



LGPA 2017/18

Accountability Requirements

Bududa District

(Vote Code: 579)

Assessment	Compliant	%
Yes	3	50%
No	3	50%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Assessment area: Annual performance contract			
<p>LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.</p>	xxx	<p>The LG submitted an annual performance contract of the FY 2017/18 on 28/04/2017 as a draft but a final document was submitted late on 04/08/2017</p>	No
Assessment area: Supporting Documents for the Budget required as per the PFMA are submitted and available			
<p>LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).</p>	xxxxx	<p>The LG submitted a Budget that includes a Procurement Plan for the FY 2017/18.</p>	Yes
Assessment area: Reporting: submission of annual and quarterly budget performance reports			
<p>LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)</p>	xxxxx	<p>The LG made a late submission of the annual performance report for FY 2016/17 on 04/08/2017.</p>	No

LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)

xxxxxx

The LG submitted all the quarterly budget performance reports for all the previous FY2016/17 but a late submission was made for quarter 4, see below;

Quarter 1 –
11/11/2016

Quarter 2 –
13/02/2017

Quarter 3 –
24/05/2017

Quarter 4 –
04/08/2017

No

Assessment area: Audit

<p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous financial year by April 30 (PFMA s. 11 2g). This statement includes actions against all findings where the Auditor General recommended the Accounting Officer to take action (PFMA Act 2015; Local Governments Financial and Accounting Regulations 2007; The Local Governments Act, Cap 243).</p>	<p>XXXXX</p>	<ul style="list-style-type: none"> • The district submitted to the Internal Auditor General the status of implementation of the Auditor General and Internal Audit findings for the financial year 2015/2016. • The source of evidence is the submission letters from either CAO or Internal Auditor verified at the office of the Internal Auditor General and Internal Audit of the district • The evidence seen are submission letter of reference CR/103/2 dated the 22nd March 2017 and received by the Internal Auditor General on the 29th March 2017. 	<p>Yes</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer</p>	<p>XXXXX</p>	<ul style="list-style-type: none"> • The Audit opinion of Bududa district LG is unqualified as evidenced from the Auditor General's report for the FY 2016/2017 dated December 2017. The report was seen from the office of the Auditor General. 	<p>Yes</p>



LGPA 2017/18

Crosscutting Performance Measures

Bududa District

(Vote Code: 579)

Score 54/100 (54%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>All new infrastructure projects in: (i) a municipality; and (ii) all Town Councils in a District are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a municipality/district has:</p> <ul style="list-style-type: none"> • A functional Physical Planning Committee in place that considers new investments on time: score 2. 	0	<p>Whereas there seems to be an existing physical planning committee in place, regular meeting is not evidenced according to the minutes in place. They only sat twice on 18/07/2016 and 03/04/2017. The Plans registration doesn't provide for date of submission to establish timeliness in considering submitted plans.</p>
		<ul style="list-style-type: none"> • All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2. 	0	<p>No new infrastructure investment had an approved plan. There is therefore no consistence.</p>

The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles

- Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.

0

Whereas most priorities in the approved FY 2017/18 AWP are based on the outcomes of the budget conference as seen below by sector;

Water

- Construction of 10 protected spring wells - AWP page 72
- Completion of Bumwalukani GFS – AWP page 73.
- Construction of 3 stance composite VIP latrine at Bushibuya rgc – AWP page 71.

Roads

- Mechanised maintenance of 3kms of Namutembi –Buwakhata – AWP page 150.

Health

- Construction of a theatre at Bulucheke Health centre III – AWP page 13.

Education

- Construction of a 3 class room block at Nabweya p/s – AWP page 113,

There are some priority projects for FY 2017/18 that are not derived from the budget conference. i.e.

Education

- Completion of 10 stance pit latrines at Sakusaku and Manjiya primary schools.

Administration

- Completion of 2 sub county headquarters .

		<ul style="list-style-type: none"> Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If different, justification has to be provided and evidence that it was approved by Council. Score 2. 	2	<p>The capital investments approved in the AWP 2017/18 FY are derived from the approved five-year development plan. FY 2015/16 – FY2019/20 approved during a council meeting that sat on 19/03/2014 under MIN.DLC165/03/2015. See sampled investments by sector below;</p> <p>Water</p> <ul style="list-style-type: none"> Construction of 10 protected spring wells. Completion of Bumwalukani GFS. Construction of 3 stance composite VIP latrine at Bushibuya rgc . <p>Roads</p> <ul style="list-style-type: none"> Mechanised maintenance of 3kms of Namutembi –Buwakhata. <p>Health</p> <ul style="list-style-type: none"> Construction of a theatre at Bulucheke Health centre III. <p>Education</p> <ul style="list-style-type: none"> Completion of 10 stance pit latrines at Sakusaku and Manjiya primary schools. <p>Administration</p> <ul style="list-style-type: none"> Completions of 2 sub county headquarters.e.t.c...
		<ul style="list-style-type: none"> Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1. 	0	<p>The Project profiles were developed and appear at the annex of the AWP FY 2017/18 but there is no evidence that they were discussed by TPC.</p>
3	<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum 1 point. 	0	<p>There was no annual statistical abstract compiled with gender disaggregated data by the time of assessment.</p>

4	<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<p>• Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2</p>	0	<p>Whereas most projects implemented during the previous FY 2016/17 according to the annual budget performance report were derived from the annual work plan and budget approved by the LG Council during a council meeting that sat on 27/04/2016 under MIN.BDLC.211/04/2016, there are also some that appear in AWP but cannot be traced in the budget. i.e.;</p> <p>Health</p> <ul style="list-style-type: none"> • Renovation of male ward in Bududa hospital • Renovation of paediatric ward in Bududa hospital <p>The 2 projects are reflected on page 54 of AWP but can hardly be traced in the annual budget FY 2016/17.</p>
		<p>• Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. o 100%: score 4 o 80-99%: score 2 o Below 80%: 0</p>	2	<p>The investment projects implemented in the FY2016/17 were completed as per work plan by end of FY at 100%. See completion dates below;</p> <p>Health</p> <ul style="list-style-type: none"> • Renovation of male ward in Bududa hospital • Renovation of paediatric ward in Bududa hospital.- <p>Above 2 were completed 30/07/2017</p> <p>Water</p> <ul style="list-style-type: none"> • Construction of 20 springs in various s/cs. – Last one completed on 29/07/2017 and that was at Bushiyi and Bulukheke s/cs. • Construction of Bwalukani GFS in Bulucheke S/C.- completed 30/07/2017 <p>Education</p> <ul style="list-style-type: none"> • 2(6 classroom block) constructed at Bukiga and Bunandutu P/S.- completed 17/05/2017.

