | Budget | Actual  | Budget | Actual  | Budget  | Actual  |  |  |
| Recurrent<br>Budget |        | 200,728 |        | 296,088 |         | 308,297 |  |  |
| Capital<br>Budget   |        | 5,988   |        | 25,256  |         | 33,222  |  |  |
| Total               |        | 206,716 |        | 321,344 |         | 341,519 |  |  |

#### 1.4 Physical Infrastructures available

Major physical infrastructure and other facilities available with OAGN are as follows:

| S.n. | Description of Infrastructure/ facility | Measure<br>ment Unit | Total in measured unit | Remarks                         |
|------|---|----------------------|------------------------|---------------------------------|
| 1    | Land                                    | Ropani               | 10-13-1-2              | Ropani                          |
| 2    | Building                                | Unit                 | 4                      | 3 Owned, 1 rent                 |
| 3    | Vehicle by types                        | Count                | 28                     | 1 Bus, 1 Van, 4<br>Jeep, 22 Car |
| 4    | Computer/ Laptops                       | Count                | 542                    | 204 Desktops, 338<br>Laptops    |
| 5    | Network by types                        | 10 MB                | Fiber Optical          | Broadband/<br>LAN/WAN           |

#### 2. External Environment

External environment which influence, directly or indirectly, the performance of the OAGN are discussed below:

#### 2.1 Current constitutional and legal environment

Newly promulgated Constitution, 2015 has adopted federal structure of government. This will require OAGN to extend its office wings in provinces. The constitution has also given extended mandated to the OAGN specially mandate of auditing local

bodies; municipality and Village Councils. These new provisions in constitution will require OAGN to have defined policies to cater with it.

#### 2.2 Political and Regulatory

- > Inadequate financial independence
- Lack of authority to allocate budget in budget heads
- > Extended mandate of audit under the new Constitution
- ➤ No effective actions taken by auditees on audit observations

#### 2.2 Socio- cultural

- > Increasing expectations of people from the auditor
- ➤ Increasing interest of civil society organizations (CSO) and general public in OAGN's audit
- ➤ Inadequate interest of competent people to join audit service

#### 2.4 Technological

- > Greater use of e-governance by government agencies
- ➤ Adoption of rapidly changing information technology
- Manual accounting systems replaced by computerized environment

#### 2.5 Economic

- Increasing volume and nature of government expenditure
- Inadequate budget allocation to OAGN
- New changes in public financial management resulting from Nepal Public Sector Accounting Standards (NPSAS), Treasury Single Accounts (TSA) and Information Technology- Financial Management Information System (IT-FMIS)
- ➤ Corruption perception index (CPI), implying a high perceived corruption in the country
- Leakage of financial resources in government entities
- ➤ Global trend in public sector auditing for compliance with International Standards of Supreme Audit Institutions (ISSAIs)

#### 2.6 Environmental

- ➤ Increasing trend of natural disaster like earthquake
- ➤ Increased public awareness regarding environmental issues
- > Degradation of ecological balance

➤ Emerging diseases like Acquired Immune Deficiency Syndrome (AIDS), Swine Flu, Ebola and other epidemics

#### **Activities Planned**

#### 1. Activities planned to implement Strategic Plan

Based on broader participation, engagement and consultation with the relevant staffs, various activities have been identified and put together forming an Operational Plan 2016-2020 to implement the Strategic Plan 2016- 2020.

The Implementation Matrix is provided in *Annex-2*.

#### 2. Audit and other Support Activities

Each Division, Directorate General and Directorates have prepared audit and related routine nature activities in addition to the activities identified and required to implement strategic plan as discussed in previous section.

Details of such activities are as follows:

#### 2.1 Audit related activities

OAGN prepares annual audit plan along with annual audit calendar. This plan is communicated to ministries and central level agencies and they are requested to communicate audit calendar to the lower level offices under them. All audit Division, Directorate General and Directorate prepare ministry level and engagement level audit plan to implement annual audit plan. These plans discuss about entities to be audited (including backlogs) for major types of audit; financial, performance and compliance and other specialised audits, time schedule, major areas to focus, certification of project financial statements of donor funded projects.

Annual Audit Plan for each year is prepared separately and available in office website

#### 2.2 Financial Administration

Following are the tasks, *in addition to those identified in strategic initiatives*, the Financial Administration Directorate has to perform regularly.

#### a) Work related to budgeting:

- Fomulation of draft budget for next year.
- Recieve budget celling from NPC then formulation of budget in LMBIS for next year.
- Participation in disscussion of budget with MoF.
- Recieve authorisation of budget expenditure.
- Approval of annual program from NPC.

#### b) Work related to Expenditure:

• Estimate and send monthly expenditure limit to the DTCO.

- Send payment order to DTCO.
- Reveice cheque from DTCO and collect them in NRB or payment to respective parties.
- Prepare monthly salary sheet, payment of salary and send salary indifferent bank account of personnels.
- Tax calculation, tax deduction and collection of tax in respective account head through bank.
- Prepare income statement of entire personnel individually.
- Send VAT deduction statement to respective tax offices.
- Make public of more than 25000.00 of expenditure through OPMCM website.
- Conduct internal audit through appointed audit team.
- Conductexternal auditthrough appointed audit team.
- Advance payment and settlement of TADA.
- Revision of program, expenditure approval, Budget transfer and source transfer of budget.

#### c) Work related to reporting:

- Prepare monthly, trimester & annual report and send them to NPC, MoF & DTCO.
- Posting central financial statement in DTCO & FCGO.
- Prepare NPSAS.

#### d) Other:

- Role play as a member of evaluation committee, gender responsible budget committee etc.
- Give financial opinion.
- Participation in different meeting, training & Seminar.
- Forms, cards attestation and related work of Employee Provident Fund & Citizen Investment Trust Fund.

#### 2.3 General Administration

Following are the tasks, *in addition to those identified in strategic initiatives*, the General Administration Directorate has to perform regularly.

- a) Personnel Administration; communicating Ministry of finance, ministry of general administration and public service commission regarding the vacant post, communicating department of civil personnel records placement of personnel
- b) Public relation; Grievances handling, providing information and co-ordinating all the directorates
- c) procurement of goods and services; making annual procurement plan, procuring as
  per the decision of procurement unit, distributing the required materials to the
  respective directorates

- d) store and housekeeping administration; planning, organizing, staffing, directing, controlling, coordinating, monitoring record keeping
- e) security; scheduling the security- external Nepal police Staff and internal staff
- f) sanitation; assigning the cleaning duty and monitoring
- g) Record keeping and tendering the necessary documents; Arranging the personal files of all the staffs and updating, tendering out the unwanted document
- h) Implementation of O&M reports; making O&M planning
- i) supervising, directing and controlling the staffs; Assigning duty and monitoring, rewarding the staffs, punishment to the staffs, maintaining discipline, dress code.
- j) coordinating and correspondence to the related ministries
- k) Vehicle management; procurement of vehicles, placement of drivers and maintenance of vehicles and operation

#### 2.4 Human Resource Development

Following are the tasks, *in addition to those identified in strategic initiatives*, the HRD Directorate has to perform regularly.

- a) Arrange for In- service training to the staffs
- b) Arrange for/ or conduct Continuous Professional Education programmes
- c) Conduct Refresher training
- d) Call for, select and nominates staffs for professional and other courses (e.g. CA, EMBA)
- e) Participate in national, regional and international training, workshop/ seminar
- f) Conduct training on Quality Assurance in Auditing
- g) Arrange/ organise interaction programme with external stakeholders
- h) Arrange/ conduct Sectoral audit training including Performance Audit
- i) Arrange Audit exposure visits
- j) Arrange training related to inter-personal skills

#### 2.5 International Relations (IR)

Following are the tasks, *in addition to those identified in strategic initiatives*, the International Relation Directorate has to perform regularly.

- a) Participate in ASOSAI Sponsor Workshop.
- b) Participate in ASOSAI Seminar
- c) Renewal of ASOSAI Membership
- d) Enhance Relation with other SAIs
- e) Renewal of INTOSAI Membership
- f) Participate in IDI Programs (as and when invitation receipt)

- g) Prepare/ send Seasons Greetings, congratulation letters to newly appointed head of SAIs etc.
- h) IdentifySAIs to establish new relation

#### 2.6 Quality Assurance

Following are the tasks, *in addition to those identified in strategic initiatives*, the QA Directorate has to perform regularly.

- a) Acquire the description of audit completion files from directorates
- b) Determine the number of files for quality review
- c) Collect the proposed files for quality review
- d) Conduct quality reviews of selected audit files
- e) Prepare quality review report
- f) Communicate quality review report up to directorates
- g) Conduct evaluation of implementation status of quality review report
- h) Manage the meetings of quality assurance committee
- i) Operation and coordination of quality assurance trainings

#### 2.7 Parliamentary Relations

Following are the tasks, *in addition to those identified in strategic initiatives*, the Parliamentary Relation Directorate has to perform regularly.

- a) Coordinate to conduct interaction program with PAC
- b) Coordinate with PAC to determine the schedules for the discussion on OAG annual report
- c) Acquire and provide PAC decision report to directorates

#### 2.8 Communications and relations with external Stakeholders

The OAGN has dedicated spokesperson, assistant spokesperson. Similarly Information officer and assistant information are also assigned with duties and responsibilities. These officials communicate with external stakeholders in addition to the responsibilities specified in Good-Governance (Operation and Management) Act, 2063 and Right to Information Act, 2063.

#### 2.9 Others

Other activities, not specifically covered above, are performed as directed by the Auditor General as and when need arises.

## **Risk Assessment and Risk Mitigation Measures**

Risk to achieve expected results have been identified, assessed and responded as appropriate. Risks have been mentioned for each activity, if any. Responsible person or unit within OAGN have to plan mitigation measures to respond assessed risks and document appropriately. Major Risks identified in common, and how plan aims to respond them are as follows:

| S.n. | Description of Risks  | Reference to<br>Related activities                           | Response to risk  |
|------|---|--|---|
| 1    | Tone at the top   | Most of the activities                                       | "Top level ownership to ensure<br>success" will always be put as one<br>of the agendas in every staff<br>meeting  |
| 2    | Lack of enough Budget   | Most of the activities                                       | Timely monitoring, reporting of<br>budget planning and execution<br>and timely coordination with MoF<br>and other related government<br>agencies                      |
| 3    | Delay in decision Making  | Most of the activities                                       | Management will always evaluate<br>the consequences of delayed<br>decision  |
| 4    | Lack of coordination<br>between directorates and<br>with auditee entities | Most of the activities                                       | Monthly staff meeting chaired by AG will discuss any issue raised therein. Each directorate will establish effective communication with the related auditee entities. |
| 5    | Political Support   | Activities relating to financial and Administrative Autonomy | Greater interaction and consultation through Public Accounts Committee of the Legislature-Parliament  |

While preparing monthly, quarterly and yearly progress report, responsible person/unit shall describe whether any new risks were emerged during implementation of the plan and how they were dealt with.

### **Monitoring Mechanism**

#### 1. Formation of a Monitoring committee

A high level monitoring committee under chairmanship of Senior Deputy Auditor General will be formed to monitor the implementation status of this operational plan. The Committee will include:

Senior Deputy Auditor General - Chair

Other Deputy Auditor Generals - Member

Assistant Auditor General, Management – Member

Assistant Auditor General, Planning and Monitoring – Member

Director, Planning and Monitoring – Member Secretary

#### 2. Roles and responsibilities of the committees

A separate procedural guideline has been prepared and approved to regulate the duties, responsibilities and rights of the monitoring committee.

