



## LGPA 2017/18

Accountability Requirements

Buikwe District

(Vote Code: 582)

Assessment	Compliant	%
Yes	3	50%
No	3	50%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Assessment area: Annual performance contract			
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.	xxx	Buikwe District Submitted Final he Performance Contract on 07/10/2017. <i>Source: MoFPED 'Status of Submission of Performance Contracts FY 2017/18</i>	No
Assessment area: Supporting Documents for the Budget required as per the PFMA are submitted and available			
LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).	xxxxx	The Budget and Procurement Plan were submitted to Ministry of Finance on 27th May 2017	Yes
Assessment area: Reporting: submission of annual and quarterly budget performance reports			
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)	xxxxxx	The Annual Performance Report was submitted on 1st August, 2017 – SN 0864 – late submission	No
LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)	xxxxxxx	Buikwe DLG Submitted all four quarterly reports, but submitted the fourth quarter report on 1st August, 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"> <li>• The district submitted the status of implementation of audit recommendations to the Internal Auditor General on 17th March, 2017. The status on implementation of audit recommendations to the Public Accounts Committee of Parliament was submitted on 15th March, 2017.</li> <li>• The internal auditor General's report had nine audit queries while OAG's report had 6 audit queries. The Local Government provided information on the status of implementation of all the audit recommendations.</li> </ul>	<p>Yes</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer</p>	<p>XXXXX</p>	<p>According to the Auditor General's report for the FY 2017, the audit opinion on the financial statements of Buikwe Local Government was unqualified.</p>	<p>Yes</p>



## **LGPA 2017/18**

Crosscutting Performance Measures

Buikwe District

(Vote Code: 582)

Score 59/100 (59%)

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"> <li>• A functional Physical Planning Committee in place that considers new investments on time: score 2.</li> </ul>	0	<p>The District PPC was constituted in 2016 April and has had only three meetings ( 10/04/2017 &amp; 18/04/2017; Reason: difficult to realize quorum especially from the MCs, and the fact that there is no budget provision. The Physical Planner reported that they mainly depend on the plans fees which are irregular.</p> <p>Buikwe Town Council has a functional Physical Planning Committee – Because of the small number of submissions, the Town Physical Planning Committee is only able to meet on a quarterly basis</p> <p>However, was not able to access the plan registration book in the absence of the Town Physical Planner</p>
		<ul style="list-style-type: none"> <li>• All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2.</li> </ul>	0	<p>Buikwe District and Buikwe Town Council have no structural plans but Physical Planning Committees exist at both the District and in Buikwe Town Council.</p> <p>The submitted Plans Registration Books are in place but not all plans are considered within the stipulated 28 days. As a result, not all ongoing construction has been approved.</p> <p>However, was not able to access the the Buikwe Town Council Plan Registration book in the absence of the Town Physical Planner</p>

2	<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</p>	<ul style="list-style-type: none"> <li>• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.</li> </ul>	0	<p>To a great extent priorities in AWP for FY 2017/18 are based on the outcomes of TPC meetings and the budget conferences, but there was inconsistency in project description and there was no documentation to explain this anomaly.</p>
		<ul style="list-style-type: none"> <li>• 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.</li> </ul>	0	<p>To a great extent the prioritized investment activities in the approved AWP for 2017/2018 were derived from the approved five-year development plan. However, there was inaccurate documentation in the description of some projects. that is, inconsistency between 'construction of new' as opposed to 'rehabilitation"</p> <p>This inconsistency was not documented in any of the official fora.</p>
		<ul style="list-style-type: none"> <li>• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1.</li> </ul>	0	<p>Not all planned investments had project profiles. Only four projects had profiles.</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"> <li>• 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.</li> </ul>	1	<ul style="list-style-type: none"> <li>• Attempts to disaggregate information by sex – population, school, health and CBS seen in the Annual Statistical Abstract</li> </ul>
4	<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	2	<p>Evidence from the 4th Quarter Report for FY 2016/17 indicates adherence to Annual Budget and Workplan.</p>

		<ul style="list-style-type: none"> <li>• 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</li> </ul>	0	In the absence final completion certificates, it was difficult to establish the percentage of projects completed.
5	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	<ul style="list-style-type: none"> <li>• Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2</li> </ul>	2	To a great extent projects were within planned budget except where there was supplementary budgeting resulting from release of more funds in the sectors. The variations were supported by relevant approvals.
	Maximum 4 points on this Performance Measure.	<ul style="list-style-type: none"> <li>• Evidence that the LG has budgeted and spent at least 80% of O&amp;M budget for infrastructure in the previous FY: score 2</li> </ul>	2	the LG Planned to spend 135,158, and the actual was 123,977 – less by 11%

Assessment area: Human Resource Management

6	LG has substantively recruited and appraised all Heads of Departments	<ul style="list-style-type: none"> <li>• Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>• No Evidence that Chief Engineer, Principal Finance Officer and DHO were appraised.</li> <li>• For District Natural Resources Officer performance Agreement availed but no Performance Appraisal Report on file,</li> <li>• For District Production Officer both Performance Agreement and performance Report availed</li> </ul>
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		<ul style="list-style-type: none"> <li>Evidence that the LG has filled all HoDs positions substantively: score 3</li> </ul>	0	<ul style="list-style-type: none"> <li>The under-mentioned are not substantively filled;</li> <li>1) DEO is filled in acting capacity. Clearance was obtained from MOPS in November to confirm the holder and letter to this effect seen.</li> <li>2) CDO is filled in acting capacity. Permission sought from MOPS to recruit from among those in the dept. Letter seen but no feedback from MOPS at the time of assessment.</li> <li>3) Commercial Officer is vacant and the Senior Commercial is acting as DCO. This is a new position which was not budgeted for in previous FY. The structure was approved in January 2017 as per letter from MPS signed by PS.</li> </ul>
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"> <li>Evidence that 100 percent of staff submitted for recruitment have been considered: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>List of staff submitted seen. Minutes of the DSC indicating consideration of recruitment seen Ref: Min. BDSC 21/2017.1 dated 24/04/2017</li> <li>As reported under Para 6, the case of Internal Auditor is still pending since May 2017 up to the time of assessment.</li> </ul>
	Maximum 4 points on this Performance Measure	<ul style="list-style-type: none"> <li>Evidence that 100 percent of staff submitted for confirmation have been considered: score 1</li> </ul>	1	<ul style="list-style-type: none"> <li>Minutes of DSC seen indicating staff submitted for confirmation considered. Ref: MinBDSC21/2017/.A (VI) dated 23/04/2017.</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1</li> </ul>	1	<ul style="list-style-type: none"> <li>Extracts from the BDSC indicated that two cases relating to health were considered and deferred to CAO. Ref :BDSC 472016 dated20/09/2016</li> <li>Another case of Sub County Chief was submitted to DSC but no feedback as yet.</li> </ul>



8	<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	3	<ul style="list-style-type: none"> <li>• List of staff recruited during the 2016/2017 FY seen and access to Payroll verified.</li> </ul>
	<p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	0	<p>Correspondence was seen relating to staff retired in FY 2016/17 and 2018. These people have not accessed the payroll.</p> <p>Lists of staff submitted to Ministry of Public Service seen. .</p>