5	<p>The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects and assets during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2 	0	<p>The investment projects in the FY 2016/17 were not all completed within approved budget – Max. 15% plus or minus of original budget.</p> <p>For example;</p> <p>Health</p> <ul style="list-style-type: none"> Renovation of male ward in Bududa hospital Renovation of paediatric ward in Bududa hospital.- <p>Both the above Performed at 99.5%</p> <p>Water</p> <ul style="list-style-type: none"> Construction of Bwalukani GFS in Bulucheke S/C.- performed at 102% <p>Education</p> <p>2(6 classroom block) constructed at Bukiga and Bunandutu P/S.- performed at 101.25%. etc</p> <ul style="list-style-type: none"> Construction of 20 springs in various s/cs. Performed at 74.3% which is not within the approved budget – Max. 15% plus or minus of original budget
		<ul style="list-style-type: none"> Evidence that the LG has budgeted and spent at least 80% of O&M budget for infrastructure in the previous FY: score 2 	2	<p>From the LG budget and annual budget performance report FY 2016/17, it is evident that the LG budgeted and actually spent at least 80% of O&M for infrastructure.i.e spent 82.9%. See sector computations below;</p> <p>Administration 64.4%</p> <p>Health 0%</p> <p>Roads 76.9%</p> <p>Water 160.4%</p> <p>Natural resources 100%</p> <p>Production 82.9%</p>
Assessment area: Human Resource Management				

6	LG has substantively recruited and appraised all Heads of Departments	<ul style="list-style-type: none"> Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2 	0	<ul style="list-style-type: none"> There is no evidence of appraisals on personnel files or elsewhere for some HoDs during FY 2016/2017 e.g. Head of Education, Head of Natural Resources , and Head Finance.
	Maximum 5 points on this Performance Measure.	<ul style="list-style-type: none"> Evidence that the LG has filled all HoDs positions substantively: score 3 	0	<ul style="list-style-type: none"> For FY 2016/2017 four (4) positions of HoD were filled in acting capacity and not substantively; including Head of Finance, Head of Works & Technical Services, Head of Natural Resources, and Head of Production.
7	The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.	<ul style="list-style-type: none"> Evidence that 100 percent of staff submitted for recruitment have been considered: score 2 	2	<ul style="list-style-type: none"> DSC Minute Extracts, 01/2017, 02/2017; 03/2017, 08/2017 indicate considerations made for the declarations made during FY 2016/2017.
		<ul style="list-style-type: none"> Evidence that 100 percent of staff submitted for confirmation have been considered: score 1 	1	<ul style="list-style-type: none"> There were no submissions for confirmation made by the LG to the DSC during FY 2016/2017.
	Maximum 4 points on this Performance Measure	<ul style="list-style-type: none"> Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1 	1	<ul style="list-style-type: none"> Two (2) cases under submission 05/4/2017 of April for disciplinary action in FY 2016/2017 were duly considered.
8	Staff recruited and retiring access the salary and pension payroll respectively within two months	<ul style="list-style-type: none"> Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3 	0	<ul style="list-style-type: none"> There are cases of staff who accessed payroll after more than two (2) months of assumption of duty during FY 2016/2017.
	Maximum 5 points on this Performance Measure.	<ul style="list-style-type: none"> Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2 	0	<ul style="list-style-type: none"> There are cases of staff who retired in FY 2016/2017 who accessed the pension payroll after more than two (2) months of date of retirement or who have not accessed pensions payroll to date.
Assessment area: Revenue Mobilization				

9	<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • If increase in OSR from previous FY but one to previous FY is more than 10% : score 4 points • If the increase is from 5 -10% : score 2 point • If the increase is less than 5% : score 0 points. 	4	<ul style="list-style-type: none"> • The OSR increased in absolute values from UGX.112,898,877 in 2015/2016 to UGX. 150,471,861 in 2016/2017 by 34%.far more than 10%. • The source of the information is the Auditor General's Reports for 2015/2016 & 2016/2017 and the Audited Financial Statements for 2015/2016 & 2016/2017.
10	<p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10% : then 2 points. If more than +/- 10% : zero points. 	0	<ul style="list-style-type: none"> • The revenue collection ratio of actual collections against budgeted is UGX. 150,471,861 against UGX. 241, 358,000 which is 62.3%. It falls outside the +/- 10%. The reason of scoring zero. <p>From the Budget, Audited Financial Statements and the Auditor General's Report for 2016/2017</p>
11	<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2 	2	<ul style="list-style-type: none"> • Evidence was adduced for the remittances to LLGs of the local revenue collected from the sub counties. This was only possible for LST because the Market Revenue is collected at source (sub counties and Town Councils) where the 65% for the sub county is retained. The remittances were made for the 15 Sub counties and one Town Council (Bududa Town Council). • The amount remitted to the 15 Sub Counties and one Town Council was UGX. 31,355,000 represented 65% of the mandatory share of the Local Revenue effected on the 31st October 2016 evidenced from the payment vouchers of the Finance Department

		<ul style="list-style-type: none"> Evidence that the LG is not using more than 20% of OSR on council activities: score 2 	0	<ul style="list-style-type: none"> The Council spent UGX. 30,300,000 on Council activities (council and standing committee sittings) in the Financial Year 2016/2017. This was far more than the required UGX.22, 579,775 as the 20% limit for the actual collections of 2015/2016. There was no evidence to show that part of the funds spent on council activities was contributed by non wage unconditional Grant to justify that the Local Revenue spent on Council activities was below the 20% limit of the actual Local Revenue for 2015/2016.
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Assessment area: Procurement and contract management

12	<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2 	0	<ul style="list-style-type: none"> The PDU doesn't have a Senior Procurement Officer, and the position is under recruitment. The Procurement Officer is available running the Unit and is substantively appointed under Minute Min.12/2014 (e) vi under Bududa District Service Commission
		<ul style="list-style-type: none"> Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1 	1	<p>Records of the contracts committee held on 11th November 2016, reference number CC/11, indicate the various TEC reports that were received by the Contracts Committee.</p>

• Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1

1

Records of the Contracts Committee meeting indicate the various TEC recommendations that were considered or deviations with justifications, under Min.68/Budu.CC/11/2016. These included, among others;

- Construction of three classroom blocks with an office at Bukiga primary school and classroom furniture. This wasn't approved because the bidders quotation of shs. 96,147,267/= was higher than the budget estimate of shs. 89,000,000/=;
- Completion of Bulucheke Maternity Ward phase II, which was approved as requested by the TEC;
- Renovation of male and pediatric wards at Bududa Hospital, which was approved;
- Construction of 3 classroom blocks with an office at Bunandutu p/s in Bumayoka sub county, which was not approved because the bidders quotation of shs. 120,375,045/= was higher than the budget estimate of shs. 91,750,000/=
- Approved the completion of Bukibokolo Maternity Ward in Bukibokolo Sub County.

