



## LGPA 2017/18

Accountability Requirements

Busia District

(Vote Code: 507)

Assessment	Compliant	%
Yes	6	100%
No	0	0%

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	<ul style="list-style-type: none"> <li>The LG submitted a performance contract to MoFPED on 24/03/2017 as a draft and a final one on 28/07/2017</li> </ul>	Yes
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	<ul style="list-style-type: none"> <li>The Budget submitted on 28/07/2017 included a Procurement Plan for the FY 2017/18.</li> </ul>	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)	xxxxx	<ul style="list-style-type: none"> <li>The LG made a timely submission of the annual performance report for the FY 2016/17 on 28/07/2017</li> </ul>	Yes
LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)	xxxxxx	<ul style="list-style-type: none"> <li>The LG submitted all the quarterly budget performance report for all the four quarters of the previous FY2016/17 as follows;</li> </ul> <p>Quarter 1 – 10/11/2016</p> <p>Quarter 2 – 15/02/2017</p> <p>Quarter 3 – 22/05/2017</p> <p>Quarter 4 – 28/07/2017</p>	Yes
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>xxxxxx</p>	<ul style="list-style-type: none"> <li>• The LG made a submission to the Internal Auditor General on the Auditor General findings and the Internal Audit reports for the year.</li> <li>• The submissions were made on the 23rd March 2017 of Reference AUD/252/1 on the status of implementation of Internal Audit and Auditor General's findings as per documents inspected from the Internal Auditor's Office and Internal Auditor General's office made by the District Internal Auditor.</li> </ul>	<p>Yes</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer</p>	<p>xxxxxx</p>	<ul style="list-style-type: none"> <li>• The Audit Opinion for the LG Financial Statements is unqualified as evidenced in the Auditor General's Report dated December 2017 released in January 2018.</li> </ul>	<p>Yes</p>



## **LGPA 2017/18**

Crosscutting Performance Measures

Busia District

(Vote Code: 507)

Score 51/100 (51%)

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>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	<ul style="list-style-type: none"> <li>• There is a functional physical planning committee chaired by the D/CAO first and later the PAS was appointed as chairman according to the appointment letter dated 01/08/2017.</li> <li>• The committee minutes of 30/01/2017, 20/01/2017 were reviewed and plans were being approved but the plans register in place could not capture the date of submission for these plans to establish timeliness in considering new investments.</li> </ul>
	<p>Maximum 4 points for this performance measure.</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>The LG does not have a valid physical structural plan and also there are no approved plans for the new infrastructure investments.</p>

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

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

0

According to the budget conference report for FY 2017/18 held on 11/11/2016 and AWP FY 2017/18 that was approved under MIN.COU/68/5/2017 during a council meeting held on 26/05/2017, It was established that among the sampled priorities in the AWP, NOT all are based on the outcomes of the budget conference, i.e. from sector presentations;

- Construction of a maternity ward at Majanji HC II. - AWP page 17, sector presentation page 7
- Rehabilitation of OPD/wards at Namasholo and Hasyule HC IIs. - AWP page 17, NOT in presentation.
- Construction of 4 classrooms at Nasweswe and Bubo P/S'. - AWP page 19, sector presentation page 1
- Rehabilitation of 4 classrooms at Dabani Boys and Busiabala P/S'. - AWP page 19, NOT in presentation.
- Construction of 9(5 stance) pit latrines in 9 P/S'. - AWP page 19, sector presentation page 1-2
- Construction of Masinya S/C administration block. - AWP page 21, sector presentation page 6.
- Construction of 2 pit latrines in 2 RGCs. - AWP page 24, sector presentation page 6
- Drilling of 19 boreholes. - AWP page 24, sector presentation page 6
- Rehabilitation of 24 deep boreholes. - AWP page 24, sector presentation page 6

<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>	2	<p>The capital investments approved in the AWP 2017/18 FY are derived from the approved five-year development plan. FY 2015/16 – FY2019/20 approved during a council meeting that sat on 28/05/2015 under MIN.COU/230/05/2015,</p> <p>See sampled investments below;</p> <ul style="list-style-type: none"> <li>Construction of a maternity ward at Majanji HC II. - AWP page 17, DDP page 175.</li> <li>Rehabilitation of OPD/wards at Namasholo and Hasyule HC IIs. - AWP page 17, DDP page 175.</li> <li>Construction of 4 classrooms at Nasweswe and Bubo P/S'. - AWP page 19, DDP page 167.</li> <li>Rehabilitation of 4 classrooms at Dbani Boys and Busiabala P/S'. - AWP page 19, DDP page 167.</li> <li>Construction of 9(5 stance) pit latrines in 9 P/S'. - AWP page 19, DDP page 172.</li> <li>Construction of Masinya S/C administration block. - AWP page 21, DDP page 165.</li> <li>Construction of 2 pit latrines in 2 RGCs. - AWP page 24, DDP page 149.</li> <li>Drilling of 19 boreholes. - AWP page 24, DDP page 141.</li> <li>Rehabilitation of 24 deep boreholes. - AWP page 24, DDP page 148.</li> </ul>
<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>	1	<p>Project profiles were developed and appear as Appendix 1 in the 5-year development plan page 140 – 180 and discussed by TPC on 31/05/2017 under MIN.4TPC 31/05/2017.</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	<p>Annual statistical abstract FY 2016/17, with gender disaggregated data was compiled and presented to the TPC on 30/01/2018 under MIN: 6TPC30/1/2018.</p>
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>From the LG approved AWP and budget FY 2016/17 that was approved by council on 05/05/2016 under MIN.CO/282/5/2016, it was established that all infrastructure projects implemented by the LG in the FY 2016/17 were derived from the 2 documents For example;</p> <ul style="list-style-type: none"> <li>Completion of a maternity ward at Buwembe HC II. - AWP page 17, Budget page 18.</li> <li>Renovation of 6 classrooms at Masaba, Bukalikha and Tiira P/S'. - AWP page 19, Budget page 23.</li> <li>Supply of 54 3-seater desks to Bubwohi and Amonikakinei P/S'. - AWP page 19, Budget page 20.</li> <li>Construction of 5-stance pit latrines in 5 P/S'. - AWP page 19, Budget page 23.</li> <li>Construction of Byanga S/C administration block(Phase II). - AWP page 22, Budget page 30.</li> <li>Construction 2-stance pit latrines in Amungwa and Mumutumba TCs. - AWP page 24, Budget page 32</li> <li>Drilling of 23 boreholes in various villages. - AWP page 24, Budget page 34</li> <li>Rehabilitation of 14 boreholes. - AWP page 24, Budget page 34.</li> </ul>