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>I obtained the following information from note 2 of the financial statements for FY 2017 and 2016</p> <table border="1" data-bbox="967 981 1508 1198"> <thead> <tr> <th></th> <th>2017</th> <th>2016</th> </tr> </thead> <tbody> <tr> <td>Local revenue</td> <td>535,081,933</td> <td>398,465,505</td> </tr> <tr> <td>Less revenue from Kawolo</td> <td>101,919,920</td> <td>0</td> </tr> <tr> <td>District revenue for year</td> <td>433,162,013</td> <td>398,465,505</td> </tr> </tbody> </table> <p>Increase in revenue = 433,162,013 – 398, 465,505 = 34,696,508</p> <p>% increase = 34,696,508/398,696,508 X 100 = 8.7%.</p> <p>Note: The revenue for the year 2017 included revenue from Kawolo Hospital, which was previously preparing its own financial statements but was advised by the auditor General to consolidate its accounts with the district accounts effective FY 2017. This revenue was excluded from the computation of the revenue increase because it was not included in the 2015/2016 accounts yet for purposes of comparison the district should have restated its prior year financial statements.</p>		2017	2016	Local revenue	535,081,933	398,465,505	Less revenue from Kawolo	101,919,920	0	District revenue for year	433,162,013	398,465,505
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	<p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• If increase in OSR from previous FY but one to previous FY is more than 10% : score 4 points</li> <li>• If the increase is from 5 -10% : score 2 point</li> <li>• If the increase is less than 5% : score 0 points.</li> </ul>	2													

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"> <li>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.</li> </ul>	0	<p>Revenue performance for FY2017 obtained from note 2 of the financial statements for FY2017 was as follows;</p> <p>Actual revenue collected 535,082,933</p> <p>Budgeted revenue 457,232,000</p> <p>Revenue performance = <math>535,082,933/457,232,000 \times 100 = 117\%</math></p> <p>This represents realisation of +17%</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"> <li>Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>I reviewed financial statements for FY2017 and confirmed that all revenue due to LLG was remitted.</li> <li>I also reviewed minutes between the district and LLGs where the two discussed settlement of their accounts</li> </ul>						
		<ul style="list-style-type: none"> <li>Evidence that the LG is not using more than 20% of OSR on council activities: score 2</li> </ul>	2	<p>I obtained the following information from financial statements for the FY 2017</p> <p>Council costs</p> <table border="0"> <tr> <td>Council allowances</td> <td>25,632,000</td> </tr> <tr> <td>Travel inland</td> <td>14,230,000</td> </tr> <tr> <td>Total</td> <td>39,862,000</td> </tr> </table> <p>Total cost as % of local revenue <math>39,862,000/433,162,013 \times 100 = 9.2\%</math></p> <p>This was less than the 20% required by the regulations.</p>	Council allowances	25,632,000	Travel inland	14,230,000	Total	39,862,000
Council allowances	25,632,000									
Travel inland	14,230,000									
Total	39,862,000									

Assessment area: Procurement and contract management

12

The LG has in place the capacity to manage the procurement function

Maximum 4 points on this performance measure.

- 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

2

- Appointment letters for the Senior Procurement officer and Procurement officer were availed for review

- Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1

1

Evidence of TEC reports to the Contracts Committee were seen. Sampled reports included:

- Construction of 2, 3 in 1 new classroom at Nbombwe P/S in Ngogwe S/C (BUIK 582/WRKS/16-17, / 00007, ITB No: 08)
- Construction of 2, 3 in 1 new classroom at Kiwanyi P/S in Nyenga S/C (BUIK 582/WRKS/16-17, / 00007, ITB No: 01)
- Supply of Storage cabinets for textbooks for primary schools under Lot 3 (Buik 582/Supls/1/16-17/00001)
- Construction of a 2 classroom block with office at Buinja Quran P/S (Procurement Ref No: Buik 582/Wrks/16-17/00016). However, the best evaluated bidders price (96,893,819 VAT Incl) was higher than the budget (92,278,000), and TEC recommended that the Contracts Committee negotiate with the contractor before the contracting process proceeds.
- Construction of Mechanised water system (Lot 6) in Butembe and Buwagajjo villages in Nyenga Division (Buik 582/Wrks/16-17/00014-06)

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

1

There was evidence of adoption of recommendation of TEC by Contracts Committee. For example;

- TEC recommendation for construction of 2, 3 in 1 new classroom at Nbombwe P/S in Ngogwe S/C (BUIK 582/WRKS/16-17/ 00007, ITB No: 08) which the Contracts Committee adopted in Minute Ref 06/DCC/2016-17 dated 22nd November 2016
- TEC recommendation for Construction of 2, 3 in 1 new classroom at Kiwanyi P/S in Nyenga S/C (BUIK 582/WRKS/16-17, / 00007, ITB No: 01) was adopted and approved by Minute Ref 06/DCC/2016-17 dated 22nd November 2016
- Contracts committee adopted the TEC recommendations as per initiation minute (Ref no: 02/DCC/2016-17, held on 1st September 2016) and approved under contracts committee meeting ref no:03/DCC/16-17 held on 4th of October 2016
- For Procurement Ref No: Buik 582/Wrks/16-17/00016, Buinja Quran works, the negotiations by the contracts committee as per minute no.07/DCC/16-17 held on 9th January 2017 according to TEC recommendations were successfully and the contractor was awarded the contract
- TEC recommendation for construction of Mechanised water system (Lot 6) in Butembe and Buwagajjo villages in Nyenga Division (Buik 582/Wrks/16-17/00014-06) was approved by the contracts committee according to Meeting ref no: 08/DCC/2016-17 held on 23rd January 2017

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"> <li>• 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</li> </ul>	2	<ul style="list-style-type: none"> <li>• Procurement plans for 2016-17 and 2017-18 were seen and signed on 13th July 2016 and 7th November 2017 respectively</li> <li>• Budget Estimates of revenue and expenditure for FY 2016/17 dated may 11th 2016 and for FY 2017/18 dated 26th May 2017 were seen</li> <li>• Comparison was made between the annual work plans and budget and procurements made in the previous year were as per procurement plan e.g. constructions undertaken in the education, roads and engineering and health were catered for in the annual work plan.</li> </ul> <p>Sampled; Construction of classroom blocks funded by Embassy of Iceland was budgeted for as implemented. Construction of an administration block (item 12 of the work plan 16-17) was planned for and implemented</p>
14	<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2</li> </ul>	0	<p>The bids documents were not ready by August 30 2017, and up to date, still 80% is not done.</p> <p>According to the officer, budgeting is generally done, but until funds are realised, the bid documents cannot be made.</p> <p>Further, the infrastructure projects supported by donor agencies often follow the donor budget cycles in as much as they are included in the LG plans. In the case of Buikwe, 32 primary schools in Najja, Ngogwe and Ssi Sub counties were planned for yet the Embassy of Iceland (under the Buike district fishing communities development program) is yet to approve some of these activities</p>

<ul style="list-style-type: none"> <li>For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>A contracts register covering the entire FY 2016/2017 was not seen except the quarterly reports submitted to PPDA</li> <li>The procurement files are incomplete since they don't contain the copies of the final accounts/payments made as the last item. According to PDU, these certificates are kept with accounts office and duplicating them is difficult given the financial constraints. Otherwise the rest of the procurement processes from procurement requisition, bid documents, sourcing, evaluations, appointment of supervisor, contracts are all provided</li> </ul>
<ul style="list-style-type: none"> <li>For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.</li> </ul>	2	<p>Evidence of adherence to procurement thresholds was seen and sampled as below:</p> <p>a) Threshold for Open domestic bidding</p> <ul style="list-style-type: none"> <li>Construction of Senyi gravity flow scheme system BUIK 582/Wrks/2016-17/00013, valued at 224, 715,562 (VAT incl), under Open domestic bidding. Contract Committee decisions as per meeting Ref no: 09/DCC/2016-17 held on 16th March 2017 and advert released through the New vision 18th November 2016</li> <li>Construction of the Administration block valued at 234,809,333 (vat Incl.) ref no: Buik 582/Wrks/16-17/00017 was procured under open domestic bidding as per advert released through the New vision 18th November 2016 and both TEC and Contracts committee approvals were made on 1/5/2017 and</li> </ul> <p>b) Under Micro procurements with a threshold of up to 5, 000,000/=, a 4th quarter micro procurement report date 10th July 2017 for FY 2016/17 was seen with requisitions for fund notes, vouchers, and reports</p> <p>c) Under request for Quotation threshold (10 to 500 million shillings, we sampled the procurement for the "Supply, Delivery of a Heavy duty photocopying machine, installation. Three quotations were received from</p>