#### 3. Reporting Requirements

- a) While preparing annual budget, the Financial Administration Directorate shall consult to responsible persons/directorate and prepare budget considering the activities mentioned in implementation matrix.
- b) The Monitoring Committee will hold its meeting in trimester basis.
- c) Every responsible person/ unit identified in this plan has to prepare quarterly and annual progress report and submit to the committeereferred above within a month of expiry of period specified. This provision will not restrict responsible person/ unit to prepare Progress statement of implementation on monthly basis and make it available to be discussed or notified in monthly staff meeting chaired by the Auditor General.
- d) Upon receipt of progress report, the committeereferred aboveshould compile it and present it at the staff meeting chaired by the AG.
- e) The staff meeting shall discuss on the compiled progress report and make necessary decisions as appropriate.
- f) The Progress Report should be prepared in the template provided in Annex-3
- g) Responsible person/unit shall be notified the decision taken at staff meeting regarding the progress report on operational plan.

## **ANNEXES**

## Annex-1 Overview of Strategic plan

## **Mission**

Provide Independent and Quality Audit Service to assure our stakeholders that the public funds are efficiently used.



## **Core Values**

- \* Integrity
- \* Independence
- \* Professionalism
- \* Transparency
- \* Accountability

## **Vision**

We strive to be a

Credible Institution in

Promoting

Accountability,

Transparency and
Integrity for the benefit

of the people.



## **STRATEGIC IMPERATIVES (SI)**

| • | ı | -1 |
|---|---|----|
|   |   |    |

Improve Quality and Impact of Audit

#### SI-2

Strengthen Independence and Mandate

#### SI-3

Develop Organizational Capacity

#### SI-4

Enhance Professional Relations with

#### SI-5

Enhance Internal Governance

#### Strategic Objectives

- 1.1. Implement
  audit
  methodology
  aligned with
  International
  Standards of
  Supreme Audit
  Institutions
- 1.2. Strengthen
  Quality
  Assurance
  Function
- 1.3. Strengthen Follow-up Audit

#### Strategic Objectives

- 2.1 Achieve Financial Autonomy
- 2.2 Achieve Administrative Autonomy
- 2.3 Improve Audit Mandate

#### Strategic Objectives

- 3.1 Develop and Implement HRD Strategy
- 3.2 Redesign
  Organizational
  Strategy to
  address
  federal
  structure and
  extended
  Audit Mandate

#### Strategic Objectives

- 4.1 Ensure Regular and Effective Communication using ICT
- 4.2 Improve Interaction with Media and Public
- 4.3 Building an
  Effective
  Relationship
  with PAC
- 4.4 Strengthen
  Professional
  Relations with
  Auditees and

#### Strategic Objectives

- 5.1 Strengthen Internal Control System
- 5.2 Ensure
  Compliance
  with Code of
  Ethics
- 5.3 Implement
  Strategy
  through
  Operational
  Plans

Annex- 2: Operational Plan Implementation Matrix (Strategic Imperative wise)

|         |   |  |  |                  |   |      |      |          |      |      |                     | 'Rs in 000'                    |
|---------|---|--|--|------------------|---|------|------|----------|------|------|---------------------|--------------------------------|
| 1       | Imperative:                                       | Improve Quality a  | nd Impact of A   | udit             |   |      |      |          |      |      |                     |                                |
| 1.1     | Objective:  | Implement Audit N  | Methodology a  | ligned with inte | ernational standards  |      |      |          |      |      |                     |                                |
| 1.1.1   | Initiative:                                       |  | Develop/Modify electronic working papers to align with requirements of audit manuals  Expected Output: New/Modified EWP aligned to require |                  |   |      |      |          |      |      | ement of aud        | it manuals                     |
| 6.11    |   |  | Roles and Re   | esponsibilities  | Performance   |      | Ti   | me fram  | ne   |      |                     | D'.I                           |
| S.N.    | A   | ctivities  | Execution  | Monitoring       | Indicator   | 2016 | 2017 | 2018     | 2019 | 2020 | Resources           | Risk                           |
| 1.1.1.1 |   | cial audit manual and<br>Print and digital) of<br>all audit staffs | DIR, Admin.  | AAG, Mgmt.       | FA Manual communicated  | Jun  |      |          |      |      | 500                 | Delay in approval and printing |
| 1.1.1.2 | Determine con<br>strategic entiti<br>engagement u |  | AAG, HR  | DAG, Mgmt.       | Policy  | Jul  |      |          |      |      | 100                 |                                |
| 1.1.1.3 | Establish syste ICT Manageme                      | m Administrator for<br>ent   | DIR, Admin.  | AAG, Mgmt.       | System Administrator in place                                       | May  |      |          |      |      | 10000               |                                |
| 1.1.1.4 |   | ing and strategic<br>Induct audits using                           | All DIR  | ALL AAGs         | 2016- 74 units<br>2017-25%<br>2018- 50 %<br>2019- 75%<br>2020- 100% | Jul  | Jul  | Jul      | Jul  | Jul  | Recurrent<br>budget |                                |
| 1.1.1.5 | Receive feedba<br>EWP usage                       | ack from Auditors on   | All DIR  | ALL AAGs         | identification of problem   |      | C    | ontinuou | S    |      | 100                 |                                |
| 1.1.1.6 | Update EWP a                                      | s per requirements   | DIR, HR  | AAG, HR          | updated ewp   |      | Jul  |          |      |      | 5000                | ownership                      |
| 1.1.1.7 | Add features in audits                            | n EWP to suit for SOE  | DIR, SOEs  | AAG, SOEs        | EWP Ready for execution   |      | Apr  |          |      |      | 10000               | Delay                          |
| 1.1.1.8 | Perform piloting using EWP                        | ng on SOEs audits  | DIR, SOEs  | AAG, SOEs        | At least 2 SOE by OAGN  |      | Jul  | Jul      |      |      | Recurrent<br>budget | Quality                        |
| 1.1.1.9 | Implement EW                                      | /P in all SOEs Audit   | DIR, SOEs  | AAG, SOEs        | 2018- 25%<br>2019-60%<br>2020-100%                                  |      |      | Jul      | Jul  | Jul  | 100                 | Quality                        |

| 1.1.2   | Initiative:   | Train auditors in us                          | e of the EWP |                 | Expected Output:   | Auditors capable of properly using the EWP |      |         |      |      |           |                                      |
|---------|---|---|--------------|-----------------|--|--|------|---------|------|------|-----------|--------------------------------------|
| S.N.    | A   |   | Roles and Re | esponsibilities | Performance  |  | Ti   | me fram | ie   |      | Dagauraga | D: 1                                 |
| 3.IV.   | <b>'</b>  | Activities                                    |              | Monitoring      | Indicator  | 2016                                       | 2017 | 2018    | 2019 | 2020 | Resources | Risk                                 |
| 1.1.2.1 | Include EWP T                                       | Training In OAG                               | DIR, HR      | AAG, HR         | Approval Of calendar   | May  | May  | May     | May  | May  | General   | Delay                                |
| 1.1.2.2 | Conduct On the job Training including SOEs Auditors |   | DIR, HR      | AAG, HR         | 2016-80 nos.<br>2017-80 nos.<br>2018-80 nos.<br>2019-80 nos.<br>2020-80 nos. | Jun  | Jun  | Jun     | Jun  | Jun  | 5000      | Budget, Time and<br>Training Quality |
| 1.1.2.3 | 1 · · · · · · · · · · · · · · · · · · ·             | nuous support from<br>oper until EWP is fully | DIR, HR      | AAG, HR         | Continuous Support   |  |      | Regular |      |      | 5400      | Appointment and retention            |

| 1.1.3   | Initiative:                       | Implement audit mo<br>Performance and Co<br>Working Paper (EW | ompliance) wit | •               | Expected Output:                          | Use by all auditors of electronic working papers aligned with requirements of the audit manuals |      |         |      |      |                     | gned with                            |
|---------|-----------------------------------|---|----------------|-----------------|---|---|------|---------|------|------|---------------------|--------------------------------------|
| C NI    |                                   | Activities  | Roles and Re   | esponsibilities | Performance                               |   | Ti   | me fram | e    |      | D                   | Diek                                 |
| S.N.    |                                   | cuviues   | Execution      | Monitoring      | Indicator                                 | 2016  | 2017 | 2018    | 2019 | 2020 | Resources           | Risk                                 |
| 1.1.3.1 | Carry out all fi<br>FA manual.    | nancial audit using   | All DIR        | ALL AAGs        | FA Manual<br>Implemented                  |   | Jul  | Jul     | Jun  | Jul  |                     | Quality                              |
| 1.1.3.2 | Study for Sepa<br>and Financial   | arating Compliance<br>Audit                                   | DIR, HR        | AAG, HR         | Study Report                              |   |      | Dec     |      |      | 500                 | Clarity on policy                    |
| 1.1.3.3 | Develop traine<br>for financial A | ers to provide training udit.                                 | DIR, HR        | AAG, HR         | At least 20 Auditor will get TOT Annually | Jun   | Jun  | Jun     | Jun  | Jun  | 1000                | Budget, Time and<br>Training Quality |
| 1.1.3.4 | Provide trainir financial audit   | ng to all auditors on<br>manual.                              | DIR, HR        | AAG, HR         | 80 auditor annually                       | Jun   | Jun  | Jun     | Jun  | Jun  | 5000                | Training Venue                       |
| 1.1.3.5 | Update PA gui<br>international s  |   | DIR, PA        | AAG, PA         | Updated PAG                               |   | Jun  |         |      |      | 500                 |                                      |
| 1.1.3.6 | Conduct PA as guide               | per updated PA  | DIR, PA        | AAG, PA         | Audit as per PAG                          |   | Aug  |         |      |      | Recurrent<br>budget | Trained HR                           |
| 1.1.3.7 | Conduct speci<br>Environment,     | alized audit (IT,<br>Disaster)                                | DIR, PA        | AAG, PA         | Specialized audit conducted               | Feb   | Feb  | Feb     | Feb  | Feb  | 7500                | Topic Selection &<br>Trained HR      |

| 1.1.4   | Initiative:  | Train auditors on ho<br>impact of audit repo<br>CBC guide on this su | Expected Output: | Auditors who consistently apply the good practice strategie increasing the use and impact of audit reports |                      |      |      |         |      | strategies for |           |                          |
|---------|--|--|------------------|--|----------------------|------|------|---------|------|----------------|-----------|--------------------------|
| C N     |  |  | Roles and R      | esponsibilities  | Performance          |      | Ti   | me fram | e    |                | Dagayyaaa | Dial.                    |
| S.N.    | .N. Activities   |  | Execution        | Monitoring   | Indicator            | 2016 | 2017 | 2018    | 2019 | 2020           | Resources | Risk                     |
| 1.1.4.1 | · ·  | ase use and impact of and Reporting                                  | DIR, R&D         | AAG, HR  | Study Report         |      | Aug  |         |      |                | 1000      | Pratical Study<br>Report |
| 1.1.4.2 | Decide Policy  | on reporting system  | DIR, R&D         | AAG, HR  | Policy Decided       |      |      | Apr     |      |                |           | Timely Decision          |
| 1.1.4.3 | Prepare and implement guidelines in line with the INTOSAI CBC guide. |  | DIR, R&D         | AAG, HR  | Ready for execution  |      |      | Jan     | Jan  | Dec            | 500       | Delay and implementable  |
| 1.1.4.4 | Include Trainir<br>OAGN Training                                     | ng on CBC guide in<br>g Calendar                                     | DIR, HR          | AAG, HR  | Approval Of calendar | May  | May  | May     | May  | May            | 500       |                          |