13	<p>The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.</p> <p>Maximum 2 points on this performance measure.</p>	<ul style="list-style-type: none"> • a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2 	2	<ul style="list-style-type: none"> • The Bududa district Consolidated Procurement Plan for Goods, Works, and services for financial year 2017/18 that was presented to the MoFEP and MoLG on 28th August 2017, shows the infrastructure projects to be undertaken in the education sector, which includes the construction of 6 classrooms at Bukiga and Bunandutu p/s, among others, as derived from local government annual work plan for the FY 2017/18, page 16. It also shows the infrastructure projects to be undertaken in the water sector, that were presented in the local government work plan for FY2017/18 as outputs on page 19. The procurement plan shows the infrastructure project (Construction of a theatre at Bulucheke Health Centre III) to be undertaken in the health sector. This was also derived from local government annual work plan for FY2017/18, page 14. • The entire infrastructural projects as presented in the procurement plan for FY 2016/17 were made. The quarterly procurement reports indicate that all the infrastructural projects were undertaken and were monitored and reports available such as; <ul style="list-style-type: none"> - Construction of GFS at Bumwalukani - Construction of classroom block at Bunandutu p/s - Construction of 2 stance pit latrine at Bukiga p/s - Renovation of Male and Paediatric ward at Bududa Hospital
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14

The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.

Maximum 6 points on this performance measure

- For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2

2

All the bid documents for all the infrastructural projects were prepared by the time of this assessment. The bid documents are available in their respective contract or procurement files; and they are also followed by bidders in the preparation of bids as reflected in the submitted by the bidders

- For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2

0

The PDU Bududa has an updated contract register for all the contracts that were conducted in the previous financial year. It shows the project name, the contractor, and the contract value, the date of award, commencement and completion dates.

According to the sampled files, the PDU however doesn't have completed procurement files. For completed projects, the site handover reports aren't on file. So it's difficult to understand whether the project was closed or not. They however have contract documents, contracts committee and TEC minutes, and progress.

		<ul style="list-style-type: none"> For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2. 	2	<p>PDU adhered to the procurement threshold. For all procurement in infrastructural that whose value was above, they were advertised in New Vision on Monday 10th October 2016 under the Open Bidding arrangements. For bids whose value was below shs. 50m, the LG published a tender Notice for 2016-17 (2), inviting companies under Selective Bidding for various projects on 17/Oct/2016. Sampled projects are;</p> <ul style="list-style-type: none"> Construction of 2 slaughter houses (open bidding) – contract value shs. 110,000,000/= Completion of Bulucheke Maternity Ward phase II (open bidding) - contract value shs.60,590,600/= Completion of Bukibokolo Maternity Ward (open bidding) - contract value shs.62,424,714/= Renovation of Male Paediatric Ward at Bududa Hospital (open bidding) - contract value shs. 369,537,861/= Reconstruction of 10 springs in selected 10 sub counties (Selective bidding) - contract value shs. 10,500,000/=
15	<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2 	2	<p>All the completed projects for the FY 2016/17, except for those that are still under retention, have Completion certificates signed by the District Engineer, the head of the User Department, the Internal Auditor, the Engineer Assistant/Project Supervisor and the CAO. The environment officer also prepares the environment certification form that informs the provision of the completion certificates. The certificates also show the Contractor, the project name and the contract sum involved. Interim Certificates are also available for projects to which they were required.</p>

		<ul style="list-style-type: none"> Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2 	0	<p>For all the visited sites that are under implementation for the FY 2017/18, there was no site board at the work stations. These visited includes the renovation Bududa Hospital Store and old Antenatal block. Other infrastructural projects in Health and Education sectors that were planned for the FY 2017/18 are yet to begin as procurement processes are still on-going. In water, sector, the water springs visited at Bumatenge village, Bumashete S/C and Bulome village, Nabwiya S/C had no site boards, yet works are still under defects period.</p>
Assessment area: Financial management				
16	<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4 	4	<ul style="list-style-type: none"> On checking the Cash Books (General Funds, Works, Health, Education), it was established that reconciliations were done for all the moths up to the 31st December 2017. This was evidence that the monthly and up to date bank reconciliations were up to date.
17	<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2. 	2	<ul style="list-style-type: none"> There were no outstanding obligations to suppliers all through the Financial Year that lasted beyond two months. This was established from the timing of the payment from the date the claims are made and this did not take more than two months for the payments documents examined. Evidenced from the Audited Financial Statements for the Financial Year 2016/2017, Auditor General's Report for 2016/2017 and payment vouchers for some of the key departments like Administration, health, Education, Works, Finance and Water.

18

The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations

Maximum 6 points on this performance measure.

- Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.

3

- The district LG has a substantive Senior Auditor appointed in 2009 under DSC minute 231/2009e.
- The Auditor produced all the four Internal Audit reports of 2016/2017 dated the 17th January 2017, 17th January 2017, 30th May 2017 and 29th June 2017 for first, second, third and fourth quarters respectively.

- Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries: score 2.

2

- There was evidence that the district provided information to the Council and LGPAC on the status of the Internal Audit.
- This was evidenced with the LGPAC reports submitted to the Chairman LCV and the Minister dated the 19th January, 15th February, 29th May, and 13th July 2017 obtained from the Clerk to Council.
- Follow up on the Audit Reports was evidenced with the LGPAC minutes for the sittings of the 31st January, 16th May, 27th June and 19th December 2017 obtained from the Clerk to Council.

- Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1

1

- The Internal Audit reports were submitted to the LG Accounting officer and LGPAC. This was evidenced by the 2016/2017 Internal Audit report submissions dated the 17th January 2017, 17th January 2017, 30th May 2017 and 29th June 2017 for first, second, third and fourth quarters respectively.
- Follow up on the Audit Reports was evidenced with the LGPAC minutes for the sittings of the 31st January, 16th May, 27th June and 19th December 2017 obtained from the Clerk to Council.

19	<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4 	0	<ul style="list-style-type: none"> The LG maintained an Assets Register (General & Motor Vehicles and Plants registers) conforming with the format prescribed in the Accounting Manual. This was updated to the most recent Assets acquired by the district. However, the Register for Land and Buildings contained only information for titled Land and buildings and not for all Land and buildings owned by the LG which should be the case.
20	<p>The LG has obtained an unqualified or qualified Audit opinion</p> <p>Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY: • unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0</p>	4	<ul style="list-style-type: none"> The opinion of the Audit of the Annual Financial Statements for the Financial Year 2016/2017 was unqualified. Evidenced from the Auditor General's Report for 2016/2017 dated December 2017.
Assessment area: Governance, oversight, transparency and accountability				
21	<p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p>	<p>Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2</p>	2	<ul style="list-style-type: none"> According to the minutes available for FY 2016/17, council sat i.e.on 26/05/2017,20/01/2017,13/04/2017 e.t.c. and yet during the council meeting that was held on 26/05/2017 under MIN. DLC 043/05/2017, there was the presentation, consideration and approval of the budget FY 2017/18. Also council deliberated on customisation of the staff structure FY 2017/18. Which is evident that council meets and discusses service delivery related issues.
22	<p>The LG has responded to the feedback/complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 2. 	0	<p>No person in place designated to coordinate this role</p>