			<p>Mbogo Investments ltd, City side Investments ltd and Trump commodities &amp; Supply Ltd. TEC made evaluations and recommendations which were adopted and Mbogo Investments was awarded under Procurement ref no: Buik 582/Supls/2016-17/00008</p> <p>d) Under selective bidding for Construction of a 5 stance lined Pit latrine (Buik 582/Wrks/16-17/00019), a procurement requisition was generated by the user department (Education), and approved by CFO and CAO. Procurement invited three companies were invited to tender, but only two bought the bid document. A technical evaluation was conducted, report submitted to CC and the contract award on 7th April 2017 (valued at 20,473,000/- vat incl)</p>
15	<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>		<p>Certificates availed were for the following works projects :</p> <ul style="list-style-type: none"> <li>* Construction of a VIP latrine at Sangazira P/S in Ngogwe s/c dated 14/12/2017 for Rodeto Contractor Ltd</li> <li>* Construction for one 3 in 1 classroom block with office and store and One new 3 in 1 classroom without office at Kagombe Superior Primary school in Nyenga Subcounty. Ref no. Buik 582/Wrks/16-17/00007-02 by Lokika Enterprises Ltd. (Substantial completion certificate dated 12/07/2017 signed by the Engineer and CAO)</li> <li>*Construction for one 3 in 1 classroom block with office and store at Muvo Primary school in Ssi Subcounty. Ref no. Buik 582/Wrks16-17/0000-11 by NASMAF General Contractors Ltd (Substantial completion certificate dated 18/12/2017 signed by the Engineer and CAO)</li> <li>*Construction for one 3 in 1 classroom block with office and store at Ssi C/UPrimary school in Bbunkunja Subcounty. Ref no. Buik 582/Wrks/16-17/00007-10 by ZIPO Technologies Ltd. (Substantial completion certificate dated</li> </ul>

<ul style="list-style-type: none"> <li>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</li> </ul>	0	<p>13/07/2017 signed by the Engineer and CAO)</p> <p>*Construction for one 3 in 1 classroom block with office and store and One new 3 in 1 classroom without office at Busagazi Primary school in Najja Subcounty. Ref no. Buik 582/Wrks/16-17/00007-04 by RHADE Construction Company Ltd. (Substantial completion certificate dated 12/06/2017 signed by the Engineer and CAO)</p> <p>*Construction for one 3 in 1 classroom block with office and store and Two new 3 in 1 classroom without office at Busiri Primary school in Najja Subcounty/ Ref no. Buik 582/Wrks/16-17/00007-07 by NKAMBO Services Ltd. (Substantial completion certificate dated 12/06/2017 signed by the Engineer and CAO)</p> <p>*Construction for one 3 in 1 classroom block with office and store and One new 3 in 1 classroom without office at Buzama Primary school in Najja Subcounty (Substantial completion certificate dated 12/06/2017 signed by the Engineer and CAO)</p> <p>* Construction of classroom block and store at Senyi P/S at Ssi S/C for Luwalira Besigaki Construction Company Ltd dated 14/12/2017</p> <p>However, according to the PDU, they don't receive copies of these certificates and the mandate for generating and keeping such documents lies with the Engineering department.</p> <ul style="list-style-type: none"> <li>Certification for water works, energy saving stoves etc. though implemented was not seen.</li> </ul>
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		<ul style="list-style-type: none"> <li>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</li> </ul>	0	<p>From the three sites visited,</p> <ol style="list-style-type: none"> <li>The site board was available for the ICEIDA/GOU project at Kidokolo P/S for construction of a 5-stance Lined VIP latrine (Lot 2) but the contract value was not indicated</li> <li>There was no site board at the Sacred Heart Najja SS at the time of the assessment yet works were ongoing (Renovation of 1 block of staff houses and four blocks of classrooms)</li> <li>There was no site board at Ssangazira P/S in Ssi Bukunja s/c yet construction of a 5-stance Lined VIP latrine was on-going</li> </ol>
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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"> <li>Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4</li> </ul>	4	<ul style="list-style-type: none"> <li>All the 14 district bank accounts had bank reconciliations prepared up to December, 2017; however, all the reconciliation statements were not checked by a senior person.</li> </ul>
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"> <li>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.</li> </ul>	0	<p>From a sample of 30 supplier invoices reviewed, 10 invoices had been overdue for more than two months</p>

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.

0

I reviewed the staff establishment to ascertain vacant positions. I also interviewed the acting principal internal auditor and established that;

- The internal audit department is headed by an acting principal internal auditor who is substantively appointed as Senior Accountant and he has been acting for two years. Two auditors were appointed in July and October, 2017 respectively. The district advertised the position of Principal Internal auditor but did not attract qualifying candidates. Hence the District does not have substantive Principal Internal Auditor and Senior Internal Auditor.
- However, the acting internal auditor produced quarterly internal audit reports for the FY 2016/2017

- 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

I reviewed the district Public accounts Committee (DPAC) reports for FY 2016/2017 dated 16th September, 2016, May, 2017 and confirmed DPAC had discussed internal audit reports and the Chief administrative Officer had submitted the status of implementation of internal audit findings for discussion.

- 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

I also reviewed responses to audit queries from the sectors to CAO and CAOs responses to DPAC.

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"> <li>• 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</li> </ul>	4	<p>The district maintains four separate asset registers for;</p> <ul style="list-style-type: none"> <li>i. computers and equipment,</li> <li>ii. motor vehicles and plant,</li> <li>iii. furniture and fittings,</li> <li>iv. Land and buildings.</li> </ul> <ul style="list-style-type: none"> <li>• The asset registers are also in a format that complies with treasury accounting regulations.</li> </ul>
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:</p> <ul style="list-style-type: none"> <li>• unqualified audit opinion: score 4</li> <li>• Qualified: score 2</li> <li>• Adverse/disclaimer: score 0</li> </ul>	4	<ul style="list-style-type: none"> <li>• According to the Auditor General's report for the FY 2017, the audit opinion on the financial statements of Buikwe Local Government was unqualified.</li> </ul>
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	<p>Council Minutes</p> <p>MIN/COU: 05/24/08/2017 – PAC reports discussed / Vanilla byelaws from LLGs tabled</p> <p>Min/COU: 54/26/05 – 2017</p> <p>Approval of Estimates of INCOME AND EXPENDITURE 2017/2018</p> <p>Reports discussed in committees – they meet six times –</p> <p>Appointment of Members of Area Land Committees – MIN/COU: 44/15/03/2017</p>

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"> <li>Evidence that LG has designated a person to coordinate response to feedback (grievance /complaints) and responded to feedback and complaints: score 2.</li> </ul>	2	<p>The Planner was designated Coordinator to respond and / or give feedback to issues raised on the Budget Website. A letter for this designation was seen.</p> <p>The Planner reported that there been no complaints apart from appreciation comments.</p>
23	<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<p>Evidence that the LG has published:</p> <ul style="list-style-type: none"> <li>The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>The officer in charge of HR expressed difficulty in accessing the pensioner schedule form Ministry of Public Service.</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that the procurement plan and awarded contracts and amounts are published: score 1</li> </ul>	1	<ul style="list-style-type: none"> <li>Notices declaring tender awards were posted on the public notice board at the district headquarters</li> </ul>
		<ul style="list-style-type: none"> <li>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.</li> </ul>	0	<p>N/A. The Central Government did not conduct the Annual Performance Assessment for LGs in 2016/17</p>
24	<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1</li> </ul>	1	<p>Both the CAOs Office and the Planner had evidence of disseminating information from the centre – e.g. Approved structures for Government Institutions; National Agricultural Extension Policy; and Guidelines for Discretionary Development Equalization Grant. Signed Circulation lists were seen.</p>