| 1.1.5   | Initiative:                                      | Design and implem                   | ent Local body audit practice |                 | Expected Output:                   | a. Policy document in hand |           |           |          |          |                |                 |
|---------|--|-------------------------------------|-------------------------------|-----------------|------------------------------------|----------------------------|-----------|-----------|----------|----------|----------------|-----------------|
|         |  | Design and implement 2000, body due |                               |                 | Expected Suspensi                  |                            | will be a | audited ( | using Po | licy and | d procedures ( | designed        |
| C NI    |  | ativiti a a                         | Roles and Ro                  | esponsibilities | Performance                        |                            | Ti        | me fram   | e        |          | ,              | Diele           |
| 5.IV.   | S.N. Activities                                  |                                     | Execution                     | Monitoring      | Indicator 2016 2017 2018 2019 2020 |                            | 2020      | Resources | Risk     |          |                |                 |
| 1.1.5.1 | Hire Experts to                                  | study on LG Audit                   | DIR, Admin.                   | AAG, Mgmt.      | Experts Hired                      | Mar                        |           |           |          |          | 1500           | Pratical Report |
| 1.1.5.2 | Decide on LG A                                   | Audit Policy                        | DIR, Admin.                   | DAG, Mgmt.      | Policy Decided                     | Jul                        |           |           |          |          | 100            | Delayed         |
| 1.1.5.3 | Develop and update the local level audit manual. |                                     | DIR, HR                       | AAG, HR         | Manual<br>Developed/Updated        | May                        |           |           |          |          | 500            | Delayed         |
| 1.1.5.4 | Conduct LG Au<br>manual.                         | idit as per policy and              | DIR, LG                       | AAG, LG         | LG Audited                         | Aug                        |           |           |          |          | 50000          | Delayed         |

| 1.1.6   | Initiative:     | Change current tran               |              | reporting into  | Expected Output:  | Policy 1 | vill be a | levelope | d and A | udit Rep | oorts will incl | ude systemic   |
|---------|-----------------|-----------------------------------|--------------|-----------------|-------------------|----------|-----------|----------|---------|----------|-----------------|----------------|
| 1.1.0   | iiiidadive.     | reporting on system               | nic issues   |                 | Expected Output.  | issues   |           |          |         |          |                 |                |
| S.N.    | ^               | ctivities                         | Roles and Ro | esponsibilities | Performance       |          | Ti        | me fram  | ie      |          | Resources       | Risk           |
| 3.14.   | A               | Ctivities                         | Execution    | Monitoring      | Indicator         | 2016     | 2017      | 2018     | 2019    | 2020     | Resources       | VISK           |
| 1.1.6.1 | Prepare guidel  | Prepare guideline determining the | DIR, R&D     | AAG, HR         | Identification of |          |           | Jun      |         |          | 500             | Commitment and |
| 1.1.0.1 | systemic issues | 5.                                | DIN, NQD     | AAG, TIK        | Issues            |          |           | Juli     |         |          | 300             | Capacity       |
| 1.1.6.2 | Implement Gui   | idelines for Systemic             | All DIR      | ALL AAGs        | Systemic Issues   |          |           | Regular  |         |          |                 | Commitment and |
| 1.1.0.2 | Issues Reportir | ng.                               | All DIK      | ALL AAGS        | Reported          |          |           | negulai  |         |          |                 | Capacity       |

| 1.2     | Objective:              | Strengthening Qual   | lity Assurance  | Function                     |                   |                   |      |         |      |      |           |                         |  |  |
|---------|-------------------------|--|---|------------------------------|-------------------|-------------------|------|---------|------|------|-----------|-------------------------|--|--|
| 1.2.1   | Initiative:             | Enhance competence quality, quality cont in line with the ISSA on quality assurance performance audits | rols, and quali<br>Is and the OAG<br>e in financial a | ty assurance<br>SN handbooks | Expected Output:  | quality assurance |      |         |      |      |           |                         |  |  |
| S.N.    |                         | ctivities  | Roles and Ro  | esponsibilities              | Performance       |                   | Ti   | me fram | ie   |      | Resources | Risk                    |  |  |
| 3.IV.   |                         | ctivities  | Execution   | Monitoring                   | Indicator         | 2016              | 2017 | 2018    | 2019 | 2020 | Resources | NISK                    |  |  |
| 1.2.1.1 | Prepare trainir and QA. | ng calendar on QC  | HR&IR Dir   | AAG of HR&IR<br>Dir          | Calendar Prepared | May               |      |         |      |      |           | Timely<br>Preparation   |  |  |
| 1.2.1.2 | _                       | liver the training to QC and QA.   | HR&IR Dir   | AAG of HR&IR<br>Dir          | Trained Auditors  |                   |      | Regular |      |      | 500       | Impractical<br>Training |  |  |

| 1.2.2   | Initiative:                                | Link implementatio<br>PBIS and performa | -                              | mendations to                    | Expected Output:             | QA recommendations and Increased implem<br>QA recommendations  Time frame |      |         |      |         |             | olementation of             |
|---------|--|---|--------------------------------|----------------------------------|------------------------------|---|------|---------|------|---------|-------------|-----------------------------|
| CN      |  | aki diki a a                            | Roles and R                    | esponsibilities                  | Performance                  |   | Ti   | me fram | e    |         | Dagarinaga  | Diele                       |
| S.N.    | A  | activities                              | Execution                      | Monitoring                       | Indicator                    | 2016  | 2017 | 2018    | 2019 | 2020    | Resources   | Risk                        |
| 1.2.2.1 | Change the PB<br>with QA hand              | IS indicators in line<br>book.          | QC&QA Dir.<br>And Mgmt<br>Dir. | AAG of<br>QC&QA and<br>Mgmt Dir. | Changed Indicator            | Jun Jun   |      |         |      | General | Not Changed |                             |
| 1.2.2.2 | Provide QA res                             | sults to all                            | QC&QA Dir.<br>And Mgmt<br>Dir. | AAG of<br>QC&QA and<br>Mgmt Dir. | Get Informed                 | Regular   |      |         |      |         | General     | May not be informed in time |
| 1.2.2.3 | Make policy de results with pe evaluation. | ecision to link QA<br>erformance        | QC&QA Dir.<br>And Mgmt<br>Dir. | AAG of<br>QC&QA and<br>Mgmt Dir. | Policy decided and<br>linked |   | May  |         |      |         | 100         | May not be linked           |
| 1.2.2.4 |  | mance evaluation of<br>I on QA results. | QC&QA Dir.<br>And Mgmt<br>Dir. | AAG of<br>QC&QA and<br>Mgmt Dir. | Staffs Evaluated             |   | July |         |      |         | 200         | Improper<br>Evaluation      |
| 1.2.2.5 | Award the bes each year.                   | t five performers                       | Mgmt Dir.                      | DAG and AAG of Mgmt Dir.         | Staffs Awarded               | Regular   |      |         |      | _       | 500         | May not be awarded          |

| 1.2.3   | Initiative:                     | Design and impleme<br>mechanism by each<br>results of QA |                                | •                                | Expected Output:       |         | Plan pro<br>director | •       | in stand | dardized | l template an                   | d implemented |
|---------|---------------------------------|--|--------------------------------|----------------------------------|------------------------|---------|----------------------|---------|----------|----------|---------------------------------|---------------|
| CN      |                                 | ctivities  | Roles and Ro                   | esponsibilities                  | Performance            |         | Ti                   | me fram | ie       |          | Восоливов                       | Diele         |
| S.N.    | A                               | ctivities  | Execution                      | Monitoring                       | Indicator              | 2016    | 2017                 | 2018    | 2019     | 2020     | Resources                       | Risk          |
| 1.2.3.1 | Communicate staffs.             | QA results to all  | QC&QA Dir.<br>And Mgmt<br>Dir. | AAG of<br>QC&QA and<br>Mgmt Dir. | Result<br>Communicated | Regular |                      |         |          | General  | May not be communicated in time |               |
| 1.2.3.2 | Make a plan by address the re   | y each directorate to sult of QA.                        | All<br>Directorate             | AAG of All<br>Directorate        | Plan Made              | July    | July                 | July    | July     | July     | 200                             | Delayed       |
| 1.2.3.3 | Supervise each quality of the a | audit to ensure the audit.                               | All<br>Directorate             | AAG of All<br>Directorate        | Audit Supervised       | Regular |                      |         |          |          | Insufficient<br>Supervision     |               |

| 1.2.4   | Initiative:                         | Design and Implement system | ent pre issuan     | ce review                 | Expected Output:  | Detail : | system i | laid dow | n and p | re-issua  | nce review in | itiated               |
|---------|-------------------------------------|-----------------------------|--------------------|---------------------------|-------------------|----------|----------|----------|---------|-----------|---------------|-----------------------|
| C NI    | S.N. Activities                     | Roles and Ro                | esponsibilities    | Performance               |                   | Ti       | me fram  | ie       |         | Возошнооз | Diele         |                       |
| 3.IV.   | A                                   | ctivities                   | Execution          | Monitoring                | Indicator         | 2016     | 2017     | 2018     | 2019    | 2020      | Resources     | Risk                  |
| 1.2.4.1 | Prepare pre issuance review policy. |                             | QC&QA Dir          | AAG of<br>QC&QA           | Policy Documented |          |          | Jun      |         |           | 300           | Impractical Policy    |
| 1.2.4.2 | Implement the                       | policy.                     | All<br>Directorate | AAG of All<br>Directorate | Implemented       |          |          |          | Oct     | Oct       | 500           | Lack of<br>Commitment |

| 1.2.5   | Initiative:                   | Initiate a system for | r rogular ovtor | nal poor rouiow | Expected Output: | Externo | al peer r | eviews d | conduct | ed as pe | er approved f | requencyPeer       |
|---------|-------------------------------|-----------------------|-----------------|-----------------|------------------|---------|-----------|----------|---------|----------|---------------|--------------------|
| 1.2.5   | ilitiative.                   | miliate a system joi  | regular exteri  | iui peei review | Expected Output. | review  | report i  | mpleme   | nted    |          |               |                    |
| CN      | S.N. Activities               | ativiti a a           | Roles and Re    | esponsibilities | Performance      |         | Ti        | me fram  | e       |          | Danassimana   | D:-I-              |
| 5.IV.   | A                             | ctivities             | Execution       | Monitoring      | Indicator        | 2016    | 2017      | 2018     | 2019    | 2020     | Resources     | Risk               |
| 1.2.5.1 | Prepare an ext                | ernal peer review     | QC&QA Dir       | AAG of          | Policy made      |         |           | Jun      |         |          | 300           | Impractical Policy |
| 1.2.3.1 | policy.                       |                       | QCQQA DII       | QC&QA           | Policy made      |         |           | Juli     |         |          | 300           | impractical Policy |
| 1252    | 1.2.5.2 Implement the policy. | nolicy                | All             | AAG of All      | Implemented      |         |           |          | Pogular |          | 500           | Lack of            |
| 1.2.5.2 | implement the                 | e policy.             | Directorate     | Directorate     | implemented      |         |           |          | Regular |          | 500           | Commitment         |