• 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

4

From the project completion documents, all the investment projects implemented in the FY2016/17 were completed as per work plan by end of FY at 100%. See completion dates below;

- Completion of a maternity ward at Buwembe HC II. – 6/04/2017.
- Renovation of 6 classrooms at Masaba, Bukalikha and Tiira P/S'. – 7/06/16,9/3/17,16/3/17.
- Supply of 54 3-seater desks to Bubwohi and Amonikakinei P/S'. – 24/01/2017.
- Construction of 5-stance pit latrines in 5 P/S'. – 9/3/2017 last one was at Bulengi P/S.
- Construction of Byanga S/C administration block(Phase II). – 30/06/17.
- Construction of 2-stance pit latrines in Amungwa and Mumutumba TCs. – 10/03/17
- Drilling of 23 boreholes in various villages. – 26/5/17 and 12/12/2016.
- Rehabilitation of 14 boreholes. – 16/01/2017.

5	<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects and assets during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <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>	0	<p>Whereas some of the investment projects in the FY 2016/17 were completed within the approved budget – Max. 15% plus or minus of original budget, one project was NOT implemented within the above budget limits.</p> <p>See project s budget performance below;</p> <ul style="list-style-type: none"> <li>Completion of a maternity ward at Buwembe HC II. -104.6%</li> <li>Renovation of 6 classrooms at Masaba, Bukalikha and Tiira P/S'. – 98.1%</li> <li>Supply of 54 3-seater desks to Bubwohi and Amonikakinei P/S'. – 102.9%</li> <li>Construction of 5-stance pit latrines in 5 P/S'. -87%</li> <li>Construction of Byanga S/C administration block (Phase II). – 95.8%</li> <li>Construction 2-stance pit latrines in Amungwa and Mumutumba TCs. – 80.2%</li> <li>Drilling of 23 boreholes in various villages and Rehabilitation of 14 boreholes. – 115%</li> </ul>
		<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	<p>The LG budgeted and spent at least 80% of O&amp;M budget for infrastructure under water, roads and Education sectors i.e. 115%, 89.6% and 98.1% respectively is the budget performance.</p>

Assessment area: Human Resource Management

6	<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<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>There are cases of HoDs who were not appraised in accordance with MoPS performance guidelines during FY 2016/2017 including those of: Natural Resource Management, Community Based Services, Education, and Health.</li> </ul>
		<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>There are some positions of HoD that were not substantively filled during FY 2016/2017 including for Works, Community Based Services, Health, and Natural Resource Management.</li> </ul>

7	<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure</p>	<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>DSC minutes including DSC Minute No. 04/2017, 10/2017, and 18/2018 indicate submissions for recruitment during FY 2016/2017 were duly considered by the DSc.</li> </ul>
		<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>DSC minutes including DSC Minute No. 9/2017, 10/2017, 15/2017, and 39/2017 indicate submissions for confirmations during FY 2016/2017 were duly considered by the DSC.</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>DSC Minute No. 49/2017 shows submissions for disciplinary action during FY 2016/2017 were duly considered by the DSC.</li> </ul>
8	<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</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>	0	<ul style="list-style-type: none"> <li>There are cases of staff appointed during FY 2016/2017 who accessed the salary payroll after more than two (2) months of assumption of duty for instance: Baisi Mawazi, Oupepe Charles, Isiko Joseph, Bisikwa Annet, and Nantaba Sandra.</li> </ul>
		<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	<ul style="list-style-type: none"> <li>There are cases of staff who retired during FY 2016/2017 who accessed the pension payroll after more than two (2) months of retiring or have not accessed the pension payroll to-date for instance: Mulongoti Jane Edith, Khakerwe Pascal, Emongor John, Ojiambo Stephen Mangeni, and Mayende Ismael.</li> </ul>