		<ul style="list-style-type: none"> <li>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.</li> </ul>	1	<p>Evidence in the 'MINUTES OF BUIKWE DISTRICT LEADERS CONSULTATIVE MEETING HELD ON 10th April 2017 AT THE DISTRICT HEADQUARTERS' when the CAO - out of Monday Top Management Meetings, it was resolved to have a District Leaders Consultative meeting where all stakeholders come on board and discuss on issues that would benefit the District as a whole.</p> <p>the rationale for Leadership Forum is: To give an accountability (situation analysis), progress on key service delivery units; To provide a platform for Local Leaders to highlight the key bottlenecks to service delivery in their local authorities and provide practical solutions on how to address them; and also to serve as Platform for resource mobilization especially for the unfunded priorities</p>
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Assessment area: Social and environmental safeguards

25	<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"> <li>Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2.</li> </ul>	2	<p>A document titled 'Guidelines for Addressing gender and Equity Issues in the budge framework paper (BFP) dated October 2016 was seen. According to the GFP, these were the guidelines provided to the departments</p> <p>However, there was no evidence of minutes of meetings with departments as further support etc.</p>
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		<ul style="list-style-type: none"> <li>• 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.</li> </ul>	<p>Gender activities planned for the current year were seen in the approved annual work plan.</p> <p>However no progress/mentoring reports and action plans were seen</p> <p>The district budget for gender mainstreaming for FY 2016-17 and 2017-2018 is 1 million shillings</p> <p>For FY 2016-17, the entire 1 million shillings (100%) specifically for gender mainstreaming activities was requisitioned and spent on developing a gender based violence tool by the GFP as per financial report/claim/reports seen</p> <p>Further, from the CFO, the budget for CDS was 255 million, 448million was spent and wages were 61m.</p>
26	<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>The following Screening reports signed by the Natural resource officer were seen:</p> <ul style="list-style-type: none"> <li>• Report A dated 13th June 2016 included; Light grading of Manki-Busagazi Rd (16km), Light grading of Nkonkojeru-Namukuma Rd(11KM), Installation of Culverts at Kisisita Kawomya-Senyi Rd</li> <li>• Report B: Construction of the medical store at the district headquarters dated 13th June 2017</li> <li>• Report B dated 4th August 2016 was for construction of Latrines in fishing villages, Borehole drilling, construction of hand dug wells</li> <li>• A report titled "Environmental and Social Screening for Report for water sources, VIP latrines dated 9th March 2017 included screening for Construction of VIP Latrines in Fishing villages, Borehole drilling/construction, Construction of Hand dug wells</li> </ul>

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

1

Contract documents seen that showed inclusion of environmental issues in contracts include:

- Construction of a 3 in 1 staff house and school kitchen in 14 primary schools in Najja, Ngogwe, Nyenga and Ssi Bukunja subcounties in Buikwe district (Ref no: Buik 582/Wrks/2016-2017/00027)

- Phased construction of a Maternity ward at Buikwe HC/III in Buikwe Town council (ref no: Buik582/Wrks/17-18/00013 provided for environmental mitigation works

- A copy of the bid document for procurement of water supply system for selected fishing villages in Buikwe district dated June 2016 (ref no: Buik 582/Wrk/16-17/00014) had technical specifications for environmental mitigation measures

- Construction of a 5 stance VIP Latrine at Ssangazira Primary school bid document for Rodeto Contractos Ltd dated 11 October 2017 has a clause for environmental mitigation

- The Bid document Submitted by ANDERAS Co. Ltd for Construction of 12 Classrooms at Victoria Secondary school in Ssi Bukunja S/S under BDFCDP-Education (ref no:BUIK 582/Wrk/17-18/00008-02) catered for environmental issues

• 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

Evidence seen was generally for projects implemented in the villages or schools on behalf of the donors, where the beneficiary has to consent to offer part of their land to the activity. Offers for land that were seen were for construction of a water reservoir tanks in various villages all signed by the Land owner, LC1 Chairperson and Sub county chief

On the other hand, there was no evidence/proof of ownership in terms of land agreement/titles for the land onto which the district infrastructure is located. According to PDU the land returned to the Buganda Land board. However, there is on-going effort to acquire a lease title for the land as evidenced in the letter signed by the CAO and district chairperson to the Buganda Land Board.



• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2

2

Copies of ESM certificates signed and stamped by the departments included:

- Certificate for completion of construction of VIP Latrines of the Senyi-Kibizi Zone Ssi Subcountry (certificate no: 002/WD/15-16), Ssi Health centre III Senyi (001/WD/15-16), Senyi St Peters P/S (004/wd/15-16) etc all dated 14th April 2016

- Certificate for the spring protection works (004/SP/WD/15-16: Nakitengeto project) dated 10th June 2016

- Certificate for completion of Borehole drilling (003/PW/WD/15-16 : Kikondo Production well-landing site) dated 16th May 2016

The NR officer printed out copies for An ESMP Review report for the proposed construction of BB Power service station at Bulyantete village, kawolo division, in Lugazi municipal council addressed to the ED, NEMA dated 11th May 2017

EIA Report for the proposed Mill House and Boiling House at G.M Sugar in Buikwe District, addressed to the ED, NEMA dated 11th march 2014

EIS report for the proposed solar panel battery manufacturing plant at Naminya-Buloba village, Wakisi sub-county dated 2nd July 2015



## **LGPA 2017/18**

Educational Performance Measures

Buikwe District

(Vote Code: 582)

Score 53/100 (53%)

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"> <li>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</li> </ul>	4	<p>From the budget and list of staff, it was confirmed that at least 1 head teacher and 7 teachers were budgeted for.</p> <p>Staff lists, payrolls and list of schools were seen</p> <p>All serving teachers and head-teachers were on the pay roll</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"> <li>Evidence that the LG has filled the structure for primary teachers with a wage bill provision               <ul style="list-style-type: none"> <li>If 100% score 6</li> <li>If 80 - 99% score 3</li> <li>If below 80% score 0</li> </ul> </li> </ul>	3	<p>There is availability of performance contract, staff lists, payrolls and list of schools. However, of the 74 head teachers, 31 are substantive, the rest (43) are acting (they are at the rank of deputies)</p> <p>From the staff lists, 8 schools have less than 7 teachers, for they have only 6 teachers. The gap is caused by retirement, death and promotions.</p> <p>The available gap for teachers is 19 (3%) that need to be filled. Reasons for gaps include those who have retired, those promoted to headship and abs-condiment. Evidence was drawn from staff lists and LG approved structure.</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"> <li>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</li> </ul>	0	<p>From the approved structure and the budget, there is a wage bill provision for the 3 inspector. However, only 1 inspector has been deployed . A copy of advertisements from the news paper (New Vision: External advert No. 01/2018) to fill the inspector positions was available.</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>Recruitment plan work plan/ budget 2017/18 was seen. It was dated 6/April/2017. The recruitment plan was to fill the inspector positions.</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>Recruitment plan for inspectors for FY 2017/2018 was seen at the time of this assessment. It was dated 6/April/2017</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>	0	<p>No Appraisal Report for the inspector was seen on file at the time of the assessment.</p>
		<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"> <li>There are 73 primary schools. 24 head teachers were appraised and appraisal forms were available. The rest were not available.</li> </ul>