| 1.3     | Objective:                    | Strengthen the Foll                                    | low-up Audit        |                   |  |         |               |         |      |      |                                 |                    |
|---------|-------------------------------|--|---------------------|-------------------|--|---------|---------------|---------|------|------|---------------------------------|--------------------|
| 1.3.1   | Initiative:                   | Strengthen the Follo                                   | ow-up Audit         |                   | Expected Output:                         | require | d<br>t recomi |         |      |      | dment in rela<br>ed as a result |                    |
| C NI    |                               | ctivities  | Roles and Ro        | esponsibilities   | Performance                              |         | Ti            | me fram | e    |      | Dosauros                        | Risk               |
| S.N.    | A                             | cuvities   | Execution           | Monitoring        | Indicator                                | 2016    | 2017          | 2018    | 2019 | 2020 | Resources                       | KISK               |
| 1.3.1.1 | Develop imple proactive follo | mentation plan for w up.                               | HRD Dir.            | AAG<br>Management | Plan Developed                           | March   |               |         |      |      | 1000                            | Delayed            |
| 1.3.1.2 | Implement the                 | ment the plan  All AA  Directorate dire                |                     |                   | Plan Implemented                         |         |               | Regular |      |      | 2500                            | Delayed            |
| 1.3.1.3 |                               | ive follow up<br>oposed financial<br>: and Regulations | Mgmt &<br>HR&IR Dir | DAG<br>Management | Updated Procedural<br>Act and regulation |         | Mar           |         |      |      |                                 | May not be updated |

| 1.3.2       | Initiative:      | Prepare database o     | f audit observa | ntions and PAC  | Expected Output:    | Regulo | arly upd | ated dat | abase |      |           |                    |
|-------------|------------------|------------------------|-----------------|-----------------|---------------------|--------|----------|----------|-------|------|-----------|--------------------|
| S.N.        |                  | ctivities              | Roles and Re    | esponsibilities | Performance         |        | Tir      | me fram  | e     |      | Resources | Risk               |
| J.1V.       | A                | ctivities              | Execution       | Monitoring      | Indicator           | 2016   | 2017     | 2018     | 2019  | 2020 | Resources | VISK               |
| 1321        |                  | g database of audit    | All             | AAG of all      | Database updated    |        |          | Jun      |       |      | 10000     | Delayed and not    |
| 1 1 3 / 1 1 | findings of pre  | liminary audit report. | Directorate     | directorate     | Database updated    |        |          | Juli     |       |      | 10000     | updated            |
| 1.3.2.2     | Fix a cutoff dat | te to carry out follow | All             | AAG of all      | Date fixed          |        |          | Jun      |       |      |           | May not be fixed   |
| 1.3.2.2     | up audit on pa   | per.                   | Directorate     | directorate     | Date lixeu          |        |          | Juli     |       |      |           | iviay not be fixed |
| 1.3.2.3     | Collect and dig  | itize the PAC          | Mamt Dir        | DAG             | Decisions collected |        |          | lun      |       |      | 500       | May not be         |
| 1.3.2.3     | Decisions.       |                        | Mgmt Dir.       | Management      | and digitized       |        |          | Jun      |       |      | 300       | collected          |

| 1.3.3   | Initiative:               | Establish the system information on audi | , ,       |                      | Expected Output:    |         |      | clearand<br>seauent | •    |      | it planning |                  |
|---------|---------------------------|--|-----------|----------------------|---------------------|---------|------|---------------------|------|------|-------------|------------------|
| S.N.    | Λ                         | ctivities                                |           | esponsibilities      | Performance         | 2111170 |      | me fram             |      |      | Resources   | Risk             |
| 3.14.   | ^                         | ctivities                                | Execution | Monitoring           | Indicator           | 2016    | 2017 | 2018                | 2019 | 2020 | Resources   | VISK             |
| 1.3.3.1 | Prepare guidel settlement | ines for online                          | HRD Dir.  | AAG of HR&IR<br>Dir. | Guidelines Prepared |         |      | May                 |      |      | 500         | Delayed          |
| 1.3.3.2 | Prepare softwa            | are for online                           | HRD Dir.  | AAG of HRD           | Software built      |         |      | May                 |      |      | 10000       | may not be built |

|   |       | settlement of audit findings.                           |            | Dir.                 |                  |  |         |     | in time or not appropriate |
|---|-------|---|------------|----------------------|------------------|--|---------|-----|----------------------------|
| 1 | 3.3.3 | Provide training for online settlement to all auditors. | HR&IR Dir. | AAG of HR&IR<br>Dir. | Auditors Trained |  | Regular | 700 | Incomplete<br>training     |

| 2       | Imperative:                    | Strengthen Indeper   | ndence and Ma | andate          |                 |      |      |         |      |      |           |                   |
|---------|--------------------------------|--|---------------|-----------------|-----------------|------|------|---------|------|------|-----------|-------------------|
| 2.1     | Objective:                     | Achieve Financial A  | utonomy       |                 |                 |      |      |         |      |      |           |                   |
| 2.1.1   | Initiative:                    | Make legislative arrangement for Financial Autonomy including authority to provide Performance Based incentives (PBIS) to staffs and get allocate lump sum budget allocated to OAGN and power to reallocate lump sum budget into line items as per requirement  Roles and Responsibilities  Expected Output:  OAGN has legal authority to provide incentives to allocate/reallocate budget to line items  Time frame |               |                 |                 |      |      |         |      |      |           | staff, and        |
| C NI    |                                | ativitias  | Roles and Re  | esponsibilities | Performance     |      | Tiı  | me fram | е    |      | Doggungag | Diele             |
| S.N.    | A                              | ctivities  | Execution     | Monitoring      | Indicator       | 2016 | 2017 | 2018    | 2019 | 2020 | Resources | Risk              |
| 2.1.1.1 | Initiate Legal re<br>Autonomy  | eform for financial  | AAG, Mgmt.    | DAG, Mgmt.      | Legal Provision | Jun  |      |         |      |      |           | Political Support |
| 2.1.1.2 | Solicit support get approval o | from GON/ PAC to<br>n Audit Act.   | AAG, Mgmt.    | DAG, Mgmt.      | Legal Provision | Jun  |      |         |      |      |           | Political Support |

| 2.2     | Objective:                      | Achieve Administra                       | ative Autonom | у               |                  |         |          |          |           |          |              |                   |
|---------|---------------------------------|--|---------------|-----------------|------------------|---------|----------|----------|-----------|----------|--------------|-------------------|
| 2.2.1   | Initiative:                     | Get amended the C<br>to administration o | · ·           | •               | Expected Output: | Nepal / | Audit Se | rvices w | ill be ac | dministe | ered by OAGN | ı                 |
| C NI    | Δ.                              | ctivities                                | Roles and Re  | esponsibilities | Performance      |         | Ti       | me fram  | ie        |          | Resources    | Diele             |
| S.N.    | A                               | cuvities                                 | Execution     | Monitoring      | Indicator        | 2016    | 2017     | 2018     | 2019      | 2020     | Resources    | Risk              |
| 2.1.2.1 | Propose Legal<br>Administrative | reform for<br>Autonomy of OAG            | AAG, Mgmt.    | DAG, Mgmt.      | Legal Provision  | Jun     |          |          |           |          | 100          | Political Support |
| 2.1.2.2 | Solicit support amend Civil Se  | from GON/ PAC to ervice Act.             | AAG, Mgmt.    | DAG, Mgmt.      | Legal Provision  | Jun     |          |          |           |          | 100          | Political Support |

| 2.2.2   | Initiative:     | Gets power to creat disciplinary professi              | •            |                 | Expected Output:   | OAGN effective |      | ate posit | ions rec | uired to | o carry out its | s functions       |
|---------|-----------------|--|--------------|-----------------|--------------------|----------------|------|-----------|----------|----------|-----------------|-------------------|
| C N     | S.N. Activities |  | Roles and Re | esponsibilities | Performance        |                | Ti   | me fram   | e        |          | Resources       | Risk              |
| 3.IV.   | P               | ctivities  | Execution    | Monitoring      | Indicator          | 2016           | 2017 | 2018      | 2019     | 2020     | Resources       | KISK              |
| 2.2.2.1 | position of sta | ovision of creating the ff having ary qualification in | AAG, Mgmt.   | DAG, Mgmt.      | Provision Included | Jul            |      |           |          |          |                 | Political Support |

| 2.3     | Objective:      | Improve Audit Man   | ndate           |               |                    |                  |         |           |         |           |              |                              |
|---------|-----------------|---|-----------------|---------------|--------------------|------------------|---------|-----------|---------|-----------|--------------|------------------------------|
| 2.3.1   | Initiative:     | Solicit mandate to c<br>funds and reporting                       |                 | of all public | Expected Output:   | All pub<br>manda |         | s will be | audited | l by OA   | GN and repor | rted as per                  |
| S.N.    | N. Activities   | Roles and Ro  | esponsibilities | Performance   |                    | Ti               | me fram | e         |         | Resources | Risk         |                              |
| 3.IV.   | A               | Cuvities  | Execution       | Monitoring    | Indicator          | 2016             | 2017    | 2018      | 2019    | 2020      | Resources    | KISK                         |
| 2.3.1.1 | provision of ge | audit act including the<br>tting mandate to<br>of all public fund | AAG, Mgmt.      | DAG, Mgmt.    | Provision Included | Jul              |         |           |         |           |              | Political Support            |
| 2.3.1.2 |                 | ollaborate with<br>ernal stakeholders to<br>/PAC                  | AAG, Mgmt.      | DAG, Mgmt.    | Provision Included | Aug              | Jul     |           |         |           | 200          | Support from<br>Stakeholders |

| 3       | Imperative:                     | Develop Organizati     | onal Capacity  |                 |                                     |  |      |         |      |      |           |       |  |  |
|---------|---------------------------------|------------------------|----------------|-----------------|-------------------------------------|--|------|---------|------|------|-----------|-------|--|--|
| 3.1     | Objective:                      | Develop and Imple      | ment HRD Stra  | ntegy           |                                     |  |      |         |      |      |           |       |  |  |
| 3.1.1   | Initiative:                     | Prepare and implem     | nent HRD Strat | egy.            | Expected Output:                    | HRD Strategy developed and implemented |      |         |      |      |           |       |  |  |
| C NI    |                                 | -41141                 | Roles and Ro   | esponsibilities | Performance                         |  | Ti   | me fram | e    |      | Dagayyaaa | Dial. |  |  |
| S.N.    | A                               | ctivities              | Execution      | Monitoring      | Indicator                           | 2016                                   | 2017 | 2018    | 2019 | 2020 | Resources | Risk  |  |  |
| 3.1.1.1 | Update and Im strategy          | plement HRD            | DIR, HR        | AAG, HR         | HRD Implemented                     | Jul                                    |      |         |      |      | 500       |       |  |  |
| 3.1.1.2 | Create and upon Capacity Buildi | date Database of<br>ng | DIR, HR        | AAG, HR         | Database Created and updated timely | Regular                                |      |         |      |      |           |       |  |  |