Assessment area: Revenue Mobilization

9	<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <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>	0	<ul style="list-style-type: none"> <li>• Local Revenue (OSR) decreased from UGX. 272, 850, 617 in 2015/2016 to UGX. 208, 419,170 in 2016/2017. The percentage decrease was about 24%.</li> <li>• The source of information is the Audited Financial Statements for 2015/2016 &amp; 2016/2017, Auditor General's Reports for 2015/2016.</li> </ul>
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>	2	<ul style="list-style-type: none"> <li>• The Local Revenue Collection ratio for actual against budgeted in 2016/2017 was 90.38% derived from UGX. 208, 419, 170 actual against the planned UGX 236, 098, 000 in the year.</li> <li>• The source of information was the Audited Financial Statements for the Financial Years 2015/2016 &amp; 2016/2017.</li> </ul>
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>	0	<ul style="list-style-type: none"> <li>• The LG made LST collections amounting to UGX.96 582, 586 in the Financial Year 2016/2017. Information sourced from the Audited Financial Statements for 2016/2017.</li> <li>• It made remittances to the LLGs amounting to UGX. 46, 147, 565 sourced from the Remittance Schedule</li> <li>• Therefore it did not fulfill the Mandatory LLG Revenue share Remittance.</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	<ul style="list-style-type: none"> <li>• During the FY 2016/2017, the LG spent UGX. 48, 00,000 on council activities. The expenditure was within the Limit of the 20% (UGX. 54, 570, 123) of 2015/2016 actual Local Revenue collection of UGX. 272, 850, 617.</li> <li>• Therefore the LG spent within the 20% Limit.</li> </ul>

Assessment area: Procurement and contract management

12	<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	2	<ul style="list-style-type: none"> <li>Busia district has a Senior Procurement Officer substantively appointed under Minute No. 75/2009</li> <li>The Procurement Officer isn't substantively appointed and was assigned to fill the role.</li> <li>The LG however has a Procurement Assistant who is also substantively appointed under DSC Minute No. 215/2011</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1</li> </ul>	1	<p>The TEC meeting held on 21st/07/2016 at Chango Macho hall evaluated various bid and made a report to the contracts committee to consider the recommendations of award of various contracts.</p>
		<ul style="list-style-type: none"> <li>Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1</li> </ul>	1	<p>In the 3rd contracts committee meeting held on 22nd/08/2016, at the District Service Commission board, several recommendations from the TEC were considered and approved. Some of these are;</p> <p>(i) Min 04 – 3/DCC/22/8/2016 – 2017 (3) – Approved the TEC recommendation to award the contract for the Renovation of the classroom block at Masaba p/s to MS Spot Contractors Ltd</p> <p>(ii) Min 04 – 3/DCC/22/8/2016 – 17 (5) – Approved the TEC recommendation to award the contract to construct a Maternity Ward at Buwumbe HC II to upgrade it to HC III under PRDP to MS GETS Technical Services Ltd</p> <p>(iii) Min 05 -6/DCC/21/11/2016 – 2017(20) - Approved the TEC recommendation to award the contract to Renovation of Bukhalika p/s to MS Kamo Consult Investments Ltd</p> <p>(iv) Min 05 – 6/DCC/21/11/2016 – 2017 (10) - Approved the TEC recommendation to award the contract to construction of a 5 stance line pit latrine to Busibembe p/s to M/s Darnik Investments Limited.</p>

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>	0	<p>a) Except for the infrastructural projects in the education sector, where the some project sites indicated in procurement plan for the FY2017/18 are different to those indicated in the district annual work plan FY2017/18; the rest of the infrastructural projects in other sectors presented in the procurement plan are the same in the annual work plan. In the education sector, procurement plan indicates that the construction of 10 units of a 5 stance lined pit latrine at Namasyolo, Busitema College primary, Buhabulo, Busiabala, Bwahikha, Sihubura, Masaba, Buloobi, Busikho, and Dabani Boys. The annual work plan instead shows the construction of 5 latrine stances at Buhehe p/s, Buloosi p/s, Busitema college p/s, Nanyoni p/s, Namasyolo p/s, Maduwa p/s, Bukhukhu p/s, Lwanika p/s and Busikho p/s.</p> <p>b) According to the quarterly procurement status reports, all the procurements that were planned for the FY 2016/17 were made and completed on time.</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>	2	<p>The LG procurement unit had the bid documents for the FY 2017/18 prepared on time in May 2017 for the open national bids and in August 2017 for the selective bidding.</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	<p>Both the contracts registers and the procurement activity files for the FY2016/17 where found to be incomplete at the time of assessment. The contract registers missed key information on some of the procurements that were conducted such as payments made so far and balances, procurement reference numbers among others. The procurement activity files had Interim and Completion certificates and the supervision reports form the contract managers missing.</p>