Assessment area: Monitoring and Inspection

<p>6</p>	<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"> <li>• 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</li> </ul>	<p>0</p>	<p>The circulars are available in the DEOs office but the head teachers of the 4 sampled schools did not have them.</p> <p>Communication of the contents of circulars was reported verbally in meetings and using Watsup</p> <p>Some of the minutes seen include:</p> <p>Meeting held on 23rd/Aug/2017 at Victoria Secondary School, and 28/ SEPT/2017</p> <p>From the minutes, the head-teachers were communicated to about the contents of the guidelines, policies, circulars issued by the national level, including on school feeding</p>
		<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>2</p>	<p>The DEO holds meetings with head teachers</p> <p>There is evidence of minutes of meetings held twice a term, at the beginning and end of term. The minutes were seen and they are for the year 2017</p> <p>Meeting held on 23rd/Aug/2017 at Victoria Secondary School, and 28/ SEPT/2017 at New Hope Primary School- Nkokonjeru</p>
<p>7</p>	<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"> <li>• 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.</li> </ul>	<p>6</p>	<p>Quarterly Inspection reports for both private and government aided were seen in the DEOs Office.</p> <p>Of the 4 sampled schools, only 3 had copies inspection reports. 33% of the schools had not been inspected in the previous year.</p> <p>The inability to inspect all schools was said by the DEO to be lack of inspection staff as indicated by the DEO</p>

LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations

Maximum 10 for this performance measure

- 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

From the departmental minutes, there was evidence that the Education department had discussed school inspection reports.

For example, from the minutes dated 28/sept/2017 for a meeting held at New Hope Primary School, it was recommended that the schools which did not meet the minimum standards be closed before opening of next academic year. It was also recommended that all head teachers adhere to the feeding policy

- 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

0

From DES records, no Inspection reports were submitted, although the DEO had copies in his office

According to the DEO, the reason for not submitting was that he is overwhelmed with work

- Evidence that the inspection recommendations are followed-up: score 4

4

From the minutes of corresponding meetings seen, a number of recommendations had been made: E.g regarding closing of schools which follow standards, an attempt had been made to close them but with limited success due to opposition from parents and political leaders.

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>• Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5</p>	0	<p>DEO only provides list of government schools</p> <p>List of private primary schools was not available</p> <p>DEO claims to have inadequate manpower</p>
	<p>Maximum 10 for this performance measure</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>DEO only provided enrollment data for government schools</p> <p>Boys – 13,645</p> <p>Girls – 14,489</p> <p>Total 38,131 (only Govt)</p> <p>Enrollment for private primary schools was not available</p> <p>EMIS Data government aided schools was as follow:</p> <p>Boys: 32685</p> <p>Girls: 33514</p> <p>Total= 66199 (both Govt &amp; Private)</p>
<p>Assessment area: Governance, oversight, transparency and accountability</p>				

10

The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council

Maximum 4 for this performance measure

• 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

2

Buikwe DLG has one Social Services Committee that considers issues of Education, Health and Water

• Min 15/SSC/14/12/2017 – Presentation and Discussion of 1st Quarter Reports

• Min SSC 24/28/04/2017: Presentation of Supplementary 2016/2017

• Min SSC 14/17/01/2017: Presentation and discussion of 1st and 2nd Quarter Performance Report for FY 2016/2017

• Min SSC 04/17/08/2016: Overview of Departmental Programs, funding status, Staffing and Challenges.

• MIN 09/JSC/10/2017: Consideration of Reports of Statutory Bodies – DSC, DPAC, DLB,

• Evidence that the education sector committee has presented issues that requires approval to Council: score 2

2

The Social Services Committee discussed Education Sector Work Plans under Minute Min SSC 19/13/02/2017 – Presentation and Discussion of Departmental Work plans for FY 2017/2018 , and later presented in full council.



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>	3	<p>Minutes of SMCs in the 4 sampled government schools were seen. There is evidence of availability of SMCs as evidenced by minutes of meetings. List of SMCs in various schools was availed for only government schools by</p> <p>Private unlicensed schools 167 (65%)</p> <p>Private licensed 16 (6%)</p> <p>Government aided 73 (29%)</p> <p>Total 256 (100%)</p>
12	<p>The LG has publicised all schools receiving non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<p>• Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3</p>	3	<p>All schools receiving non-wage recurrent grants were listed on notice boards by the time of this assessment</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"> <li>• 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</li> </ul>	4	<p>The procurement request plan/ budget was dated 5th April 2017/18 and available</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"> <li>• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	0	<ul style="list-style-type: none"> <li>• Reviewed 10 payments and found that the shortest time it took to initiate payment was one day and the longest was 14 days Payment requests for financial year 2016/2017 were seen. There was no justification for for the department to take 14 days to recommend a supplier for payment.</li> </ul>
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"> <li>• 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</li> </ul>	4	<p>Education Department submitted report to Planner on 11th July, 2017</p> <p>Other quarterly reports were submitted</p> <p>1st Quarter - 14th October, 2016</p> <p>2nd Quarter – 10th January, 2017</p> <p>3rd Quarter – 13/04/2017</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"> <li>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</li> </ul>	2	<p>I reviewed internal audit reports for four quarters of FY 2017 which was submitted to the Internal Auditor General on 17th March, 2017</p> <ul style="list-style-type: none"> <li>Internal Audit findings on the sector</li> </ul> <table border="1" data-bbox="1037 425 1525 649"> <thead> <tr> <th>Quarter 1</th> <th>Quarter 2</th> <th>Quarter 3</th> <th>Quarter 4</th> </tr> </thead> <tbody> <tr> <td>No. of queries :</td> <td>5</td> <td>7</td> <td>0</td> </tr> <tr> <td></td> <td></td> <td></td> <td>5</td> </tr> </tbody> </table> <p>The department had 17 audit queries in the year which were responded to and subsequently dropped. Hence non was included in the final report submitted to the internal Auditor General.</p>	Quarter 1	Quarter 2	Quarter 3	Quarter 4	No. of queries :	5	7	0				5
Quarter 1	Quarter 2	Quarter 3	Quarter 4													
No. of queries :	5	7	0													
			5													

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"> <li>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</li> </ul>	2	<p>Guidelines for addressing gender and equity issues in the budget framework paper were available</p> <p>Constructed latrines for male, female were seen in the 4 sampled schools</p> <p>SMCs composition had both male and female, although the female were only 3 in all the committees seen</p>
		<ul style="list-style-type: none"> <li>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</li> </ul>	0	<p>No evidence minutes from education or gender department that indicates meeting for explanation of guidelines on how to manage sanitation for girls and PWDs in primary schools</p> <p>SMCs composition had both male and female. The average number of female representatives was 3 out of the total of 11 and in some cases 12 members</p>

		<ul style="list-style-type: none"> <li>• Evidence that the School Management Committee meet the guideline on gender composition: score 1</li> </ul>	1	<p>List of SMCs from the 4 sampled schools only 3 had functional SMCs and with both male and female representatives. In all the sampled schools where SMCs were functional, the composition membership for female was 2. The SMCs were composed of 11 members as follows: Chairperson, treasurer, secretary, 5 members, one parent representative and teachers representative. The guidelines requires that atleast 3 members are female</p>
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"> <li>• 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:</li> </ul>	3	<p>There were a few guidelines and not in the form of official circulars on environmental management. A copy of gender activities at district level was also seen</p> <p>A file containing Minutes of meetings between DEO and teachers was reviewed and I did not get a specific minute on environment</p>



## **LGPA 2017/18**

Health Performance Measures

Buikwe District

(Vote Code: 582)

Score 54/100 (54%)