| 3.1.1.3  | Increase number of skilled staff in training directorate  | DIR, HR    | AAG, HR    | Increase no. of skilled staff  |         | Jul |     |     |     |       | Lack of Staff          |
|----------|---|------------|------------|--|---------|-----|-----|-----|-----|-------|------------------------|
| 3.1.1.4  | Conduct TNA (Training Need Assessment)  | DIR, HR    | AAG, HR    | Report of TNA  | Jul     |     |     |     |     | 500   | Practicality of report |
| 3.1.1.5  | Design and develop Course based on TNA  | DIR, HR    | AAG, HR    | Course designed  |         | Jan |     |     |     | 2000  |                        |
| 3.1.1.6  | Develop and Execute training calendar of OAG  | DIR, HR    | AAG, HR    | Calendar developed and executed  | Aug     | Aug | Aug | Aug | Aug | 5000  | Lack of Resources      |
| 3.1.1.7  | Arrange adequate space and logistics for Training   | AAG, Mgmt. | DAG, Mgmt. | Adequate space, logistics  |         | Dec |     |     |     | 7500  | Lack of Budget         |
| 3.1.1.8  | Provide and utilize TOT on<br>Specialized Sectors   | DIR, HR    | AAG, HR    | (LG Audit, PA, IT,<br>Env., FA, Proc.,<br>Revenue, MTOT, QA)-<br>5 for each Sector | Aug     | Aug | Aug | Aug | Aug | 2000  |                        |
| 3.1.1.9  | Participate in national and<br>International trainings, workshops<br>and knowledge sharing programs | DIR, HR    | AAG, HR    | National-50, Intl-20<br>yearly   | Regular |     |     |     |     | 30000 | Lack of Budget         |
| 3.1.1.10 | Nominate staff to study professional courses such as CA, ACCA, CIA, CISA etc.                       | DIR, HR    | AAG, HR    | 2016-3, 2017-3<br>2018-4, 2019-5,<br>2020-5  | Regular |     |     |     |     | 10000 | Lack of Budget         |

| 3.1.2   | Initiative:  | Review existing stay | ff rotation polic | cy.             | Expected Output:   | Revised<br>the pol |      | docume  | nt in ha | nd and | effective imp | lementation of |
|---------|--|----------------------|-------------------|-----------------|--------------------|--------------------|------|---------|----------|--------|---------------|----------------|
| C NI    |  | ctivities            | Roles and Re      | esponsibilities | Performance        |                    | Tir  | me fram | ie       |        | Возочивов     | Diele          |
| S.N.    | A  | ctivities            | Execution         | Monitoring      | Indicator          | 2016               | 2017 | 2018    | 2019     | 2020   | Resources     | Risk           |
| 3.1.2.1 | Update staff rotation and placement policy based on requirement, qualification, experience and performance |                      | AAG, Mgmt.        | DAG, Mgmt.      | Updated policy     | Jun                |      |         |          |        | 100           |                |
| 3.1.2.2 | Implement the  | policy               | AAG, Mgmt.        | DAG, Mgmt.      | Policy Implemented | Jul                |      |         |          |        |               |                |

| 3.2     | Objective:                 | Redesign Organizat                         | ional Strategy | to address fede | eral structure and exte | ended A                  | udit Ma | ndate   |      |      |           |                          |
|---------|----------------------------|--|----------------|-----------------|-------------------------|--------------------------|---------|---------|------|------|-----------|--------------------------|
| 3.2.1   | Initiative:                | Conduct O & M stud<br>structure and extend | •              |                 | Expected Output:        | Study report implemented |         |         |      |      |           |                          |
| S.N.    |                            | ctivities                                  | Roles and Re   | esponsibilities | Performance             |                          | Ti      | me fram | ie   |      | Dagauraga | Diele                    |
| 3.IV.   | A                          | ctivities                                  | Execution      | Monitoring      | Indicator               | 2016                     | 2017    | 2018    | 2019 | 2020 | Resources | Risk                     |
| 3.2.1.1 | Conduct O&M study          |  | AAG, Mgmt.     | DAG, Mgmt.      | O&M Study<br>Conducted  | Jul                      |         |         |      |      | 1000      | Delay in Study<br>Report |
| 3.2.1.2 | Implement the study report |  | AAG, Mgmt.     | DAG, Mgmt.      | Report Implemented      | Dec                      |         |         |      |      | 1000      |                          |

| 3.2.2   | Initiative:  | Prepare and implen                          |              | auditing and    | Expected Output:   | Policy prepared and implemented  Time frame |      |         |      | ted  |           |                           |
|---------|--|---|--------------|-----------------|--------------------|---|------|---------|------|------|-----------|---------------------------|
| C NI    |  | ativitios                                   | Roles and Ro | esponsibilities | Performance        |   | Ti   | me fram | e    |      | Dagauraga | Risk                      |
| S.N.    |  |   | Execution    | Monitoring      | Indicator          | 2016  | 2017 | 2018    | 2019 | 2020 | Resources | KISK                      |
| 3.2.2.1 |  | ng good practices<br>iting and reporting in | AAG, Mgmt.   | DAG, Mgmt.      | Report             | May   |      |         |      |      | 4000      | Availability of<br>Budget |
| 3.2.2.2 | Prepare policy and provincial structure for auditing and reporting as per federal set up |   | AAG, Mgmt.   | DAG, Mgmt.      | Policy Prepared    |   | Jul  |         |      |      | 2000      |                           |
| 3.2.2.3 | Implement pol  | licy  | AAG, Mgmt.   | DAG, Mgmt.      | Policy Implemented |   |      | Jul     |      |      | 20000     |                           |

| 3.2.3   | Initiative:  | Initiate periodical R     | eporting     |                 | Expected Output:   | Guideli | nes Pre <sub>l</sub> | pared   |      |      |           |                     |
|---------|--|---------------------------|--------------|-----------------|--------------------|---------|----------------------|---------|------|------|-----------|---------------------|
| C NI    |  | ctivities                 | Roles and Re | esponsibilities | Performance        |         | Tir                  | me fram | e    |      | Dagauraga | Risk                |
| S.N.    | A  | ctivities                 | Execution    | Monitoring      | Indicator          | 2016    | 2017                 | 2018    | 2019 | 2020 | Resources | KISK                |
| 3.2.3.1 | Include the provision of periodical reporting on draft audit act |                           | AAG, Mgmt.   | DAG, Mgmt.      | Draft Prepared     | Jul     |                      |         |      |      |           | Support from<br>GON |
| 3.2.3.2 | Define Procedure for periodic audit reporting                    |                           | AAG, HR      | DAG, Mgmt.      | Documents Prepared |         | Jan                  |         |      |      | 500       |                     |
| 3.2.3.3 | Submit audit ro<br>annual Audit C                                | eport as OAGN<br>alendar. | AG           | AG              | Report Submitted   |         |                      |         |      |      |           |                     |

| 3.2.4   | Initiative:                         | Strengthen ICT infra                   | astructure and | its application | Expected Output:                | 1    | -           | icture ind<br>se of ICT |      |      | e paper work |       |
|---------|-------------------------------------|--|----------------|-----------------|---------------------------------|------|-------------|-------------------------|------|------|--------------|-------|
| C N     |                                     | ctivities                              | Roles and Re   | esponsibilities | Performance                     |      | Tir         | me fram                 | e    |      | Daggurgag    | Diele |
| S.N.    | A                                   | cuvities                               | Execution      | Monitoring      | Indicator                       | 2016 | 2017        | 2018                    | 2019 | 2020 | Resources    | Risk  |
| 3.2.4.1 | Assess ICT requality automatise off |  | AAG, Mgmt.     | DAG, Mgmt.      | Assessment report               | Aug  |             |                         |      |      | 1000         |       |
| 3.2.4.2 |                                     | Init within OAGN<br>essional Staffs as | AAG, Mgmt.     | DAG, Mgmt.      | ICT Established                 |      |             |                         |      |      | 1500         |       |
| 3.2.4.3 | Install ICT infra<br>required equip | astructure with oment.                 | AAG, Mgmt.     | DAG, Mgmt.      | ICT Infrastructure<br>Installed |      | Jan         |                         |      |      | 50000        |       |
| 3.2.4.4 | Make arranger<br>Security with 0    | ments for information                  | AAG, Mgmt.     | DAG, Mgmt.      | Info. Security<br>Arranged      |      |             |                         |      |      | 20000        |       |
| 3.2.4.5 | Procure and renumber of CAA         | •                                      | AAG, Mgmt.     | DAG, Mgmt.      | 3 license Procured              |      | Feb-<br>Mar | Feb-<br>Mar             |      |      | 2000         |       |

| 3.2.5   | Initiative:                       | Construct Office But<br>office as per federal                      | •            | structure audit | Expected Output:                 | 2. Federal Audit offices established and functioning |      |         |      |      |           | )                                 |
|---------|-----------------------------------|--|--------------|-----------------|----------------------------------|--|------|---------|------|------|-----------|-----------------------------------|
| C NI    |                                   | ctivities  | Roles and Ro | esponsibilities | Performance                      |  | Ti   | me fram | ie   |      | Daggurage | Risk                              |
| S.N.    | A                                 | ctivities  | Execution    | Monitoring      | Indicator                        | 2016   | 2017 | 2018    | 2019 | 2020 | Resources | KISK                              |
| 3.2.5.1 | Urban Develop                     | ce building in ith support from oment and Building Department, GON | AAG, Mgmt.   | DAG, Mgmt.      | Office Building<br>Constructed   | Jul  |      |         |      |      | 900000    | Cooperation with                  |
| 3.2.5.2 | Shift to New B                    | uilding  | AAG, Mgmt.   | DAG, Mgmt.      | Shifted                          |  |      |         |      | Dec  | 50000     |                                   |
| 3.2.5.3 | Conduct feasik<br>establish provi | •  | AAG, Mgmt.   | DAG, Mgmt.      | Study Report                     |  |      | Jan     |      |      | 500       | Practical Study report            |
| 3.2.5.4 | Establish Provi<br>support from t | incial Offices with<br>the GON                                     | AAG, Mgmt.   | DAG, Mgmt.      | Provincal Offices<br>Established |  |      | Dec     |      |      | 140000    | Cooperation with GON              |
| 3.2.5.5 |                                   | lding for provincial<br>ate audit work                             | AAG, Mgmt.   | DAG, Mgmt.      | Office Hired                     |  |      |         | Jul  | Jul  | 8000      | Availability of appropriate space |

| 3.2.5.6 | Depute manpower as per O &M survey in provincial office  | AAG, Mgmt. | DAG, Mgmt. | Manpower Deputed                                |  |         | Jul |        |        |
|---------|--|------------|------------|---|--|---------|-----|--------|--------|
| 3.2.5.7 | Improve office working environment by outsourcing utilities.(Cleaning, refreshment, services etc.) | AAG, Mgmt. | DAG, Mgmt. | Condition of working environment                |  | Regular |     | 6000   |        |
| 3.2.5.8 | Arrange one vehicles for each Division/Province and necessary motorcycles                          | AAG, Mgmt. | DAG, Mgmt. | 4 vehicles and 10 motorcycles procured annually |  |         |     | 100000 | Budget |