		<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>The LG was found to have adhered to the procurement thresholds in all procurements in the FY2016/17. For procurements of works projects above Ugx. 50m, where conducted under open national bidding process and advertised in the New Vision of Friday 1st July 2016. For the procurements that were below Ugx. 50m where conducted under selective bidding process and the Invitation for Bids was displayed and a copy sent to the pre-qualified companies on Wednesday 21st September 2016.</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>	<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>Except for only three works projects, at the time of assessment, most of the completed works projects had no completion certificates. They only had interim certificates. Those with completion certificates are;</p> <p>(i) BUSI507/WIRKS/2016 – 2017/0322 – Upgrading of Buwembe HC II to HC III by Construction of a Maternity Ward (Phase II) under PRDP</p> <p>(ii) BUSI507/WIRKS/2016 – 2017/0122 – Renovation of four classroom block at Masaba p/s under SFG</p> <p>(iii) BUSI507/WIRKS/2016 – 2017/0422 – Renovation of 2 classroom block at Tiira p/s under DDEG</p>
		<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>All the on-going works projects that were visited had no site boards. these includes the;</p> <p>(i) Renovation of 2 classroom block at Dabani Boys p/s</p> <p>(ii) Renovation of a Medical Waste Store at Masafu General Hospital</p> <p>(iii) Construction of a placenta pit at Buwumba HC II</p> <p>Other projects visited were in drilling, casting and installation of boreholes, which were already completed by the time of assessment.</p>
Assessment area: Financial management				

16	<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <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>The LG makes timely monthly Bank reconciliations of the TSSA up dated to the 10th February 2018.viewed through the IFMS Navision System.</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>	2	<ul style="list-style-type: none"> <li>The LG made timely payments to Suppliers during the Financial Year 2016/2017 as evidenced from payments documents (vouchers, requisitions, invoices) evidenced from the Accounts of Health, Education, Works, Statutory Bodies, Finance examined. The payments time ranged from one to Forty Three days.</li> </ul>
18	<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.</li> </ul>	3	<ul style="list-style-type: none"> <li>The LG has a Substantive Principal Internal Auditor duly appointed by the District Service Commission..</li> <li>The Internal Audit produced all the quarterly Internal Audit reports for 2016/2017 dated the 16th November 2016 , 22nd January 2017, 28th April 2017 and 18th June 2017 for First, Second, Third and Fourth Quarters respectively.</li> </ul>
		<ul style="list-style-type: none"> <li>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.</li> </ul>	2	<ul style="list-style-type: none"> <li>The LG has provided information to the Council and LGPAC on the status of the implementation of the Audit findings evidenced through the submissions by the Internal Auditor to LGPAC as per the above dates of submissions.</li> <li>There were also submissions from the Internal Audit Department submitted to Internal Auditor General (IAG) copied to LGPAC &amp; Council to prove this.</li> </ul>



		<ul style="list-style-type: none"> <li>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</li> </ul>	0	<ul style="list-style-type: none"> <li>There were submissions to LGPAC and Accounting officer as seen in the Internal Audit Reports, however, the LGPAC did not discuss the Internal Audit Reports for 2016/2017.</li> </ul>
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>	0	<ul style="list-style-type: none"> <li>The LG only maintained a General type of Assets Register in which other Assets were posted into.</li> <li>Therefore not compliant.</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>The LG had unqualified Audit Opinion for the FY 2016/2017.</li> <li>Evidenced from the Auditor General's Report of 2016/2017 dated December 2017.</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>According to the minutes available for FY2016/17, there is evidence that council sits i.e. sat on 26/05/2017, 30/05/2017, and 28/02/2017 e.t.c... and during the 26/05/2017 council meeting, under MIN.COU/67/5/2017, Committee reports for 3rd quarter on sector performance were considered. I.e. committee reports for Social Services Committee, Works and Technical services committee, Finance Administration and planning committee.</p> <p>In the same meeting budget estimates and plans for FY 2017/18 were considered and approved under MIN.COU/68/5/2017.</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 feed-back (grievance /complaints) and responded to feedback and complaints: score 2.</li> </ul>	2	<p>The LG appointed a substantive Information officer on 20/07/2016 under DSC Min.84/2015 whose key functions among others is drafting and submitting responses to public inquiries.</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 LG Payroll and Pensioner Schedule were not displayed on public notice boards.</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>	0	<p>Although there was a list of best evaluated bidders for various procurements, procurement plan was not seen published anywhere.</p>
		<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>The LG communicated and explained a budget call circular on preparation of BFPs and preliminary budget estimates FY 2017/18 in a letter dated 22/09/2016 to all LLGs.</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>From the activity reports reviewed, the LG conducted discussions with the public to provide feed-back on status of activity implementation; The following are the activities were this was done;</p> <ul style="list-style-type: none"> <li>During a budget conference held on 11/11/2016.</li> <li>During a radio talk show on JOGO FM on 13/07/2017.</li> <li>Communicated health sector status report on JOGO FM on 27/02/2017 etc....</li> </ul>
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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>	0	<p>Busia district has no person officially appointed to undertake the role of a Gender Focal Person, though the role is assumed to be under the DCDO. Thus, at the time of assessment, there were no minutes or notes to indicate that support was provided to sectors and departments in gender mainstreaming.</p>
		<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>	2	<p>a) The Community Development Office has planned activities to support women roles in the department annual work plan for Probation, Labour and Community Welfare, and Gender Mainstreaming that includes;</p> <ul style="list-style-type: none"> <li>Support to women councils</li> <li>International women's day celebrations</li> <li>Conducting gender mainstreaming for all sub counties</li> </ul> <p>b) The LG budgeted and received Ugx. 500,000 for gender mainstreaming activities, representing 100% utilisation.</p>
26	<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</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>	0	<p>Whereas the Environment Officer has environment screening reports for some projects, there was no screening files to ascertain the authenticity of the screening files. The reports only indicate the mitigation measures, and no plans and budgets.</p>