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</p> <ul style="list-style-type: none"> <li>• More than 80% filled: score 6 points,</li> <li>• 60 – 80% - score 3</li> <li>• Less than 60% filled: score 0</li> </ul>	6	<p>The district has a staffing norm is 84% with most of the technical posts filled. The support staff for the health facilities such as askaris and nursing assistants have not been filled. The district recruited during the last and current financial year and approved advert for Kawolo hospital with key cadre of staff on 10th February 2018</p>
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	<p>Recruitment plan is available for the period 2015/16-2019/20 and was certified by the DHO and personnel officer.</p>
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>	4	<ul style="list-style-type: none"> <li>• No appraisal report for the In charge of the District Hospital</li> <li>• Out of 12 Health Facility in charge 11 were appraised. which is percentage of 91.67 %. Appraisal Reports seen were availed.</li> </ul>

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"> <li>• 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</li> </ul>	4	<p>Health workers have been recruited and equitably distributed within the 13 health facilities. A staffing list is available for each cadre of staff as of June 2017</p>
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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"> <li>• Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3</li> </ul>	0	<p>The policies and guidelines have been received from MoH and are available in good numbers at the DHOs office and some at the health facility level (ART guidelines, HCT policy, malaria job aides). No evidence that communication has been made on these policies and guidelines. No circulars from MoH were seen at DHO's office. Policies and guidelines are delivered by MoH and partners during support supervision and mentoring visits.</p>
		<ul style="list-style-type: none"> <li>• 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</li> </ul>	0	<p>No evidence that policies have been explained during meetings</p>
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>	0	<p>The District has no HC IVs and no support supervision has been done specifically for Kawolo Hospital.</p>

		<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>	2	<p>Support supervision reports for last and current financial year integrated and vertical supervision such as EPI and FP. includes the main government hospital-Kawolo and lower level health facilities</p> <p>All health facilities have been supervised although in intervals. The district supervises health facilities within the two municipalities and its own in Buikwe south leading to a total of 60 health facilities. In December 2017, 34/53 (64%) supervised by the district. This is inclusive of Lugazi and Njeru municipality health facilities.</p>
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: • If 100% supervised score 6 points • 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</p>	2	<p>Kawolo hospital (Head of Buikwe South HSD) has supervised Lugazi municipality, Njeru municipality and Buikwe south HSD. They have both public and private not for profit health facilities and not all are supervised by the HSD.</p>
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>	<p>• Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4</p>	0	<p>No action plans seen following support supervision. Action plans from meetings seen for 2016 and 2017 but no responsible person and evidence that actions agreed had been followed up and implemented</p>
		<p>• Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6</p>	0	<p>No evidence that the recommendations are followed up and specific corrective actions undertaken.</p>



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"> <li>• Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> <li>o List of health facilities which are consistent with both HMIS reports and OBT: score 10</li> </ul> </li> </ul>	10	<p>Both public and NG health facilities that receive PHC funds are reflected in the OBT. Private facilities that submit HMIS are not reflected in OBT.</p>
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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"> <li>• 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</li> </ul>	2	<p>Buikwe DLG has one Social Services Committee that discussed issues of Education, Water and education as per quoted minutes.</p> <ul style="list-style-type: none"> <li>• Min SSC 14/17/01/2017: Presentation and discussion of 1st and 2nd Quarter Performance Report for FY 2016/2017</li> <li>• Min SSC 04/17/08/2016: Overview of Departmental Programs, funding status, Staffing and Challenges.</li> <li>• MIN 09/JSC/10/2017: Consideration of Reports of Statutory Bodies – DSC, DPAC, DLB,</li> </ul>
		<ul style="list-style-type: none"> <li>• Evidence that the health sector committee has presented issues that require approval to Council: score 2</li> </ul>	2	<p>Buikwe District has one Social Services Committee that discusses issues for Education, Health and Water as evidenced in the minutes quoted below</p> <ul style="list-style-type: none"> <li>• Min SSC 24/28/04/2017: Presentation of Supplementary 2016/2017</li> <li>• Min SSC 19/13/02/2017 – Presentation and Discussion of Departmental Workplans for FY 2017/2018</li> </ul>

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"> <li>• If 100% of randomly sampled facilities: score 5</li> <li>• If 80-99% : score 3</li> <li>• If 70-79%: : score 1</li> <li>• If less than 70%: score 0</li> </ul>	5	<p>HUMC have been established in randomly sampled health facilities. Budget and resources are discussed during quarterly meetings. The health facilities visited include Kisubi HC III, Buikwe HC III and Kawolo Hospital</p>
12	<p>The LG has publicised all health facilities receiving PHC non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards: score 3</li> </ul>	3	<p>Displays made for this financial year for all health facilities and hospitals in Buikwe South, total 18 facilities both government and PNFP health facilities.</p>

Assessment area: Procurement and contract management

13	<p>The LG Health 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"> <li>• 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 for the current FY: score 2</li> </ul>	2	<p>The annual procurement plan 2017/2018 was submitted and approved by PDU on 19th April 2017. The items include; Stationary, fuel, maternity ward for one health facility.</p>
		<p>Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2</p>	2	<p>Signed PDU form seen and submitted on 19th April 2017</p>

14	<p>The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time:</li> <li>• 100% - score 8</li> <li>• 70-99% – score 4</li> <li>• Below 70% - score 0</li> </ul>	0	<p>No evidence that LG supported Kawolo Hospital and lower level health facilities to submit procurement plans to NMS. Lower level health facilities compile needs for medicines and supplies based on the NMS kits, NMS has not visited Buikwe District on this exercise this financial year. Kawolo hospital submitted a procurement plan for to NMS with no evidence of support from the local government. Procurement plan for Kawolo hospital exists but no copy at the district.</p>
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"> <li>• Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points</li> </ul>	0	<ul style="list-style-type: none"> <li>• I reviewed 10 payments and found that the shortest time it took to initiate payment was one day and the longest was 30 days. There was no justification for the delays.</li> </ul>
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"> <li>• 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</li> </ul>	4	<p>the Planner Received submissions from Health as below:</p> <p>4th Quarter - 6th July 2017</p> <p>3rd Quarter – 6th May, 2017</p> <p>2nd Quarter – 9th January 2017</p> <p>1st Quarter - 5th October. 2016</p>

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 • If all queries are not responded to score 0</p>	0	<p>I reviewed internal audit reports for four quarters of FY 2016/17</p> <ul style="list-style-type: none"> <li>Internal Audit findings on the sector</li> </ul> <p>Period</p> <table border="1" data-bbox="1050 353 1505 533"> <thead> <tr> <th></th> <th>Quarter 1</th> <th>Quarter 2</th> <th>Quarter 3</th> <th>Quarter 4</th> </tr> </thead> <tbody> <tr> <td>No. of queries :</td> <td>9</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table> <ul style="list-style-type: none"> <li>The department had 9 audit queries in the year which were responded to. However, all the queries were retained in the report that was submitted to the Internal Auditor General.</li> </ul>		Quarter 1	Quarter 2	Quarter 3	Quarter 4	No. of queries :	9	0	0	0
	Quarter 1	Quarter 2	Quarter 3	Quarter 4										
No. of queries :	9	0	0	0										
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"> <li>Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2</li> <li>Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2</li> </ul>	2	<p>For the three health facilities visited at least 30%of the HUMC members were women</p> <p>The sanitation guidelines exist at the district but no evidence that health facilities have received the sanitation guidelines.</p>										
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"> <li>Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal : score 2 points.</li> </ul>	0	<p>No evidence. SOPs on segregation of infectious and non-infectious wastes pinned in some laboratories. No guidelines on medical waste management were seen.</p>										



## **LGPA 2017/18**

Water & Environment Performance Measures

Buikwe District

(Vote Code: 582)