| 4       | Imperative:                   | Enhance profession                       | al relations wi           | ith external stal | keholders  |  |      |         |      |      |           |      |
|---------|-------------------------------|--|---------------------------|-------------------|--|--|------|---------|------|------|-----------|------|
| 4.1     | Objective:                    | Ensure regular and                       | effective com             | munication usir   | ng ICT.  |  |      |         |      |      |           |      |
| 4.1.1   | Initiative:                   | Prepare and implen                       | nent action pla           | n                 | Expected Output:   | <ol> <li>Comprehensive action plan</li> <li>ICT tools in place</li> <li>Status report on utilization of tools</li> </ol> |      |         |      |      |           |      |
|         | _                             |  | Roles and Re              | esponsibilities   | Performance  |  | •    | me fram |      |      |           | 5.1  |
| S.N.    | A                             | ctivities                                | Execution                 | Monitoring        | Indicator  | 2016   | 2017 | 2018    | 2019 | 2020 | Resources | Risk |
| 4.1.1.1 | Develop and a communication   |  | DIR, Admin.               | AAG, Mgmt.        | Comm. Strategy<br>Developed  | Mar  |      |         |      |      | 500       |      |
| 4.1.1.2 | Develop Comp<br>for Communica | rehensive Action Plan<br>ation using ICT | ICT<br>UNIT/Comm.<br>CELL | AAG, Mgmt.        | Action Plan in Place   |  | Aug  |         |      |      | 100       |      |
| 4.1.1.3 | Implement Cor<br>Plan         | mmunication Action                       | ICT<br>UNIT/Comm.<br>CELL | AAG, Mgmt.        | Updated Website,<br>social media,<br>publication of<br>Boucher/Newsletter,<br>online feedback etc. |  |      | Regular |      | 2500 |           |      |

| 4.1.2   | Initiative:  | communication system using ICT |                           |                 | Expected Output:            |      | iew repo<br>ommeno |         | address | ed by in | itiative owne | rs.   |
|---------|--|--------------------------------|---------------------------|-----------------|-----------------------------|------|--------------------|---------|---------|----------|---------------|-------|
| C NI    |  | ctivities                      | Roles and Re              | esponsibilities | Performance                 |      | Ti                 | me fram | e       |          | Dosauroos     | Diele |
| S.N.    | A  | cuvities                       | Execution                 | Monitoring      | Indicator                   | 2016 | 2017               | 2018    | 2019    | 2020     | Resources     | Risk  |
| 4.1.2.1 | Make Arrangement to hire independent reviewer including preparation of TOR |                                | ICT<br>UNIT/Comm.<br>CELL | AAG, Mgmt.      | Reviewer appointed          |      |                    |         | May     |          | 500           |       |
| 4.1.2.2 | Get Review report, prepare action plan and implement recommendations       |                                | ICT<br>UNIT/Comm.<br>CELL | AAG, Mgmt.      | Recommendations implemented |      |                    |         |         | Feb      | 1000          |       |

| 4.2     | Objective:                                      | Improve interaction  | on with the me            | dia and public  |                  |         |          |         |          |          |           |       |
|---------|---|--|---------------------------|-----------------|------------------|---------|----------|---------|----------|----------|-----------|-------|
| 4.2.1   | Initiative:                                     | Set up skilled and su<br>communication tea<br>communication stra | m as per appro            |                 | Expected Output: | Functio | oning Co | mmunic  | ation te | eam in p | olace     |       |
| S.N.    |   | ctivities  | Roles and Re              | esponsibilities | Performance      |         | Ti       | me fram | е        |          | Daggurgag | Diele |
| 3.IV.   | A   | ctivities  | Execution                 | Monitoring      | Indicator        | 2016    | 2017     | 2018    | 2019     | 2020     | Resources | Risk  |
| 4.2.1.1 | Establish Communication Cell                    |  | AAG, Mgmt.                | DAG, Mgmt.      | Cell established | Jul     |          |         |          |          | 500       |       |
| 4.2.1.2 | Constitute Communication Team Including Experts |  | AAG, Mgmt.                | DAG, Mgmt.      | Team Formed      | Aug     |          |         |          |          | 500       |       |
| 4.2.1.3 | Develop TOR a<br>Cell and Team                  | nd procedure of the  | ICT<br>UNIT/Comm.<br>CELL | AAG, Mgmt.      | TOR              | July    |          |         |          |          |           |       |

| 4.2.2   | Initiative:                         | Develop and implent<br>based on the comm<br>effective communic | unication strat           | egy for         | Expected Output:       | concerr<br>provide<br>informa<br>b) Wid | ns of the<br>ed to add<br>ation be<br>e coverd | media &<br>dress tho<br>provided<br>age of au | & public ,<br>se conce<br>d<br>dit resul | what in<br>erns, and |           | uld identify the<br>n and should be<br>n should the |
|---------|-------------------------------------|--|---------------------------|-----------------|------------------------|---|--|---|--|----------------------|-----------|---|
| C NI    |                                     | atiiti.a.a   | Roles and Re              | esponsibilities | Performance            |   | Ti   | me fram                                       | ie                                       |                      | Danaumana | Diele   |
| S.N.    | A                                   | ctivities  | Execution                 | Monitoring      | Indicator              | 2016                                    | 2017   | 2018  | 2019                                     | 2020                 | Resources | Risk  |
| 4.2.2.1 | Prepare and in Communicatio public. | nplement<br>n Plan for media and                               | ICT<br>UNIT/Comm.<br>CELL | AAG, Mgmt.      | Comm. Plan             |   | Jan  |   |  |                      | 100       |   |
| 4.2.2.2 | Disseminate A                       | udit results   | ICT<br>UNIT/Comm.<br>CELL | AAG, Mgmt.      | More coverage in media |   |  |   | Regular                                  |                      | 1000      |   |
| 4.2.2.3 | Collect feedba                      | ck from media and  | ICT<br>UNIT/Comm.<br>CELL | AAG, Mgmt.      | report                 |   |  | Apr   |  | 200                  |           |   |
| 4.2.2.4 | Revise commu<br>considering fee     | •  | ICT<br>UNIT/Comm.<br>CELL | AAG, Mgmt.      | Revised comm. Plan     |   |  |   | Aug                                      |                      | 100       |   |

| 4.2.3   | Initiative:               | Establish media rel<br>suggestion of OAG<br>SAI PMF Report 20. | N committee w             | •               | Expected Output:            | a. Media archive established and b. Input to audit planning  Time frame |      |         |      |      | in used.  |       |
|---------|---------------------------|--|---------------------------|-----------------|-----------------------------|---|------|---------|------|------|-----------|-------|
| CN      |                           | N akir riki a a  | Roles and R               | esponsibilities | Performance                 |   | Ti   | me fram | ie   |      | Descurses | Diele |
| S.N.    | <b>'</b>                  | Activities   | Execution                 | Monitoring      | Indicator                   | 2016  | 2017 | 2018    | 2019 | 2020 | Resources | Risk  |
| 4.2.3.1 | Design the archive policy |  | ICT<br>UNIT/Comm.<br>CELL | AAG, Mgmt.      | Policy approved             |   | Jun  |         |      |      | 100       |       |
| 4.2.3.2 | Arrange the ir            | nfrastructure and HR   | AAG, Mgmt.                | DAG, Mgmt.      | Archive Setup               |   | Jun  |         |      |      | 2000      |       |
| 4.2.3.3 |                           | ent analysis and<br>rt regarding media                         | Comm. CELL                | Comm. Team      |                             |   | Oct  | Oct     | Oct  | Oct  | 1000      |       |
| 4.2.3.4 | Make use of a             | rchive for audit plan  | All DIR                   | ALL AAGs        | Audit Plan using<br>Archive |   | Jul  | Jul     | Jul  | Jul  |           |       |

| 4.2.4   | Initiative:                      | Enhance the participolic organizations in the | •            | •               | Expected Output:    | a) Number of audits conducted engo |      |         |      | d engag | ing CSOs   |        |
|---------|----------------------------------|---|--------------|-----------------|---------------------|------------------------------------|------|---------|------|---------|------------|--------|
| CN      |                                  | ativiti a a                                   | Roles and Re | esponsibilities | Performance         |                                    | Tiı  | me fram | е    |         | Danasumana | Diele  |
| S.N.    | A                                | ctivities                                     | Execution    | Monitoring      | Indicator           | 2016                               | 2017 | 2018    | 2019 | 2020    | Resources  | Risk   |
| 4.2.4.1 | Update CPA Guidelines            |   | DIR, PA      | AAG, PA         | Updated Guidelines  | Dec                                |      |         |      |         | 100        |        |
| 4.2.4.2 | Identify Modality to engage CSOs |   | DIR, PA      | AAG, PA         | Modality Identified |                                    | Jun  |         |      |         |            |        |
| 4.2.4.3 | Prepare roster of CSOs           |   | DIR, PA      | AAG, PA         | Roster Prepared     |                                    | Jul  |         |      |         |            |        |
| 4.2.4.4 | Engage CSOs for CPA              |   | DIR, PA      | AAG, PA         | CSOs Selected       |                                    | Aug  |         |      |         | 2000       | Budget |
| 4.2.4.5 | Train CSOs and                   | d Auditors                                    | DIR, PA      | AAG, PA         | Trained             |                                    | Aug  |         |      |         | 1000       |        |
| 4.2.4.6 | Evaluation of 0                  | CSOs contribution                             | DIR, PA      | AAG, PA         | Report              |                                    |      |         | Aug  |         | 200        |        |

| 4.3     | Objective:                    | Building an effecti   | ve relationship | with PAC        |                                  |                               |                               |                    |         |          |  |              |
|---------|-------------------------------|---|-----------------|-----------------|----------------------------------|-------------------------------|-------------------------------|--------------------|---------|----------|--|--------------|
| 4.3.1   | Initiative:                   | Establish a system f<br>PAC members, and<br>hearing in coordina | briefing of PAC |                 | Expected Output:                 | of SAI of<br>2. Min<br>Templo | and its F<br>istry wis<br>ate | Reports<br>se/Depa | rtment- | wise bri | ssed about vo<br>iefs to PAC in<br>C during hear |              |
| C NI    |                               |   | Roles and Re    | esponsibilities | Performance                      |                               | Ti                            | me fram            | ie      |          | D  | Dial.        |
| S.N.    | <b>P</b>                      | Activities  | Execution       | Monitoring      | Indicator                        | 2016                          | 2017                          | 2018               | 2019    | 2020     | Resources  | Risk         |
| 4.3.1.1 | Organize inter regularly      | action program  | DAG, Mgmt.      | AG              | Interaction held annually        | May                           | May                           | May                | May     | May      | 500  | Coordination |
| 4.3.1.2 |                               | develop schedule for<br>n on Audit report                       | DIR, QA&PAf     | AAG, HR         | Schedule Prepared                |                               | I                             | Regularly          | ,       |          |  | Coordination |
| 4.3.1.3 | including sugg<br>PAC members | artment wise and in   | All DIR         | ALL AAGs        | Notes and Suggested<br>Questions | Jun                           | Jun                           | Jun                | Jun     | Jun      |  | Coordination |

| 4.3.2   | Initiative:                                     | decisions 2. Follow-up reports submitted to |              |                 |                              |         | •    | ed timeline. |      |      |           |      |
|---------|---|---|--------------|-----------------|------------------------------|---------|------|--------------|------|------|-----------|------|
| C NI    |   | ctivities                                   | Roles and Re | esponsibilities | Performance                  |         | Ti   | me fram      | е    |      | Bassumass | Risk |
| S.N.    | A   | cuvities                                    | Execution    | Monitoring      | Indicator                    | 2016    | 2017 | 2018         | 2019 | 2020 | Resources | KISK |
| 4.3.2.1 | Arrange timel                                   | y communication of o OAGN                   | DIR, QA&PAf  | AAG, HR         | Circulation of Decision      | Regular |      |              |      |      |           |      |
| 4.3.2.2 | Communicate<br>Concerned dire<br>maintain datab |   | DIR, QA&PAf  | AAG, HR         | Database maintained          | Regular |      |              |      |      |           |      |
| 4.3.2.3 |   | base and Include<br>AC decisions in Audit   | All DIR      | ALL AAGs        | PAC decisions<br>followed up | Jul     | Jul  | Jul          | Jul  | Jul  |           |      |
| 4.3.2.4 | Include Status report.                          | of Follow-up in audit                       | All DIR      | ALL AAGs        | Follow-up reported           | Apr     | Apr  | Apr          | Apr  | Apr  |           |      |