Maximum 6 points  
on this performance  
measure

<ul style="list-style-type: none"> <li>• Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1</li> </ul>	0	<p>The entire sampled bid documents reviewed, indicated that the environmental issues are not integrated into bids and contracts. Some of the sampled bid documents were for the following works projects;</p> <p>(i) BUSI 507/WRKS/2016 – 2017/00226 – Drilling, casting and Installation of 6 boreholes under DWSSCG Lot 2</p> <p>(ii) BUSI 507/WRKS/2016 – 2017/01423 – construction of 2 units of 2 stance lined pit latrine with Urinal for RCGs each at Amungura T/C and Mumutumba market</p> <p>(iii) BUSI 507/WRKS/2016 – 2017/00326 - Drilling, casting and Installation of 7 boreholes under DWSSCG Lot 3</p> <p>(iv) BUSI 507/WRKS/2016 – 2017/0226 – Drilling, casting and Installation of 3 boreholes under DWSSCG</p> <p>(v) BUSI 507/WRKS/2016 – 2017/00322 – Upgrading of Buwembe HC II to Buwembe HC III by Constructing a Maternity Ward under PRDP</p>
<ul style="list-style-type: none"> <li>• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1</li> </ul>	0	<p>At the time of assessment, for all the projects implemented, there was no proof of land ownership by Busia district. In water sector where the consent form where signed, the signed were not available at the water offices.</p>
<ul style="list-style-type: none"> <li>• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2</li> </ul>	0	<p>At the time of assessment, only one project conducted and completed in the FY 2016/17 had an Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer, i.e. Renovation of two classroom block at Masaba p/s. The other works projects had not received the certificate.</p>



## **LGPA 2017/18**

Educational Performance Measures

Busia District

(Vote Code: 507)

Score 61/100 (61%)

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> <li>Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4</li> </ul>	4	<p>A budget of UGX. 8,618,428,000/=for 1260 teachers across 117 schools was in place. This gives an average of 11 teachers per school beyond the mandatory 8.</p> <p>All 117 schools go up to P.7 class. The school with the lowest staff has 8 teachers while the highest staff has 24 teachers except Bulangi P/S which has 7 teachers. Implying that the majority of schools meet the threshold of 8 teachers per school.</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 o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0</li> </ul>	3	<p>The staff ceiling is at 1487 teachers with 1260 (85%) teachers in post with a wage bill. A gap of 227 teachers (18 headteachers, 78 deputies &amp; 131 teachers)</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>The structure allows 3 inspectors but one was in place and no recruitment plan in place to replace the two.</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 in place and 52 out of the 121 teachers already recruited.</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>	0	<p>No recruitment plan in place for replacement of the 2 inspectors this FY.</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	<ul style="list-style-type: none"> <li>The only inspector of schools during FY 2016/2017 (Wanyama Lumumba) was not appraised.</li> </ul>
		<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>Of the 117 primary school head teachers only 42 constituting 36% were appraised during the FY 2016/2017.</li> </ul>

Assessment area: Monitoring and Inspection

6	<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <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>	1	<p>Circulars from MoES in place: Support Supervision in schools (30/06/2017); Operation of unlicensed/unregistered schools (not dated); Monitoring Learning Achievement Achievement (28/09/2016); and Registration of Learners (12/06/2016). Circulars from district to schools found: SMC Representation (02/01/2017); School Feeding (01/07/2017); Operation of unlicensed/unregistered schools (05/02/2017</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>	2	<p>Minutes of meetings held on 31/01/2017; 15/07/2016; 15/04/2017</p>
7	<p>The LG Education Department has effectively inspected all private and public primary schools</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> <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>	0	<p>182 schools (117 government &amp; 65 private) were in place. Schools supervised: quarter 1 - 40 (22%); quarter 2 - 28 (16%); quarter 3 - 61 (34%); quarter 4 - 14 (8%); giving an average of 20% schools inspected in FY 2016/17</p>



8	<p>LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	4	<p>Departmental meetings' minutes of 23/06/2017; 29/06/2016; 12/02/2017; 28/03/2017; 28/09/2016; 31/03/2017; and 24/08/2016 had traces of issues of inspection discussed and both decisions and actions taken.</p>
		<ul style="list-style-type: none"> <li>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</li> </ul>	0	<p>There was no evidence of submission of inspection reports to either DES headquarters or its regional offices Eastern.</p>
		<ul style="list-style-type: none"> <li>Evidence that the inspection recommendations are followed-up: score 4</li> </ul>	4	<p>Monitoring Reports on inspection recommendations among others for quarters 1-4 dated 04/10/2016, 05/01/2017, 31/03/2017, 30/06/2017 and received on 06/10/2016, 09/01/2017, 03/04/2017, 24/08/2017 respectively by MoES were in place.</p>
9	<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5</li> </ul>	5	<p>According to OBT, list of schools in place, and statistical forms [2016] at both district and schools, the names and number of schools in the district tally with EMIS data at MoES.</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>	5	<p>The enrolment figures in OBT, statistical forms at both schools and district do tally with enrolment figures with EMIS reports at MoES. schools: Hamansa [12289] - 416 boys &amp; 382 girls; Ajuket [12322] - 361 boys &amp; 386 girls; Amonikakinei [12326] - 750 boys &amp; 736 girls; Okame [12328] - 404 boys &amp; 407 girls; and Namasyolo [0192292] - 500 boys &amp; 487 girls had their enrolment figures tallying with EMIS data.</p>
<p>Assessment area: Governance, oversight, transparency and accountability</p>				