23	The LG shares information with citizens (Transparency)	Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2	0	At the time of assessment, there was no LG display of Payroll and Pensioner Schedule on public notice boards or by any other means.
	Total maximum 4 points on this Performance Measure	• Evidence that the procurement plan and awarded contracts and amounts are published: score 1	0	Whereas some of the awarded contracts and amounts are published on the notice board, the the procurement plan wasn't seen published anywhere.
		• Evidence that the LG performance assessment results and implications, are published e.g. on the budget website for the previous year (from budget requirements): score 1.	0	N/A, Central government didn't conduct any performance assessment for LGs during the FY 2016/17.
24	The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens	• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1	1	There is an activity report where LLGs were guided on how to use PRDP3 and DDEG implementation guidelines which took place on 11/01/2017. • The FY 2017/18 IPFs for DDEG were seen displayed on the notice board.
	Maximum 2 points on this performance measure	• Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc..) with the public to provide feed-back on status of activity implementation: score 1.	0	There is no documentation to support the fact that LG during FY 2016/17 conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc..) with the public to provide feed-back on status of activity implementation.
Assessment area: Social and environmental safeguards				

<p>25</p>	<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2. 	<p>2</p>	<p>The GFP has conducted several activities aimed at gender mainstreaming in the local governments;</p> <ul style="list-style-type: none"> - The GFP person has notes and presentations made local governments on gender mainstreaming. - Minutes of meeting with the Community Development Officers about mentoring of staff on gender mainstreaming held on 18th May 2018 - A community Based Services Report, to which gender falls to the CAO showing the various gender activities done.
		<ul style="list-style-type: none"> • Evidence that gender focal point has planned activities for current FY to strengthen women's roles and that more than 90% of previous year's budget for gender activities has been implemented: score 2. 	<p>2</p>	<ul style="list-style-type: none"> • Page 3 and 4 of the Local government work plan indicates the various gender mainstreaming activities planned for the FY 2017/18. These are; conducting meetings on gender mainstreaming, Dissemination of the gender policy to technical staff and other political leaders, providing back up support in gender mainstreaming to local governments and conducting women council meetings • The Gender activities were budgeted for shs. 5.2m for the FY2016/17, this was implemented at a 100%.

LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition

Maximum 6 points on this performance measure

- Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 2

2

The environmental officer prepares and budgets for environmental screening for activities and projects at the LG. financing of these activities is done through the various projects. The office has various environmental screening reports such the environmental screening report and management plan for projects in Bukalasi Sub County in the FY2016/17 including;

- Rehabilitation of GFS at Bumulokoni, Bulucheke S/C
- Construction of two classroom block and office at Bukibalera p/s
- Construction of 5 stance line pit latrine at Bumukonya
- Construction of 5 stance line pit latrine at Namakuto p/s
- Construction of 5 stance line pit latrine at Lugaga p/s

- Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1

1

- All the bid documents and contracts have an environment issues incorporated into the bid documents and contracts, such as;
- Construction of 3 stance lined pit latrine at Bukitongo Trading Centre, Bukagi sub county
 - Construction of 3 classroom block at Footo p/s, Bushiyi sub county
 - Construction of 3 stance line pit latrine at Bufuma p/s
 - Construction of 2 slaughter houses
 - Construction of 3 classroom block with an office at Bukiga p/s in Bushika sub county

- Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1

0

There's still a weakness at the LG in processing land agreements or titles for all the infrastructural projects. And thus, they're currently no readily available proof of ownership of land at all project files.

		<ul style="list-style-type: none"> • Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2 	2	<p>For all projects completed and out of defect for the FY 2016/17, the Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer. These are;</p> <ul style="list-style-type: none"> • Construction of 3 stance lined pit latrine at Bukitongo Trading Centre, Bukagi sub county • Spring protection at Bushira, Nalwanza and Bukibokolo water schemes • Construction of 3 stance lined pit latrine at Bukitongo Trading Centre, Bukagi sub county • Construction of 3 stance line pit latrine at Bufuma p/s • Construction of 3 classroom block at Footo p/s, Bushiyi sub county.
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LGPA 2017/18

Educational Performance Measures

Bududa District

(Vote Code: 579)

Score 67/100 (67%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Human Resource Management				
1	<p>The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4 Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4 	4	<p>Out of 1085 teachers (staff ceiling), 728 posts filled leaving a gap of 357 teachers (35 headteachers, 17 deputy headteachers and 258 teachers). implying,each school not budgeted for a headteacher and 7 teachers for lack of budget. However, communications of 04/11/2016 and 11/10/2016 between district and PS/MoPS over the gap in staffing were available for viewing. District's effort to address the problem is there.</p> <p>Basing on the staff lists available the district has not rationally distributed the 728 teachers existing among the 89 schools in the district.The ratio of a headteacher to 7 teachers per school (i.e. at least 8 teachers per school) could be met by the existing teaching force bearing in mind that 27 schools do not have P.6 and P.7 classes.</p>
2	<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0 	0	<p>Out of the 1085 teachers, only 728 positions are filled giving 67.1%</p>

3	<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6 	6	<p>According to staff structure the 2 inspectors are in place and the recruitment plan for FY 2017/2018 has no provision for inspectors since the structure is filled.</p>
4	<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of Primary Teachers: score 2</p>	2	<p>The recruitment plan submitted alongside the performance contract for FY 2017/2018 had provision of 357 teachers positions to fill.</p>
		<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of School Inspectors: score 2</p>	2	<p>No evidence of recruiting inspectors in the recruitment plan since positions were not vacant.</p>

5	<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department appraised school inspectors during the previous FY • 100% school inspectors: score 3</p>	3	<ul style="list-style-type: none"> • There was evidence of appraisal form for the only one (1) Inspector of Schools during FY 2016/2017.
		<p>Evidence that the LG Education department appraised head teachers during the previous FY. • 90% - 100%: score 3 • 70% - 89%: score 2 • Below 70%: score 0</p>	0	<ul style="list-style-type: none"> • Of the eighty nine (89) head teachers during FY 2016/2017 there was evidence of appraisal forms for fifty nine (59) amounting to 66.3%.
Assessment area: Monitoring and Inspection				
6	<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1 	1	<p>Files of circulars on policies and guidelines from the centre and to the schools by DEO were in place. Departmental minutes of meetings and minutes of meetings with headteachers available were explaining policies and guidelines.</p>
		<ul style="list-style-type: none"> • Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level, including on school feeding: score 2 	2	<p>Minutes of meetings and attendance lists of 20/04/2017, 29/10/2016, 19/10/2017, 08/02/2017 among others were available and explaining issues of policies and guidelines.</p>
7	<p>The LG Education Department has effectively inspected all private and public primary schools</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all private and public primary schools have been inspected at least once per term and reports produced: o 100% - score 12 o 90 to 99% - score 10 o 80 to 89% - score 8 o 70 to 79% - score 6 o 60 to 69% - score 3 o 50 to 59% score 1 o Below 50% score 0. 	6	<p>Basing on inspection reports of quarters 1 - 65.9; 2 - 45.2%; 3 - 59.3%; 4 - 72.8% of schools inspected respectively out of 134 schools (89 - government and 45 - private), an average of 60.8% schools were inspected.</p>