Score 63/100 (63%)

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>	<p>• 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</p>	10	<p>Safe water coverage for the four sub-counties that form the district is Ssi Bukunja (59%), Najja (65%), Ngogwe (95%) and Buikwe (95%). The district average (including municipalities and town councils) stands at 56% as of June 2017. Therefore, none of the four sub-counties has coverage below the district average.</p> <p>Review of the Annual Workplan and Budget for FY 2017/18 established that the two sub-counties with the lowest coverage have still been targeted i.e. Ssi Bukunja and Najja and the planned projects include;</p> <p>1. Ssi sub-county</p> <ul style="list-style-type: none"> <li>• Construction of a public 5-stance VIP latrine at Ssi trading centre</li> <li>• Drilling of 1 production well (motorized) at Ssi trading centre</li> <li>• Rehabilitation of 4 boreholes (Sugarcane shallow well in Kimera village, Sugu shallow well in Sugu village, Nakibuli shallow well in Nanukuma village, and Haruna shallow well in Kanga village)</li> <li>• Drilling of 1 deep borehole (hand pump) at Kiwungi village</li> <li>• Construction of 1 piped water supply system (borehole pumped) at Ssi Trading Center - Phase One</li> </ul> <p>2. Najja sub-county</p> <ul style="list-style-type: none"> <li>• Rehabilitation of 7 boreholes (Mukigwere deep well in</li> </ul>

			<p>Busagazi village, James Lubowa shallow well in Tukulu village, Kasimagwa shallow well in Bulere village, Moslem deep well in Lungujja village, John Kavuma and Mbuga shallow wells in Nzigu village, and Nakiziru shallow well in Buzama village)</p>
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- Drilling of 1 deep borehole (hand pump) at Kiwangala village

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"> <li>• 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</li> </ul>	<p>Safe water coverage in all four sub-counties is above the district average of 56%, and all four were targeted. Implemented projects in FY 2016/17 as shown in the Annual Progress Report for FY 2016/17 reviewed include;</p> <ul style="list-style-type: none"> <li>• Drilling of hand pumps at Nampanyi (Ngogwe sub-county), Kobba (Buikwe sub-county) Kisugula (Ssi sub-county) and Old Church (Najja sub-county)</li> <li>• Drilling of 1 production well (motorized) at Ssi Town (Ssi sub-county)</li> <li>• Drilling of 1 production well (motorized) at Najja Trading Center (Najja sub-county)</li> <li>• Construction of 1 5-stance VIP latrine at Nangunga Trading Center (Ngogwe sub-county)</li> <li>• Rehabilitation of Nalungwe GFS (Najja sub-county)</li> <li>• Rehabilitation of 8 boreholes (Kiribubi, Janes Lubowa shallow wells and Nalongo Ndisala borehole in Najja sub-county; Barracks, Serwanga Kubidbba shallow wells and Magino Nzala borehole in Buikwe Rural sun-county; and Kadali shallow well and Church borehole in Ngogwe sub-county)</li> </ul>
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>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</p>	15	<p>Total number of projects implemented in FY 2016/17 as seen in the Annual Progress Report for FY 2016/17 were 16.</p> <p>From the records on monitoring reports reviewed, 16 out of 16 projects (100%) were monitored at least once with details as shown below;</p> <ul style="list-style-type: none"> <li>• 4 hand pump boreholes (Monthly Supervision Report of June 2017 dated 7/06/17 (Item 2.4))</li> <li>• 2 production wells (Monthly Supervision Report of June 2017 dated 7/06/16 (Item 2.4))</li> <li>• 1 5-stance VIP latrine at Nangunga Trading Center (Monitoring reports of 20/3/17 and 5/6/17, Monthly Supervision Report of June 2017 dated 7/06/17 (Item 2.3))</li> <li>• Rehabilitation of Nangulwe GFS in Najja sub-county (Monitoring and Supervision Report of 7/6/17 (Item 2.3))</li> <li>• 8 borehole rehabilitations (Monthly Supervision Report of June 2017 dated 7/06/17 (Item 2.3))</li> </ul>
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>	<p>• 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</p>	0	<p>List of facilities in the performance contract includes 1 VIP public latrine, 1 production well, 2 deep boreholes (hand pump), 1 piped water system and rehabilitation of 21 boreholes. This is not consistent with the MIS records of planned facilities obtained from the Ministry of Water and Environment which gives the number of boreholes to be rehabilitated as 20.</p>

Assessment area: Procurement and contract management

<p>5</p>	<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>	<p>0</p>	<p>Review of the procurement requests for the planned projects in FY 2017/18, revealed that these requisitions do not cover all projects and none was submitted on time (by April 30th 2017) as evidenced from the submitted procurement requests reviewed and confirmed with PDU shown below;</p> <ol style="list-style-type: none"> <li>1. Construction of a public 5-stance VIP latrine at Ssi trading centre ( submitted 17/08/17)</li> <li>2. 1 production well(motorized) at Ssi trading centre and 2 deep boreholes (hand pumps) (at Kiwungi village and Kiwangala village) (submitted 17/08/17)</li> <li>3. 20 bore rehabilitation in Ssi, Najja, Buikwe Rural and Ngogwe sub-counties (submitted 23/11/17)</li> <li>4. Procurement request for the piped water supply system (borehole pumped) at Ssi Trading Center - Phase One (has not been submitted pending approval of designs by the Ministry of Water and Environment)</li> </ol>
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The DWO has appointed Contract Manager and has effectively managed the WSS contracts

Maximum 8 points for this performance measure

• 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

Contract management plans and site meeting minutes were not available for all projects completed in FY 2016/17 as shown below;

1. Rehabilitation of Nangulwe GFS ( Contract Manager - Kavuma Vincent (ADWO/Water Supply) (letter of appointment seen dated 3/03/17), Supervision Schedule – None seen, Site Meetings – Minutes of site meeting held on 31/3/17 seen )

2. Drilling of 4 Hand-pumps (Contract Manager - Kavuma Vincent (ADWO/Water Supply) letter of appointment seen dated 3/03/17), Supervision Schedule – None seen, Site Meetings – Minutes of site meeting held on 26/5/17 seen)

3. Construction of a 5-stance VIP latrine (Contract Manager – Bernard Wandera (ADWO/Sanitation) (letter of appointment seen dated 20/02/17), Supervision Schedule –Schedule seen, prepared on 22/02/17, Site Meetings – Minutes of site meeting held on 17/3/17 seen.)

4. Rehabilitation of Kiribubi shallow well in Nzigu village (Contract Manager – Bernard Wandera (ADWO/Sanitation) (letter of appointment seen dated 08/12/16), Supervision Schedule – None seen, Site Meetings – No minutes seen.)