10	<p>The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul> <ul style="list-style-type: none"> <li>• Evidence that the education sector committee has presented issues that requires approval to Council: score 2</li> </ul>	2	<p>From the committee minutes, it was established that a committee sat and discussed service delivery issues for example during a committee meeting that sat on 29/11/2016, under MIN.005/SSC/29/11/2016, review of Education departmental reports for the 1st quarter FY 2016/17 was done presented by the DEO.</p> <p>During a committee meeting that sat on 29/11/2016, under MIN.005/SSC/29/11/2016 the following were some of the issues recommended for approval in council;</p> <ul style="list-style-type: none"> <li>• That head teachers should identify a teacher to be in charge of reading and writing at every class in lower primary.</li> <li>• That all stake holders in education should continue with sensitization of parents to participate in school activities and also feed their children.</li> <li>• The teachers should produce teaching/learning materials before conducting lessons.</li> <li>• Head teachers who fail to convene SMC and BOGs meetings should be warned.etc...</li> </ul>
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)</p> <ul style="list-style-type: none"> <li>• 100% schools: score 5</li> <li>• 80 to 99% schools: score 3</li> <li>• Below 80% schools: score 0</li> </ul>	5	<p>According to appointment letters, attendance lists and minutes of meetings in place all schools have functional SMCs and are put in place whenever an individual school's management committee expires.</p>

12	<p>The LG has publicised all schools receiving non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3</li> </ul>	3	<p>UPE funds for all schools were pinned on the notice board for public viewing.</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>Procurement requests for FYs 2016/17 and 2017/18 dated 21/06/2016 and 12/07/2017 respectively were in place.</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>	3	<ul style="list-style-type: none"> <li>The LG Education department made timely certification and recommendations for payments to suppliers in time. This was evidenced from the payments documents (vouchers, funds requisition forms, interim certificates) for the following Supplies &amp; Projects in 2016/2017; Fuel for the Department, Purchase of Stationery for the Department, Retention for the construction of Five Stance Pit Latrines at TIIRA, MUKANGU &amp; BULENGENI Primary Schools, Renovation a Two &amp; Four Classroom Block at BUBWOHI &amp; MASABA Primary Schools respectively. The certification ranged from one to 42 days.</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>	0	<p>From the annual performance report, the department didn't acknowledge submission of the annual performance report for FY 2016/17 to the planning unit to establish timeliness in submission.</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</li> <li>If sector has no audit query score 4</li> <li>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</li> <li>If all queries are not responded to score 0</li> </ul>	0	<ul style="list-style-type: none"> <li>The sector had queries for the Financial Year 2016/2017 evidenced with the Internal Audit Reports. These included unaccounted for funds by various officers in the department, payroll, school inspection activities by the District Inspectors, UPE not accounted by six Headteachers.</li> <li>There was no evidence of formal responses to Audit findings (Internal Audit Reports and Management letters) availed for examination.</li> </ul>

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>Evidence of checklist on Child Friendly School Transformation [CFST], Guidelines for School Family Initiative[ SFI] and Guidelines for the Child Friendly School [CFS] were in place and distributed to schools to guide the handling of learners in a number of issues pertaining to the well being of a child.</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>	2	<p>The same evidences [CFST, SFI and CFS] were in place to guide the management of sanitation in schools among other issues.</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	Appointment letters and attendance lists to meetings indicated that at least each SMC had 3 women members.
18	<p>LG Education department has ensured that guidelines on environmental management are disseminated</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <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	Guidelines for Child Friendly School [CFS] checklist has components on environment management in schools and are guiding schools on environment issues. Schools visited had structured compounds with trees and flowers planted. Schools had their land fenced off with live hedge.



## **LGPA 2017/18**

Health Performance Measures

Busia District

(Vote Code: 507)