8	<p>LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4 	4	<p>Minutes of departmental meetings studied, indicated that inspection reports were discussed, action taken and issues discussed were followed. Minutes of meetings of 28/12/2016; 25/10/2016; 10/06/2017; 0/09/2016; 15/06/2017 had evidence on this.</p>
		<ul style="list-style-type: none"> Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2 	2	<p>Evidence at source indicated that inspection reports were written and submitted: quarter 1 - 30/11/2016 & 04/03/2017; quarter 2 - 20/12/2016 & 04/03/2017; quarter 3 - 05/05/2017 & 26/07/2017; and quarter 4 - 14/07/2017 & 09/08/2017 respectively to DES Regional offices - Eastern. Though DES headquarters indicate that they were not received, evidence show they were submitted. However, delay in preparing and submitting reports was noted.</p>
		<ul style="list-style-type: none"> Evidence that the inspection recommendations are followed-up: score 4 	4	<p>Follow-up reports of 10/06/2017; 08/06/2017; as examples were in place to illustrate this.</p>
9	<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5 	5	<p>Basing on comparisons made between EMIS data secured from MoES and list of schools in the OBT at district, the data on names and number of schools is the same.</p>
		<p>Evidence that the LG has submitted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and OBT: score 5</p>	0	<p>When enrolment figures at district in statistical forms was read against EMIS data from the MoES, there were mismatches emanating from entering different figures from the statistical forms and total variations altogether. For example: Manjiya P/S (6535) - 466boys & 453girls instead of 465boys & 447girls; Buddha P/S (6532) - 345boys & 368 girls instead of 345boys & 363girls.</p>
Assessment area: Governance, oversight, transparency and accountability				

10	<p>The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc...during the previous FY: score 2 <ul style="list-style-type: none"> • Evidence that the education sector committee has presented issues that requires approval to Council: score 2 	2	<p>During a committee meeting that sat 05/04/2017, under MIN.05/APRIL/2017, an annual sector work plan for Education FY 2017/18 presented by the DEO was discussed which is evident that the council committee responsible for education met and discussed service delivery issues.</p> <p>The committee meeting that sat 08/12/2016 under MIN. 05/12/SS/2016, the following were some of the recommendations forwarded to council for approval;</p> <ul style="list-style-type: none"> • That the infrastructure constructed at schools should be opened for use as they wait for official commissioning. • That the committee members and the DEO should develop strategies to approach issues concerning operation of private education institutions. e.t.c...
11	<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0</p>	5	<p>Information established indicate that all SMCs to all schools are appointed and expire at the same time in 2019. Appointment letters of SMC members and minutes at DEO's office and at schools indicated so.</p>
12	<p>The LG has publicised all schools receiving non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3 	0	<p>There was no evidence on notice boards both at district and departmental notice boards of display of these funds to the public to view.</p>

Assessment area: Procurement and contract management

13	<p>The LG Education department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30: score 4 	4	<p>The procurement annual work plan in place had all the procurement requests made with time schedules of investment items.</p>
14	<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points 	3	<ul style="list-style-type: none"> • The LG Education department made timely certification and recommendations for payments to suppliers in time. This was evidenced from the payments documents (vouchers, funds requisition forms, interim certificates) for the following projects; Construction of three classrooms at Bukiga Primary school, construction of three classrooms in Bunandutu Primary school, retention for Pit Latrine at Busamaali Primary School, retention for classroom construction at Bukari Primary School, retention for construction of a Latrine at Bulumino Primary School

Assessment area: Financial management and reporting

15	<p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by mid-July for consolidation: score 4 	0	<p>Education department submitted the annual performance report for the FY 2016/17 and is consolidated in the district annual budget performance report but no acknowledgement of receipt in the planning unit was seen to establish whether it was submitted in time.</p>
16	<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points o If all queries are not responded to score 0 	2	<ul style="list-style-type: none"> The sector had three (3) queries for the Financial Year 2016/2017 evidenced with the Internal Audit Management letters (dated the 13th March and 19th May 2017) on areas of lacking accountability for the Inspection activities by the Schools Inspectors, UPE for two schools, responses from queried officers and the final Internal Audit Reports for all the four quarters submitted by the Internal Auditor as UPE accountabilities inform of receipts, acknowledgements, These demonstrated all the Audit processes in the district.

Assessment area: Social and environmental safeguards

17	<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc...: Score 2 	2	<p>In partnership with Straight Talk Foundation as minutes and communication in file revealed, women and men senior teachers have been trained and issues of better life for girls and boys inclusive are being handled in schools.</p>
		<ul style="list-style-type: none"> Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2 	2	<p>In each school under partnership with Straight Talk Foundation there is a focal person to handle issues of sanitation and guidelines were issued.</p>

		<ul style="list-style-type: none"> • Evidence that the School Management Committee meet the guideline on gender composition: score 1 	1	According to appointment letters of SMC members and their minutes of meetings, each SMC has at least 3 women members.
18	<p>LG Education department has ensured that guidelines on environmental management are disseminated</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 3: 	3	Minutes of meetings between DEO's office and headteacher, have indicated that there is regular communications on environment. A circular guiding schools on environment issues dated 29/08/2016 was in place. A visit to schools revealed impact of the effort especially at Bukiga P/S and to a certain extent at Bubiita P/S.



LGPA 2017/18

Health Performance Measures

Bududa District

(Vote Code: 579)

Score 50/100 (50%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Human resource planning and management				
1	<p>LG has substantively recruited primary health workers with a wage bill provision from PHC wage</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that LG has filled the structure for primary health workers with a wage bill provision from PHC wage for the current FY • More than 80% filled: score 6 • 60 – 80% - score 3 • Less than 60% filled: score 0</p>	6	<ul style="list-style-type: none"> • Review of the performance contract 2017/18 and approved structure revealed that there are 250 established position filled. • Review of wage IPFs for the current year revealed that there are 264 positions of health workers with a wage bill provision for the year 2017/18 • Hence 94.7% of the structure for primary health workers with a wage bill provision from PHC wage for the current FY has been filled.
2	<p>The LG Health department has submitted a comprehensive recruitment plan to the HRM department</p> <p>Maximum 4 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers: score 4</p>	4	<ul style="list-style-type: none"> • From the performance plan, a staff recruitment plan for the current year 2017/18 was reviewed and it was established that vacant positions of health workers had been included. • In addition it was established that a 3 year staff recruitment plan had been made and a request to HRM made
3	<p>The LG Health department has ensured that performance appraisal for health facility in charge is conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the health facility in-charge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0</p>	0	<ul style="list-style-type: none"> • There was no evidence that the In-Charge of the only hospital (Bududa) in the district was appraised during FY 2016/2017; there are no HC IVs in the district.