| 4.4     | Objective:            | Strengthening the  | strengthening the professional relation with auditees and professional organizations |                 |                          |             |             |             |             |             |           |       |  |
|---------|-----------------------|--|--|-----------------|--------------------------|-------------|-------------|-------------|-------------|-------------|-----------|-------|--|
| 4.4.1   | Initiative:           | Hold effective intere<br>Officers, responsible<br>ICAN and addressin | e persons, DTC   | , ,             | Expected Output:         | Interac     | tion rep    | oort and    | Feedba      | ck addr     | essed     |       |  |
| C N     |                       | -4: .i4:   | Roles and Ro   | esponsibilities | Performance              |             | Ti          | me fram     | ie          |             | Danaumana | Dial. |  |
| S.N.    | A                     | ctivities  | Execution  | Monitoring      | Indicator                | 2016        | 2017        | 2018        | 2019        | 2020        | Resources | Risk  |  |
| 4.4.1.1 | _                     | action program with nually   | DIR, HRD   | AAG, HRD        | Interaction<br>Conducted | Sep         | Sep         | Sep         | Sep         | Sep         | 200       |       |  |
| 4.4.1.2 | _                     | · · · · · · · · · · · · · · · · · · ·                                |  | AAG, HRD        | Interaction<br>Conducted | Sep-<br>Jan | Sep-<br>Jan | Sep-<br>Jan | Sep-<br>Jan | Sep-<br>Jan | 1000      |       |  |
| 4.4.1.3 | Address feedb<br>plan | ack through action   | DIR, HRD   | AAG, HRD        | Feedback Addressed       | Regular     |             |             | 100         |             |           |       |  |
| 4.4.1.4 | organizations i       | with Professional<br>ncluding ICAN for<br>Development and<br>n.      | DIR, HRD   | AAG, HRD        | MOU signed               |             | Nov         |             |             |             | 100       |       |  |
| 4.4.1.5 | Implement MO          | DU   | DIR, HRD   | AAG, HRD        | MOU Implemented          |             | Dec         |             |             |             | 1000      |       |  |

| 4.4.1.6 | Collaborate with oversight and Government agencies(CIAA, NVC, PPMO, MOGA, FCGO, MOF, NRB, Bima Samiti etc.) by sharing information and reports. | AAG, HRD | DAG, Mgmt. | Collaboration<br>Established | Regular | 500 |  |
|---------|---|----------|------------|------------------------------|---------|-----|--|
|---------|---|----------|------------|------------------------------|---------|-----|--|

| 5       | Imperative:                                  | Enhance Internal G | overnance       |                 |                    |          |          |           |            |          |           |                  |
|---------|--|--------------------|-----------------|-----------------|--------------------|----------|----------|-----------|------------|----------|-----------|------------------|
| 5.1     | Objective:                                   | Strengthen Interna | I Control Syste | m               |                    |          |          |           |            |          |           |                  |
| 5.1.1   | Initiative:                                  | Map current Intern | al Control of O | AGN             | Expected Output:   | Existing | g intern | al contro | ol activit | ies doci | umented   |                  |
| S.N.    | _  | ctivities          | Roles and Re    | esponsibilities | Performance        |          | Ti       | me fram   | e          |          | Dagauraaa | Risk             |
| 3.IV.   | A  | ctivities          | Execution       | Monitoring      | Indicator          | 2016     | 2017     | 2018      | 2019       | 2020     | Resources | KISK             |
| 5.1.1.1 | Formation of Assessment Team with TOR        |                    | AAG, Mgmt.      | DAG, Mgmt.      | Team formation     | May      |          |           |            |          |           | Timely Decision  |
| 5.1.1.2 | Conduct Review and Prepare assessment Report |                    | Review<br>Team  | AAG, Mgmt.      | Report             | Dec      |          |           |            |          | 100       | Timely Reporting |
| 5.1.1.3 | Implement IC a                               | assessment Report  | ALL AAGs        | Senior Mgmt.    | Report Implemented |          | Apr      |           |            |          | 500       |                  |

| 5.1.2   | Initiative:   | Redesign Internal co                                     | ontrol system i         | n line with     | Expected Output:                          | Internal Control framework approved implemented  Time frame |      |         |      |      | communica | ted and           |
|---------|---|--|-------------------------|-----------------|---|---|------|---------|------|------|-----------|-------------------|
| C NI    |   | ctivities  | Roles and Re            | esponsibilities | Performance                               |   | Tir  | me fram | e    |      | Doggunges | Diele             |
| S.N.    | A   | ctivities  | Execution               | Monitoring      | Indicator                                 | 2016  | 2017 | 2018    | 2019 | 2020 | Resources | Risk              |
| 5.1.2.1 |   |  |                         | AG              | Defined Role & Responsibilities           |   | May  |         |      |      |           | Timely Decision   |
| 5.1.2.2 | Update and implement job descriptions of all levels |  | AAG, Mgmt.              | DAG, Mgmt.      | Updated Job<br>Description                |   | July |         |      |      | 50        |                   |
| 5.1.2.3 |   | l calendar of<br>P) of each employees<br>G, directorates | ALL DAGs,<br>AAGs, DIRs | Senior Mgmt.    | Annual Calendar of<br>Operations          |   | Aug  | Aug     |      |      | 100       | Timely completion |
| 5.1.2.4 | Incorporate CO                                      | OP in AOP of OAG   | DIR, HRD                | AAG, HRD        | Linked COP and AOP                        |   | Aug  | Aug     |      |      | 50        |                   |
| 5.1.2.5 |   | plement reporting<br>formance evaluation<br>and unit     | ALL AAGs                | All DAGs        | Reporting System in place and implemented |   | Sep  |         |      |      | 500       |                   |

| 5.1.2.6 Link with evaluation report for performance appraisal, reward and punishment. | ALL AAGs | All DAGs | Established link |  |  | Jul |  |  |  |  |
|---|----------|----------|------------------|--|--|-----|--|--|--|--|
|---|----------|----------|------------------|--|--|-----|--|--|--|--|

| 5.1.3   | Initiative:  | Set up Effective Inte            | ernal Audit Fun | ction           | Expected Output:    |      |      | dits cond |      |      | y<br>ne managers |                 |
|---------|--|----------------------------------|-----------------|-----------------|---------------------|------|------|-----------|------|------|------------------|-----------------|
| C N     |  | ctivities                        | Roles and Ro    | esponsibilities | Performance         |      | Ti   | me fram   | ie   |      | Dagauraga        | Risk            |
| S.N.    | A  | cuvities                         | Execution       | Monitoring      | Indicator           | 2016 | 2017 | 2018      | 2019 | 2020 | Resources        | KISK            |
| 5.1.3.1 | Define roles, responsibilities and authorities of IAU                        |                                  | AAG, Mgmt.      | DAG, Mgmt.      | Decision for IAU    |      |      | May       |      |      |                  |                 |
| 5.1.3.2 | Establish internal audit unit based on COSO frame work                       |                                  | AAG, Mgmt.      | DAG, Mgmt.      | Decision for IAU    |      |      | May       |      |      |                  | Timely Decision |
| 5.1.3.3 | on COSO frame work Assess internal control system/internal audit bi-annually |                                  | IAU             | DAG, Mgmt.      | Report              |      |      |           | Feb  | Feb  | 1000             |                 |
| 5.1.3.4 | Provide report division  | to the management                | IAU             | DAG, Mgmt.      | Report              |      |      |           | Aug  | Aug  | 500              |                 |
| 5.1.3.5 | Take necessary per the finding   | corrective action as s of report | All DIR         | DAG, Mgmt.      | Action Taken Report |      |      |           | Sept | Sept | 500              | Delay on ATR    |

| 5.1.4   | Initiative:            | Conduct audits and                     | submit reports | s in time       | Expected Output: | All aud                         | dit repor | ts subm | itted wit | thin stip | ulated time |       |
|---------|------------------------|--|----------------|-----------------|------------------|---------------------------------|-----------|---------|-----------|-----------|-------------|-------|
| C NI    |                        | ctivities                              | Roles and Ro   | esponsibilities | Performance      |                                 | Ti        | me fram | ne        |           | Dagaurage   | Diale |
| S.N.    | A                      | ctivities                              | Execution      | Monitoring      | Indicator        | 2016   2017   2018   2019   202 |           |         |           | 2020      | Resources   | Risk  |
| 5.1.4.1 | Develop annua          | al audit plan                          | All DIR        | ALL AAGs        | AAP              |                                 |           |         |           |           | 500         |       |
| 5.1.4.2 | Execute AAP & progress | monitor the                            | All DIR        | ALL AAGs        | Report           | Regular                         |           |         |           | 250000    |             |       |
| 5.1.4.3 |                        | and submit report<br>hs of the FY end. | ALL AAGs       | All DAGs        | Audit Completed  |                                 |           |         |           | 5000      |             |       |

| 5.1.5   | Initiative:   | Establish a research | Unit         |                 | Expected Output:   | Resear | ch Unit | establis | hed  |      |           |      |
|---------|---|----------------------|--------------|-----------------|--------------------|--------|---------|----------|------|------|-----------|------|
| C NI    |   | Activities           | Roles and Re | esponsibilities | Performance        |        | Ti      | me fram  | е    |      | Возочивов | Risk |
| S.N.    | _   | Activities           | Execution    | Monitoring      | Indicator          | 2016   | 2017    | 2018     | 2019 | 2020 | Resources | KISK |
| 5.1.5.1 | Establish a research Unit with TOR and required resources |                      | AAG, Mgmt.   | DAG, Mgmt.      | Unit Established   |        |         | Jan      |      |      | 3000      |      |
| 5.1.5.2 | Prepare and approve the research plan                     |                      | DIR, R&D     | AAG, Mgmt.      | Plan Prepared      |        |         | March    |      |      | 250       |      |
| 5.1.5.3 | Conduct Resea   | arch as per plan     | DIR, R&D     | AAG, Mgmt.      | Research conducted |        |         |          | Reg  | ular | 5000      |      |
| 5.1.5.4 | Prepare repor<br>AG annually                              | ts and submit to the | DIR, R&D     | AAG, Mgmt.      | Report Submitted   |        |         |          | Apr  |      | 50        |      |
| 5.1.5.5 | Take necessar   | y action on report   | AAG, Mgmt.   | DAG, Mgmt.      | Action Taken       |        |         |          | June |      |           |      |