Score 39/100 (39%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Human resource planning and management				
1	<p>LG has substantively recruited primary health workers with a wage bill provision from PHC wage</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that LG has filled the structure for primary health workers with a wage bill provision from PHC wage for the current FY • More than 80% filled: score 6 points, • 60 – 80% - score 3 • Less than 60% filled: score 0</p>	6	<ul style="list-style-type: none"> <li>• Review of wage IPFs in performance contract revealed that there are 276 positions of health workers with a wage bill provision for the year 2017/18</li> <li>• There are 262 staff in post FY 2017/18 as per the performance contract</li> <li>• There is an advert of the New Vision May 2nd 2017 by the Busia district service commission – External Advert No. 1/2017 to recruit the difference of 14 posts.</li> </ul>
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>	0	<ul style="list-style-type: none"> <li>• There is no staff recruitment plan for the health department in the district performance contract 2017/18 – Stamped as received by the registry at the Ministry of Finance planning and Economic Development on the 28th June 2017</li> </ul>
3	<p>The LG Health department has ensured that performance appraisal for health facility in charge is conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the health facility in-charge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0</p>	0	<ul style="list-style-type: none"> <li>• The in-charge of the only hospital (Masafu Hospital) for which the DLG had jurisdiction during FY 2016/2017 was not appraised. The DLG was not responsible for any HC IV.</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	<ul style="list-style-type: none"> <li>• There are 4 enrolled nurses and 2 midwives deployed at Lumino HC III -This is consistent with the staff lists submitted together with the budget 2017/18</li> </ul>
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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	<ul style="list-style-type: none"> <li>• There were no communication letters to indicate that the DHO communicated ALL of the following guidelines issued by the national level in the previous year: <ol style="list-style-type: none"> <li>1. PHC grants guidelines 2016/17</li> <li>2. MoH guidelines for eye care – October 2016</li> <li>3. Uganda Clinical Guidelines – 2016</li> <li>4. Essential Medicines &amp; Health Supplies List – 2016</li> <li>5. MoH Resettlement Policy Framework – 2016</li> <li>6. Health Sector Quality Improvement Framework and Strategic Plan 2015/16 – 2019/20, June 2016</li> </ol> </li> </ul>
		<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	<ul style="list-style-type: none"> <li>• All meetings minutes presented for the period 2016/17 had no indication that the DHO had held meetings with health facility in-charges and among others explained ALL the guidelines, policies, circulars issued by the national level that year</li> </ul>



The LG Health Department has effectively provided support supervision to district health services

Maximum 6 points for this performance measure

Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3

0

- The quarterly integrated support supervision reports provided by the DHT for FY 2016/17 did not include the mandatory integrated support supervision to Masafu General Hospital and Dabani NGO hospital each quarter.

- In other words – there was no evidence in the reports provided that the DHT provided the mandatory quarterly integrated support supervision to Masafu General Hospital and Dabani NGO hospital

- Supervision log books at Masafu General Hospital and Dabani NGO hospital had no logs for ALL the mandatory quarterly integrated support supervision by the DHT during FY 2016/17

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

0

- The supervision reports provided by the DHT for FY 2016/17 did not have any indication that all the 24 lower level HFs received the mandatory quarterly integrated support supervision

- Supervision log books at Buteba HC III and Lumino HC III had no logs for ALL the mandatory quarterly integrated support supervision by the DHT during FY 2016/17

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>	0	<ul style="list-style-type: none"> <li>• The HSD (Dabani NGO hospital) did not avail the mandatory quarterly integrated support supervision reports by the HSD for FY 2016/17. The health Unit administrator was not present at the facilities yet reports were reported to be in his custody. In addition the supervision log book at Buteba HC III only had one log dated 26th May 2017</li> <li>• Masafu General Hospital availed the mandatory quarterly integrated support supervision reports by the HSD for FY 2016/17. However the supervision log book at Lumino HC III only had logs for quarter 1 dated 22nd September 2016, quarter 2 dated 11th October 2016 and quarter 3 dated 9th January 2017. NO log for quarter 4.</li> </ul>
8	<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4</li> </ul>	0	<ul style="list-style-type: none"> <li>• There were no comprehensive integrated support supervision reports to make recommendations for corrective actions on</li> </ul>
		<ul style="list-style-type: none"> <li>• Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6</li> </ul>	0	<ul style="list-style-type: none"> <li>• There were no comprehensive integrated support supervision reports with recommendations, no indication of discussions or follow up activities</li> </ul>

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	<ul style="list-style-type: none"> <li>• All 26 health facilities on the OBT that are also on the HIMS list from MoH.</li> <li>• However the list from MoH also has a HF under Busia district that belong to Busia Municipality - Busia HC IV</li> </ul>
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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>From the committee minutes, it was established that a committee sat and discussed service delivery issues for example during a committee meeting that sat on 3/05/2017, under MIN.004/SSC/2-3/5/2016, Review of Health departmental reports for the 3rd quarter FY 2016/17 was done presented by the Ag.DHO.</p>
		<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>During a committee meeting that sat on 3/05/2017, under MIN.004/SSC/2-3/5/2016, the following were some of the issues recommended for approval in council;</p> <ul style="list-style-type: none"> <li>• That the district should increase local revenue allocation to the health sector .</li> <li>• Lobby for an ambulance.</li> <li>• Fill up the vacancies for cardinal positions in the department.etc...</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>	0	<ul style="list-style-type: none"> <li>• None of the sampled HFs availed all the mandatory quarterly meeting minutes for 2016/17</li> <li>• At the time of the assessment Buteba HC III did not provide any HUMC meeting minutes for FY 2016/17 apparently there were not handed over by the outgoing in-charge</li> <li>• Lumino HC III only had two HUMC meeting minutes for FY 2016/17 dated 15th November 2016 and 04th May 2017</li> <li>• Masafu General Hospital only had two HUMC meeting minutes for FY 2016/17 dated 9th May 2017 and 12th April 2017</li> </ul>
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	<ul style="list-style-type: none"> <li>• There was posting of all health facilities receiving PHC non-wage recurrent grants on the public notice board at the DHOs office</li> <li>• Public notice boards at Masafu General Hospital, Dabani NGO hospital, Buteba HC III and Lumino HC III had postings of the PHC non-wage received by the respective facilities</li> </ul>
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>	0	<ul style="list-style-type: none"> <li>• There was no submission letters to DPU that covered all investment items in the approved Sector annual work plan and budget on time by April 30 for the FY 2017/18</li> </ul>
		<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>	0	<ul style="list-style-type: none"> <li>• There was NO copy of the procurement request form(Form PP1) to the PDU by 1st Quarter of the current FY 2017/18 availed</li> </ul>
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>	8	<ul style="list-style-type: none"> <li>• There were Procurement Plans for all lower level HFs and Masafu General Hospital for 2016/17 forwarded by the health department signed by the DHO on the 10th February 2016</li> </ul>
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>	2	<ul style="list-style-type: none"> <li>• The DHO made timely certification and recommendations for payments to suppliers in time. This was evidenced from the payments documents (vouchers, funds requisition forms, interim certificates) for the following projects and Supplies in 2016/2017; Stationery for the Department, Catering Services for the LG, Fuel for the 1st and #rd Quarters, Construction of a Maternity Ward at BUWEMBE HCIII, Construction of a Two Stance Pit Latrine at SIBONA HCII. The Certification ranged from one to 21 days.</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>	0	<p>From the annual performance report, the department acknowledged submission of the annual performance report for FY 2016/17 on 26/07/2017 which is a late submission.</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	<ul style="list-style-type: none"> <li>• • The sector had three (3) queries for the Financial Year 2016/2017 evidenced with the Internal Audit Reports on lacking accountability for activities carried out by the Health Inspectors, DHO's support supervision, contract management where there no up to date contract Registers.</li> <li>• There was no evidence of formal responses to Audit findings (Internal Audit Reports and Management letters) availed for examination.</li> </ul>