4	<p>The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4 	4	<p>Health workers were deployed in accordance with the staff lists submitted together with the budget in the current 2016/27</p> <ul style="list-style-type: none"> This was the case in all other health facilities visited Bukalasi HC III, Bulucheke HCIII, Bushika HC III, Bushiyi HC III and bududa Hospital
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Assessment area: Monitoring and Supervision

5	<p>The DHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3 	0	<ul style="list-style-type: none"> There was no evidence to indicate that the DHO communicated ALL of the following guidelines issued by the national level in the previous year: <ol style="list-style-type: none"> PHC grants guidelines 2016/17 MoH guidelines for eye care – October 2016 Uganda Clinical Guidelines – 2016 Essential Medicines & Health Supplies List – 2016 MoH Resettlement Policy Framework – 2016 Health Sector Quality Improvement Framework and Strategic Plan 2015/16 – 2019/20, June 2016 <p>During the visit to the health facilities I established that two of the guidelines above (Essential Medicines & Health Supplies List – 2016 and Uganda Clinical Guidelines – 2016) had been received the previous day from National Medical Stores during the delivery of Medicines and supplies and that the DHO had no information of their delivery.</p>
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		<ul style="list-style-type: none"> Evidence that the DHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3 	0	<ul style="list-style-type: none"> A review of minutes of the quarterly DHT meetings held on the 29th September 2016, 4th January 2017, 31st March 2017 and 28th June 2017 revealed no evidence that the DHO had held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level
6	<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3</p>	3	<ul style="list-style-type: none"> From the review of the quarterly DHT support supervision reports (quarter 1 compiled on the 13th October 2016, Quarter 2 compiled on the 2nd January 2017, quarter 3 compiled on the 3rd April 2017 and quarter 4 report compiled on the 24th July 2017) it was established that the DHT did indeed supervise the district hospital. Note that there are no HC IVs in Bududa district. This was further collaborated by evidence from the supervision log book at Bududa Hospital
		<p>Evidence that DHT has supervised lower level health facilities within the previous FY: • If 100% supervised: score 3 points • 80 - 99% of the health facilities: score 2 • 60 - 79% of the health facilities: score 1 • Less than 60% of the health facilities: score 0</p>	1	<ul style="list-style-type: none"> Review of quarterly DHT support supervision reports revealed that different members of the DHT supervised different lower HFs at different times throughout the year 2016/17. The DHO explained that there were not enough resources to enable each DHT officer to go to each of the 15 lower HFs each quarter considering that about 5 of them are hard to reach. Effective supervision would mean each DHT officer supervising each HF once every quarter. Reports indicated that 10 lower HFs were effectively supervised. Hence just over 60% of facilities

7	<p>The Health Sub-district(s) have effectively provided support supervision to lower level health units</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that health facilities have been supervised by HSD and reports produced:</p> <ul style="list-style-type: none"> • If 100% supervised score 6 • 80 - 99% of the health facilities: score 4 • 60 - 79% of the health facilities: score 2 • Less than 60% of the health facilities: score 0 	2	<ul style="list-style-type: none"> • Review of HSD quarterly support supervision reports from Bududa Hospital revealed that 9 of the 14 lower HFs were effectively supervised (i.e. each DHT officer supervising each HF once every quarter). Hence just over 60% of facilities
8	<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4 • Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6 	4	<ul style="list-style-type: none"> • Review of minutes of HSD meetings of quarter 2 held on the 14th February 2017 and 4th quarter meeting held on the 28th June 2017 in minute HSD2-3/2017: communication from the chair and minute 06/06/2017: way forward respectively, mention was made of the support supervision and recommendations were made • There was no evidence to show that the recommendations to follow-up
9	<p>The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> o List of health facilities which are consistent with both HMIS reports and OBT: score 10 	0	<ul style="list-style-type: none"> • The lists of facilities in OBT and HIMS are not consistent – Bulucheke HCIII was omitted from the OBT list yet it is on the HMIS list provided from MoH. • It is important to note that there are NGO HFs on the HIMS list though not a subject of this assessment
Assessment area: Governance, oversight, transparency and accountability				

10	<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2 <ul style="list-style-type: none"> • Evidence that the health sector committee has presented issues that require approval to Council: score 2 	2	<p>During a committee meeting that sat 05/04/2017, under MIN.03/APRIL/2017, an annual sector work plan for Health FY 2017/18 presented by the DHO was discussed which is evident that the council committee responsible for education met and discussed service delivery issues</p> <p>The committee meeting that sat 05/04/2017 under MIN. 04/APR/2017, the following were some of the recommendations forwarded to council for approval;</p> <ul style="list-style-type: none"> • That the contractors with substandard works, payment should be with held. • That the councilors are to be part of LC III councils to advise LLGs during planning cycle e.tc <p>Implying that that the Health sector committee sat and presented issues that required approval to Council.</p>
11	<p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 5 points</p>	<p>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> • If 100% of randomly sampled facilities: score 5 • If 80-99% : score 3 • If 70-79%: : score 1 • If less than 70%: score 0 	3	<ul style="list-style-type: none"> • 4 of the sampled HFs (Bududa Hospital, Bukalasi HC III, Bulucheke HCIII and Bushika HC III - all quarterly HUMC meeting were held and minutes were reviewed • In Bushiyi HC III only minutes for 3 quarterly meetings were seen

15	<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 2 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points 	2	<ul style="list-style-type: none"> • The DHO made timely certification and recommendations for payments to suppliers in time. This was evidenced from the payments documents (vouchers, funds requisition forms, interim certificates) for the following projects; Wards in Bududa hospital, Bulucheke Health Centre III, Bukibokolo Health Centre III, Water System in Bududa Hospital, Office Stationery, Solar System for DHO's Administration Block, staff meals and Fuel for the department.
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Assessment area: Financial management and reporting

16	<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4 	0	<p>Health department submitted the annual performance report for the FY 2016/17 and is consolidated in the district annual budget performance report but no acknowledgement of receipt in the planning unit was seen to establish whether it was submitted in time.</p>
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17	<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points</p> <ul style="list-style-type: none"> • If all queries are not responded to score 0 	2	<ul style="list-style-type: none"> • The sector had two (2) Audit queries for the Financial Year 2016/2017 evidenced with the Internal Audit Management letters (dated the 13th March and 19th May 2017) which included lacking accountability for the DHO's support supervision, and supply of fuel for the department. The responses from queried officers and the final Internal Audit Reports for all the four quarters submitted by the Internal Auditor included all the required documentation and included, the invoices, LPOs, receipts and supervision reports from the DHO. These demonstrated all the Audit processes in the district.
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Assessment area: Social and environmental safeguards