| 5.2     | Objective:                   | <b>Ensure Compliance</b>   | with Code of I  | Ethics          |                   |                                 |          |         |         |        |           |      |
|---------|------------------------------|--|-----------------|-----------------|-------------------|---------------------------------|----------|---------|---------|--------|-----------|------|
| 5.2.1   | Initiative:                  | Create awareness o   | n code of ethic | s among staffs  | Expected Output:  | Awarei                          | ness cre | ated on | code of | ethics |           |      |
| S.N.    |                              | ctivities  | Roles and Re    | esponsibilities | Performance       |                                 | Tiı      | me fram | е       |        | Resources | Risk |
| 3.IV.   | _ A                          | ctivities  | Execution       | Monitoring      | Indicator         | 2016   2017   2018   2019   202 |          |         |         | 2020   | Resources | KISK |
| 5.2.1.1 |                              | nction on COE to all<br>and key stakeholders                     | ALL AAGs        | All DAGs        | Awareness Created |                                 |          |         |         |        | 1000      |      |
| 5.2.1.2 | sticker with co              | and flex prints,<br>re values and provide<br>ternal stakeholders | AAG, Mgmt.      | DAG, Mgmt.      | Awareness Created | Regular                         |          |         |         |        | 1500      |      |
| 5.2.1.3 | Update COE as and distribute | per Int'l standard   | AAG, Mgmt.      | DAG, Mgmt.      | COE Updated       | Apr                             |          |         |         | 1000   |           |      |

| 5.2.2   | Initiative:  | Regular monitoring  | of Code of Eth    | ics             | Expected Output:                         | Monito | oring rep | orts and | d action | s taken | note      |               |
|---------|--|---|-------------------|-----------------|--|--------|-----------|----------|----------|---------|-----------|---------------|
| S.N.    | ,  | Activities  | Roles and Ro      | esponsibilities | Performance                              |        | Ti        | me fram  | ie       |         | Resources | Risk          |
| 3.14.   |  | Activities  | Execution         | Monitoring      | Indicator                                | 2016   | 2017      | 2018     | 2019     | 2020    | Resources | VISK          |
| 5.2.2.1 | Design and Circulate Template for recording compliance of COE. |   | AAG, Mgmt.        | DAG, Mgmt.      | Template for<br>Compliance<br>circulated |        | Jan       |          |          |         | 100       |               |
| 5.2.2.2 | of COE compli  | mandatory provision<br>lance and report to<br>Immittee annually | ALL DIRs,<br>AAGs | All DAGs        | Supervised and<br>Reported               |        | Regular   |          |          |         |           | Documentation |

| 5.2.2.3 | Establish mechanism of complaint on non-compliance of COE and Submit to monitoring committee | DIR, Admin.             | AAG, Mgmt. | Mechanism In place | Dec  |  |  | 250 |  |
|---------|--|-------------------------|------------|--------------------|------|--|--|-----|--|
| 5.2.2.4 | Regular monitor by committee   | Monitoring<br>Committee | AG         | Report Submitted   | Reg. |  |  | 250 |  |
| 5.2.2.5 | Take necessary action on report  | DAG, Mgmt.              | AG         | Action Taken       |      |  |  |     |  |

| 5.3     | Objective:                                      | Implement strateg                                | y through anni   | ual operational | plans                 |      |      |                      |      |      |                |                |
|---------|---|--|------------------|-----------------|-----------------------|------|------|----------------------|------|------|----------------|----------------|
| 5.3.1   | Initiative:                                     | Develop and impler operational plannir planning. |                  |                 | Expected Output:      |      | •    | ional pla<br>regular | _    |      | itoring incorp | porated in the |
| C N     | S.N. A  | Activities                                       | Roles and R      | esponsibilities | Performance           |      | Ti   | me fram              | ie   |      | Resources      | Risk           |
| 3.IV.   |   | activities                                       | Execution        | Monitoring      | Indicator             | 2016 | 2017 | 2018                 | 2019 | 2020 | Resources      | KISK           |
| 5.3.1.1 | Establish Planning Unit with required resources |  | AAG, Mgmt.       | DAG, Mgmt.      | Unit Established      | Jun  |      |                      |      |      |                |                |
| 5.3.1.3 |   | petween system of ional planning and planning.   | PLANNING<br>UNIT | AAG, HRD        | Linkage ensured       | July |      |                      |      |      | 1000           |                |
| 5.3.1.4 | Implement Pla                                   | anning System                                    | PLANNING<br>UNIT | AAG, HRD        | Implementation status | Aug  |      |                      |      |      |                |                |

| 5.3.2   | Initiative:  | Design annual opera | ational plan te  | mplate with     | Expected Output:                  | Templo | ate with | guidand | e in har | nd   |           |      |
|---------|--|---------------------|------------------|-----------------|-----------------------------------|--------|----------|---------|----------|------|-----------|------|
| S.N.    |  | ctivities           | Roles and R      | esponsibilities | Performance                       |        | Ti       | me fram | ie       |      | Resources | Risk |
| 3.IV.   | _ A  | Cuvities            | Execution        | Monitoring      | Indicator                         | 2016   | 2017     | 2018    | 2019     | 2020 | Resources | KISK |
| 5.3.2.1 | Hold Interaction   | -                   | Planning<br>UNIT | AAG, HRD        | Interaction Held                  | May    |          |         |          |      | 1500      |      |
| 5.3.2.2 | operational plan template. Finalize template and circulate to concerned persons to prepare AOF |                     | Planning<br>UNIT | AAG, HRD        | Template finalized and circulated | Jun    |          |         |          |      |           |      |

| 5.3.3   | Initiative:              | Develop competence implementing and repressional plan |                                    |  | Expected Output: | Enhand | ced mar | nagemer | nt compe | etence i | n preparing c | perational plan |
|---------|--------------------------|---|------------------------------------|--|------------------|--------|---------|---------|----------|----------|---------------|-----------------|
| S.N.    |                          | Activities  | Roles and Ro                       | esponsibilities  | Performance      |        | Ti      | me fram | ie       |          | Resources     | Risk            |
| 3.14.   |                          | CCIVICIES   | Execution                          | Monitoring   | Indicator        | 2016   | 2017    | 2018    | 2019     | 2020     | Resources     | Nisk            |
| 5.3.3.1 |                          | ompetency through volvement and                       | DIR, HRD                           | AAG, HRD   | Trained Staff    | July   |         |         |          |          | 500           |                 |
| 5.3.3.2 | Define roles and clearly | nd responsibilities                                   | AAG, Mgmt.                         | DAG, Mgmt.   | Defined Roles    | Aug    |         |         |          |          |               |                 |
| 5.3.3.3 |                          | operational plan,<br>ons, consultations and           | Planning<br>UNIT                   | DAG, Mgmt.   | AOP approved     | July   |         |         |          |          | 500           |                 |
| 5.3.3.4 | Communicate directorates | AOP to all  | Planning<br>UNIT                   | DAG, Mgmt.   | AOP communicated |        |         |         |          |          | 500           |                 |
| 5.3.3.5 | Implement AC             | )P  | Concerned<br>Responsible<br>person | Concerned<br>Responsible<br>person to<br>monitor in<br>AOP | AOP implemented  |        |         |         |          |          | 500           |                 |
| 5.3.3.6 | Monitoring of wise       | AOP Department  | ALL AAGs                           | All DAGs   | AOP monitored    | May    |         |         |          |          | 50            |                 |

| 5.3.4   | Initiative:  | Conduct quality rev                        | iew of annual o  | operational     | Expected Output:  |      | •    | ew repoi<br>dation a |      | d by dir | ectorates |       |
|---------|--|--|------------------|-----------------|-------------------|------|------|----------------------|------|----------|-----------|-------|
| C NI    | S.N. Activities  |  | Roles and R      | esponsibilities | Performance       |      | Ti   | me fram              | ie   |          | Возочивов | Diele |
| 3.IV.   | A  | ctivities                                  | Execution        | Monitoring      | Indicator         | 2016 | 2017 | 2018                 | 2019 | 2020     | Resources | Risk  |
| 5.3.4.1 | Organize annual review meeting and disseminate AOP implementation and progress |  | Planning<br>UNIT | AAG, HRD        | Progress Status   | Aug  |      |                      |      |          | 500       |       |
| 5.3.4.2 |  | e measures on review<br>gh the revised AOP | Planning<br>UNIT | AAG, HRD        | Corrective Action | Sept |      |                      |      |          | 500       |       |

| 5.3.5   | Initiative:                      | System for effective plan to the whole of  |                           | -               | Expected Output:    | Annual<br>organiz |      | enerally i | known ( | and use | d as a referer | ice in the whole |
|---------|----------------------------------|--|---------------------------|-----------------|---------------------|-------------------|------|------------|---------|---------|----------------|------------------|
| S.N.    |                                  | ctivities                                  | Roles and Re              | esponsibilities | Performance         |                   | Ti   | me fram    | ie      |         | Возочивов      | Diele            |
| 3.IV.   | A                                | cuvities                                   | Execution                 | Monitoring      | Indicator           | 2016              | 2017 | 2018       | 2019    | 2020    | Resources      | Risk             |
| 5.3.5.1 | Upload AOP in the website of OAG |  | ICT<br>UNIT/Comm.<br>CELL | DIR, HRD        | Uploaded in website | June              |      |            |         |         | 500            |                  |
| 5.3.5.2 |                                  | meeting of higher<br>ion Level/Directorate | All Level                 | DAG, Mgmt.      | Minutes of meetings |                   |      | Regular    |         |         | 1000           |                  |
| 5.3.5.3 | Record minute centrally          | es of meetings                             | Planning<br>UNIT          | AAG, HRD        | Recorded Centrally  |                   |      | Regular    |         |         |                |                  |

| 5.3.6   | Initiative:                     | Establish the monit<br>to ensure the imple<br>operational plan. | •                | •            | Expected Output:   | Monito | oring an | d evalua | ition me | chanisr   | n         |      |
|---------|---------------------------------|---|------------------|--------------|--------------------|--------|----------|----------|----------|-----------|-----------|------|
| C NI    |                                 | ativitias   | esponsibilities  | Performance  |                    | Ti     | me fram  | ie       |          | Dagauraga | Diele     |      |
| S.N.    | Activities Execution Monitoring |   |                  |              | Indicator          | 2016   | 2017     | 2018     | 2019     | 2020      | Resources | Risk |
| 5.3.6.1 | Establish M/E                   | committee   | DAG, Mgmt.       | Senior Mgmt. | Mechanism In place | July   |          |          |          |           |           |      |
| 5.3.6.2 | Develop M/E բ                   | olan  | M/E<br>Committee | Senior Mgmt. | M/E plan           | Aug    |          |          |          |           | 500       |      |
| 5.3.6.3 | Conduct M/E r                   | egularly  | M/E<br>Committee | Senior Mgmt. | Report             |        |          | Regular  |          |           | 500       |      |

## **Annex- 3: Template for Monthly, Quarterly and Annual Progress Report**

#### **Directorate/ General Directorate Name**

## **Progress Report for the Period covering.....**

| Planned<br>Activity<br>Reference<br>(a) | Planned<br>Activity<br>Description<br>(b) | Expected<br>Result/<br>Indicator<br>(c) | Actually<br>Achieved<br>Result/<br>Indicator<br>(d) | Deviation<br>(e)= (c)-(d) | Justification<br>for<br>Deviation (f) | Description<br>how you<br>plan next<br>to address<br>deviation<br>(g) |
|---|---|---|---|---------------------------|---------------------------------------|---|
|   |   |   |   |                           |                                       |   |
|   |   |   |   |                           |                                       |   |
|   |   |   |   |                           |                                       |   |
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| Prepared by  | Approved by  |
|--------------|--------------|
| Name:        | Name:        |
| Designation: | Designation: |
| Date:        | Date:        |