<ul style="list-style-type: none"> <li>• If water and sanitation facilities constructed as per design(s): score 2</li> </ul>	2	<p>For the 5 sampled projects completed in FY 2016/17 as shown below, construction on ground as established from the field visits is as per the designs.</p> <ol style="list-style-type: none"> <li>1. Rehabilitation of Nangulwe GFS in Najja sub-county ,</li> <li>2. Drilling of Old Church deep well (hand pump) in Najja Trading Centre, Najja sub-county,</li> <li>3. Drilling of 1 production well in Najja village, Najja sub-county,</li> <li>4. Construction of a 5-stance VIP latrine at Nangunga Trading Center in Ngogwe sub-county,</li> <li>5. Rehabilitation of Kiribubi shallow well in Nzigu village, Najja sub-county</li> </ol>
<ul style="list-style-type: none"> <li>• If contractor handed over all completed WSS facilities: score 2</li> </ul>	0	<p>No handover reports seen for the sampled completed facilities in FY 2016/17.</p>
<ul style="list-style-type: none"> <li>• If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2</li> </ul>	0	<p>For the completed projects in FY 2016/17, no completion certificates were availed. Completion reports for the following projects have been filed.</p> <ol style="list-style-type: none"> <li>1. Rehabilitation of Nangulwe GFS in Najja sub-county (21/06/17),</li> <li>2. Construction of a 5-stance VIP latrine at Nangunga Trading Center (19/06/17),</li> <li>3. Rehabilitation of Kiribubi shallow well in Nzigu village (19/05/2017)</li> </ol>

7	<ul style="list-style-type: none"> <li>Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	<ul style="list-style-type: none"> <li>Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	3	Review of 10 payments established that initiation of payment by the DWO ranged from 1 to 2 days.										
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"> <li>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</li> </ul>	5	<p>The Planner had evidence that the DWO officer had submitted 4th Quarter Sector Report on 7th July, 2017 ; 3rd Quarter- 10th April 2017</p> <p>2nd Quarter – 12th January. 2017 ; 1st Quarter – 14th October, 2016</p>										
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"> <li>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</li> </ul>	3	<p>I reviewed internal audit reports for four quarters of FY 2016/17</p> <ul style="list-style-type: none"> <li>Internal Audit findings on the sector</li> </ul> <table border="1" data-bbox="1059 1321 1514 1568"> <thead> <tr> <th>Period</th> <th>Quarter 1</th> <th>Quarter 2</th> <th>Quarter 3</th> <th>Quarter 4</th> </tr> </thead> <tbody> <tr> <td>No. of queries :</td> <td>0</td> <td>0</td> <td>0</td> <td>2</td> </tr> </tbody> </table> <ul style="list-style-type: none"> <li>The department had 2 audit queries in the year which were responded to and subsequently dropped.</li> </ul>	Period	Quarter 1	Quarter 2	Quarter 3	Quarter 4	No. of queries :	0	0	0	2
Period	Quarter 1	Quarter 2	Quarter 3	Quarter 4										
No. of queries :	0	0	0	2										
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"> <li>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</li> </ul>	3	<p>Buikwe District Council has one Social Services Committee that discusses issues for Education, Health and Water. the minutes are quoted below</p> <p>Min SSC 14/17/01/2017: Presentation and discussion of 1st and 2nd Quarter Performance Report for FY 2016/2017</p> <ul style="list-style-type: none"> <li>Min SSC 04/17/08/2016: Overview of Departmental Programs, funding status, Staffing and Challenges.</li> <li>MIN 09/JSC/10/2017: Consideration of Reports of Statutory Bodies – DSC, DPAC, DLB,</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that the water sector committee has presented issues that require approval to Council: score 3</li> </ul>	3	<p>The Social Services Committee discussed supplementary estimates and work plans, as per minutes below</p> <ul style="list-style-type: none"> <li>Min SSC 24/28/04/2017: Presentation of Supplementary 2016/2017</li> <li>Min SSC 19/13/02/2017 – Presentation and Discussion of Departmental Workplans for FY 2017/2018</li> </ul>

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"> <li>• 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</li> </ul>	0	<p>District Water and Sanitation Grant releases for the 1st Qtr and 2nd Qtr of FY 2017/18 have been displayed on the Water Department Notice Board (stamped 14/08/17 and 1/11/17 respectively), but the AWP, budget and expenditures have not been displayed. The district currently has no website.</p>
		<ul style="list-style-type: none"> <li>• All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2</li> </ul>	0	<p>From the field assessment, the project currently under construction (public 5-stance VIP latrine at Ssi Trading Centre) is not labelled.</p>
		<ul style="list-style-type: none"> <li>• Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2</li> </ul>	0	<p>No information seen for the on-going and planned projects.</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"> <li>• If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1</li> </ul>	0	<p>For the planned projects in FY 2017/18, only one village application form for the Kiwangala deep borehole (hand pump) in Kiwangala village (<i>dated 13/9/2017</i>) was seen on file. None seen for Kiwungi deep borehole (hand pump) in Kiwungi village</p>

		<ul style="list-style-type: none"> <li>• Number of water supply facilities with WSCs that are functioning evidenced by collection of O&amp;M funds and carrying out preventive maintenance and minor repairs, for the current FY: score 2</li> </ul>	0	<p>Review of the data collection file (<i>containing form 1s for updating the Sector MIS water supply database</i>) of 1st quarter 2017/18 (<i>received at the Ministry of Water and Environment on 23/10/17</i>) established that O&amp;M information for the planned facilities of FY 2017/18 has not yet been captured as these are still under construction, or are yet to be constructed.</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"> <li>• 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</li> </ul>	0	<p>A sample of 5 projects completed in FY 2016/17 was taken.</p> <p>An Environment and Social Screening Report (<i>dated 14th September 2016</i>) was reviewed and it was established that environmental screening was done and mitigation plans prepared for projects including VIP latrine at Nangunga Trading Centre, drilling of boreholes and production wells in Najja, Ngogwe, Buikwe and Ssi sub-counties, and Rehabilitation of Nangulwe GFS in Najja sub-county.</p> <p>However report does not capture all the sampled projects. Information was missing on the Rehabilitation of 8 boreholes (Kiribubi, Janes Lubowa shallow wells and Nalongo Ndisala borehole in Najja sub-county; Barracks, Serwanga Kubidbba shallow wells and Magino Nzala borehole in Buikwe Rural sun-county; and Kadali shallow well and Church borehole in Ngogwe sub-county)</p>
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		<ul style="list-style-type: none"> <li>• Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1</li> </ul>	0	No evidence (environmental monitoring reports) seen on file
		<ul style="list-style-type: none"> <li>• Evidence that construction and supervision contracts have clause on environmental protection: score 1</li> </ul>	1	Environmental protection was catered for in the Bills of Quantities under for the sampled construction contracts for Nangulwe GFS ( <i>Item 9.2</i> ), hand pumps ( <i>Item 4.4</i> ), and production wells ( <i>Item 3.4</i> ).
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"> <li>• If at least 50% WSCs are women as per the sector critical requirements: score 3</li> </ul>	0	<p>List of WSCs set up for the facilities seen in the 1st Quarter Progress Report for FY 2017/18 (Annex-software report). However not all WSCs set up have at least 50% women composition as shown below</p> <ol style="list-style-type: none"> <li>1. Construction of a public 5-stance VIP latrine at Ssi trading centre <i>(Total - 7, Women - 3, Men - 4 (Percentage of Women - 43%)</i></li> <li>2. Kiwungi borehole in Kiwungi village <i>(Total - 7, Women - 3, Men - 4 (Percentage of Women - 43%)</i></li> <li>3. Kiwangala borehole in Kiwangala village <i>(Total - 7, Women - 3, Men - 4 (Percentage of Women - 43%)</i></li> <li>4. VIP latrine in Nangunga village <i>(Total - 7, Women - 3, Men - 4 (Percentage of Women - 43%)</i></li> <li>5. Brain Trust borehole in Malongwe village <i>(Total - 6, Women - 3, Men - 3 (Percentage of Women - 50%)</i></li> </ol>

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"> <li>• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3</li> </ul>	3	<p>Field assessment of the VIP latrine at Ssi Trading Center (FY 2017/18), VIP latrine at Nangunga T/C (FY 2016/17) and VIP latrine at Bulere T/C (FY 2015/16) established that adequate access and separate stances for men, women and PWDs were provided for in the plan (for on-going construction) and on ground (for the completed facilities). .</p> <p>2 facilities funded by ICEIDA were also visited, including a 5-stance lined VIP latrine at Kiyindi fishing village, and a 5-stance lined VIP latrine at a school in Ssi Trading Center. Both facilities have ramps and separate stances for male, female and PWDs</p>
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