18	<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> • Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2 	2	<ul style="list-style-type: none"> • A review of lists of Health Unit Management Committee (HUMC) members at the sampled health facilities: (Bududa Hospital, Bukalasi HC III, Bulucheke HCIII, Bushika HC III and Bushiyi HC III) revealed that all met the gender composition as per guidelines (i.e. more than two females on the HUMC).
		<ul style="list-style-type: none"> • Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2 	0	<ul style="list-style-type: none"> • No evidence that the LG issued guidelines on how to manage sanitation in health facilities including separating toilet facilities for men and women. • Bududa Hospital has toilet facilities in out patients department separated. Bukalasi HC III did not have toilet facilities separated for men and women.
19	<p>The LG Health department has issued guidelines on medical waste management</p> <p>Maximum 2 points</p>	<ul style="list-style-type: none"> • Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal : score 2 points. 	0	<ul style="list-style-type: none"> • No evidence of guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal at any of the sampled health facilities



LGPA 2017/18

Water & Environment Performance Measures

Bududa District

(Vote Code: 579)

Score 57/100 (57%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: score 10 	10	<p>From the District annual workplan 2017/18 dated 31st July 2017 received at MWE on 7TH August 2017, the district safe water coverage is at 69.43%.</p> <p>The district has targeted sub counties which have a safe water coverage below the district. These include: Bukalasi at 54.32% where 2 springs will be protected, GFS design and survey undertaken, GFS rehabilitation and spring reconstruction to be done. Bushika at 55.68% where 3 springs are to be protected, Bumasheti at 61.61% where 2 springs to be protected and 1 GFS to be rehabilitated</p>

2	<p>The LG Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15 	15	<p>From the District annual work plan 2016/17 dated 4th August 2016 received at MWE on 9th August 2017 the district safe water coverage is at 64.43%. 4th quarter Progress report for District for financial year 2016/17 dated 31st July 2017. The subcounties with safe water coverage below that of the districts include Bukigai at 39%, Nabweya at 40%, Bushiribo at 51 %, Bukalasi at 56% and Bushika at 61 %. Of these sub counties, implementation took place in Bukigai where there was reconstruction of 3 springs, Bushiribo reconstruction of 2 springs, Bukalasi there was protection of 3 springs and Bushika protection of 2 springs.</p> <p>Point of concern:</p> <p>The District went ahead to construct in s/c with very high safe water coverages e.g . Bududa s/c with coverage of 132% one spring was protected, Bukibokolo s/c with coverage of 121% 2 springs were constructed, Nalwanza at 128% one spring protected there, Buwali s/c at 108% a GFS extension undertaken, Nakatsi s/c at 112% a GFS reconstruction.</p>
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Assessment area: Monitoring and Supervision

3	<p>The LG Water department carries out monthly monitoring and supervision of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>			<p>From the district 4th quarter Progress report for District for financial year 2016/17 dated 31st July 2017 the district implemented the following projects:</p> <ul style="list-style-type: none"> - Protection of 20 springs and reconstruction of 10 springs - Construction of three stance vip latrine in Namaitu rural growth centre and Renovation of sanitary facility at water office. - Survey, design, documentation including Environmental Impact Assessment of Subisi gravity flow scheme in Bukalasi sub county. - Extension of Bukibokolo gravity flow scheme in Bumasheti and rehabilitation of intake works of Bushika and Bubiita gravity flow schemes
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Evidence that the LG Water department has monitored each of WSS facilities at least annually. • If more than 95% of the WSS facilities monitored: score 15 • 80 - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60 - 69% monitored: score 5 • 50 - 59%: score 3 • Less than 50% of WSS facilities monitored -score 0

10

- Rehabilitation of Bududa Town Council borehole
 - Construction of Bumwalukani gravity flow scheme in bulucheke sub county phase one
- Projects were monitored as evidenced in the letters from District Water Officer as the Contract Manger to the Chief Administrative Officer indicating progress of the projects and field site meetings held. A sample of these letters include
- One dated 25th August 2017 with a subject of project status for construction of Bumulukwani Gravity Flow Scheme under Water Sector in Bulucheke s/c.
 - Another field brief is dated 12/5/2017 on Survey , design, documentation and EIS of Subisi GFS in Bukalasi.
 - Another field brief to CAO IS DATED 30TH april 2017 on 3rd quarter field supervision and monitoring report of water and sanitation facilities.
 - Another field brief was one prepared by Shibale Tom the Assistant Engineering Officer. The subject on this brief was on implementation report for rehabilitation of boreholes in Bududa town council. The Project name was Rehabilitation of Borehole in Bududa T/C by Force Account mechanism. This brief was copied to Head Internal Audit and Head PDU. There was no date on this brief

4	<p>The LG Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data for the current FY: o List of water facility which are consistent in both sector MIS reports and OBT: score 10 	0	<p>For the current financial year no construction is complete yet hence no data has been submitted to the centre.</p>
Assessment area: Procurement and contract management				
5	<p>The LG Water department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4</p>	4	<p>The District water officer submitted the Procurement requisitions in time. This is evidenced by a letter dated 10th August 2017 from the Ag. District Engineer to the Chief Administrative Officer. The subject of the letter was submission of Procurement Plans and requisitions for Technical Services Department.</p> <p>A sample of the requisitions included</p> <ul style="list-style-type: none"> - Protection of 20 medium springs in 5 batches. This was signed by the Ag. District Engineer on 10th August 2017 and by CAO on 14th August 2017. - Construction of intake pipeline reservoir and tap stands signed by the Ag. District Engineer on 10th August 2017 and by CAO on 14th August 2017.

<p>The DWO has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> If the DWO prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2 	0	<p>The CAO wrote a letter to the Heads of Departments, Senior Assistant Secretary and Sector Heads requesting them to identify contract managers. This letter is dated 5th January 2018 and subject of the letter is Nomination of Contract Managers and Confirmation of Funds for the Projects.</p> <p>The DWO who is acting District Engineer responded to the letter. The letter is dated 9th January 2018 subject is nomination of Contract Managers in Technical Services Department. A list of those nominated is in this letter.</p> <p>However, CAO has not yet written to the respective officers and no contract management plans can be prepared without officers knowing which contracts they are to supervise</p>
	<ul style="list-style-type: none"> If water and sanitation facilities constructed as per design(s): score 2 	0	<p>Visited works are not yet completed.</p> <ul style="list-style-type: none"> Bulowo spring in Bumalenge B Village in Buname Parish in Bumashete s/c . The catchment area is not protected. There are eucalyptus trees around, no grass has been planted, there is no fence yet around the catchment area. The floor where the water spills has eroded yet the spring was completed on 30/11/2011. Possibility of little cement used in concrete mix. Nakayalya Spring in Nakayalya village in Nabweya subcounty completed on 4/12/2017 no grass has been planted, there is no fence yet around the catchment area. The floor where the water spills has eroded . <p>Contractor has to complete the works and also rectify the floor where water spills. Need to reconstruct it.</p>
	<ul style="list-style-type: none"> If contractor handed over all completed WSS facilities: score 2 	0	<p>Works for current financial year not yet complete.</p>

		<ul style="list-style-type: none"> If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2 	0	Works for current financial year not yet complete
7	<ul style="list-style-type: none"> Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 	<ul style="list-style-type: none"> Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 	3	<ul style="list-style-type: none"> The DWO made timely certification and recommendations for payments to suppliers in time. This was evidenced from the payments documents (vouchers, funds requisition forms, interim certificates) for the following projects; Bwalukani gravity Flow Scheme in Bulucheke Sub County, fuel for the department, protected springs in various Sub Counties.

Assessment area: Financial management and reporting

8	<p>The LG Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5 	0	Water department submitted the annual performance report for the FY 2016/17 and is consolidated in the district annual budget performance report but no acknowledgement of receipt in the planning unit was seen to establish whether it was submitted in time.
9	<p>LG Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 5 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0 	3	<ul style="list-style-type: none"> The sector had queries three (3) for the Financial Year 2016/2017 evidenced with the Internal Audit Management letters (dated the 13th March and 19th May 2017) and these included lack of certification and inspection reports from the DWO, lacking supervision reports by the pump mechanics for the rehabilitation works, responses from queried officers and the final Internal Audit Reports for all the four quarters submitted by the Internal Auditor. The responses included Inspection reports, supervision reports and certifications reports. These demonstrated all the Audit processes in the district.

Assessment area: Governance, oversight, transparency and accountability

10	<p>The LG committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3 	3	<p>During a committee meeting that sat 05/04/2017, under MIN.Tech/15/4/2017, an annual sector work plan for Water FY 2017/18 presented by the DWO was discussed which is evident that the council committee responsible for education met and discussed service delivery issues</p>
		<ul style="list-style-type: none"> • Evidence that the water sector committee has presented issues that require approval to Council: score 3 	3	<p>The committee meeting that sat 05/04/2017 under MIN.Tech/16/4/2017, the following were some of the recommendations forwarded to council for approval;</p> <ul style="list-style-type: none"> • That the public should be sensitized on maintenance of public latrines, piped water schemes • That they should prepare an ordinance to address water and sanitation issues. i.e. protection of constructed spring wells, GFS' e.tc
11	<p>The LG Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> • The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2 	0	<p>There were no display of AWP, budget and the Water Development grant releases on the district notice boards.</p>

		<ul style="list-style-type: none"> • All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2 	0	<p>The visited facilities were poorly labelled. The public can hardly see the labels. The information included date construction, name of source, village name, sub county and contractor. Source of funding was missing. The facilities visited included</p> <ul style="list-style-type: none"> - Bulowo spring in Bumalenge B Village in Buname Parish in Bumashete s/c. - Nakayalya Spring in Nakayalya village in Nabweya su bcounty - Namawululu spring in Namawululu village in Nabweya Sub County.
		<ul style="list-style-type: none"> • Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2 	0	<p>With an excuse of having limited notice board space, water related Information on tenders and contract awards were not seen displayed on the District notice board at the time of assessment</p>
12	<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1 	1	<p>Subcounty writes to the District with lists of communities that require a water source. Some applications are for years back. A sample of such a letter from Bumayoka subcounty dated 14/June/2017 to CAO Thru District Engineer had a list of springs for protection for FY 2017/18. The letter was signed and stamped by SAS of that s/c.</p> <p>Some receipts was evidence that communities pay. These were issued by Bududa District Local Government.</p> <ul style="list-style-type: none"> - Receipt No. 14851 dated 22/12/2017 of UGX 50,000/= for Bunabwamba spring. - Receipt no 14852 dated 2/1/2018 of UGX 50,000/= for Wanaswa spring. - Receipt no. 14853 dated 2/1/2018 of UGX 50,000 for Nasimba spring

		<ul style="list-style-type: none"> • Number of water supply facilities with WSCs that are functioning evidenced by collection of O&M funds and carrying out preventive maintenance and minor repairs, for the current FY: score 2 	0	<p>Information on the visited springs</p> <ul style="list-style-type: none"> - Bulowo spring in Bumalenge B Village in Buname Parish in Bumashete s/c . - Nakayalya Spring in Nakayalya village in Nabweya subcounty - Namawululu spring in Namawululu village in Nabweya subcounty. <p>The construction works is not yet complete hence communities have not yet started collecting o&m funds. The Gravity flow construction and other works have not yet started.</p>
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Assessment area: Social and environmental safeguards

13	<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2 	2	<p>Screening for projects carried out for springs in Bushiro, Nalwanza and Bukikobolo as per Environmental Certification dated 10th January 2018.</p> <p>EIA is being done for Bumwalukani GFS. A draft copy of ESIA report for the proposed Bumwalukani Gravity Flow scheme prepared by Namono Marion as Team Leader was presented to the assessor. Work is still ongoing.</p> <p>Environment and Social safeguard Screening for rehabilitation of Bumuluwani was done as evidenced by a report prepared by Marion Namono, the Environment Officer. This was received in the central registry of the District on 12th October 2017.</p>
		<ul style="list-style-type: none"> • Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1 	0	<p>There was no evidence of follow up support on the springs in Bushiro, Nalwanza and Bukibokolo.</p>

		<ul style="list-style-type: none"> • Evidence that construction and supervision contracts have clause on environmental protection: score 1 	0	<p>Contracts sampled included:</p> <p>a) For completion of Bumwalukani Gravity Flow Scheme and Rehabilitation /Construction of intake works for Nalwanza, Bududa and Bukibokolo GFS and Rehabilitation of 8 boreholes under Water Sector. Procurement Ref, BUD579/WRKS/2017-2018/00008 Contractor W.K.S Hard ware Limited. UGX 152,517,360</p> <p>b) Reconstruction of 10 springs in selected subcounties. Procurement Ref BUDU579/WRKS/2017-2018 /00010 by M/S Namboka U ltd. Of UGX 9,180,720/=</p> <p>c) Protection of 10 medium springs in selected subcounties Batch 02 Contract No. Budu579/Wrks/17-18/00009</p> <p>There was no clause on Environment Protection in the sampled contracts.</p>
14	<p>The LG Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • If at least 50% WSCs are women as per the sector critical requirements: score 3 	3	<p>The facilities visited included</p> <ul style="list-style-type: none"> - Bulowo spring in Bumalenge B Village in Buname Parish in Bumashete s/c . - Nakayalya Spring in Nakayalya village in Nabweya subcounty - Namawululu spring in Namawululu village in Nabweya subcounty. <p>For these facilities 50% of WUC membership are women.</p>

15	<p>Gender- and special-needs sensitive sanitation facilities in public places/RGCs.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none">• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3	0	There was no sanitation facility constructed.
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