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> </ul>	2	<ul style="list-style-type: none"> <li>• Lists of members on the Health Unit Management Committee (HUMC) meeting minutes at Lumino HC III dated 15th November 2016 and 04th May 2017 showed that HUMC had more than two females members</li> </ul>
		<ul style="list-style-type: none"> <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>	0	<p>No guidelines on how to manage sanitation in health facilities including separating toilet facilities for men and women were found at Masafu General Hospital, Dabani NGO hospital, Buteba HC III and Lumino HC III</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	<ul style="list-style-type: none"><li>• No medical waste management guidelines, including guidelines for construction of facilities for medical waste disposal were found at Masafu General Hospital, Dabani NGO hospital, Buteba HC III and Lumino HC III</li></ul>
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## **LGPA 2017/18**

Water & Environment Performance Measures

Busia District

(Vote Code: 507)

Score 41/100 (41%)



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>From the District annual work plan dated July 4th 2017. The district safe water coverage is at 75%. Sub counties with safe water coverage below the district include:</p> <p>Buhehe at 73.4%, Buyanga at 60.9 %, Busitema at 56.9%,</p> <p>Sikuda at 63.5%, Buteba at 52.7%, Dabani 71.2%, Lumino 73.1%, Majanji 66.5%, Lunyo 63.4%, Busime at 42.28% and Masaba 65.2%, Masafu at 72.8%.</p> <p>Sub counties to be covered include:</p> <ol style="list-style-type: none"> <li>1. Lumino s/c: 1 new borehole to be drilled and 1 borehole to be rehabilitated.</li> <li>2. Majanji s/c: 2 new boreholes to be drilled and 1 borehole to be rehabilitated.</li> <li>3. Lunyo s/c: 1 new borehole to be drilled and 1 borehole to be rehabilitated.</li> <li>4. Buteba s/c: 2 new borehole to be drilled 2 borehole to be rehabilitated.</li> <li>5. Buyanga s/c : 1 borehole to be rehabilitated.</li> <li>6. Buhehe s/c : 2 new borehole to be drilled and 4 boreholes to be rehabilitated.</li> <li>7. Busime s/c: 1 new borehole to be drilled and 3 borehole to be rehabilitated.</li> <li>8. Sikuda s/c: 1 new borehole to be drilled and 2 boreholes to be rehabilitated.</li> <li>9. Busitema s/c: 2 new borehole to be drilled and 1 borehole to be rehabilitated.</li> <li>10. Daban s/c: 2 new borehole to be drilled and 1 borehole to be rehabilitated.</li> <li>11. Masafu s/c: 1 new borehole to be drilled and 1 borehole to be rehabilitated.</li> <li>12. Masaba s/c : 2 new borehole to be drilled and 1 borehole to be rehabilitated.</li> </ol> <p>From the above information, all sub counties</p>

				<p>with safe water coverage below district were provided with the water facilities.</p> <p>During the assessment, it was also noted that the safewater coverage figures for Masaba s/c and Masafu s/ were inconsistent in the 4th quarter progress report 2016/17 and in the annual workplan 2017/18. Masaba s/c it was 75.8% (report of 2016/17) and 65.2% ( annual workplan 2017/18). Masafu at 117.6% (annual report 2016/17) and 72.8% (plan 2017/18)</p>
2	<p>The LG Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> <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>	15	<p>From the annual work plan for the district dated 19th July 2016, the district safe water coverage is 74%.</p> <p>Sub counties with safe water coverage below that of the district included: Buhehe at 73.4%, Buyanga at 60.9 %, Busitema at 56.9%, Siduka at 63.5%, Buteba at 52.7%, Dabani 71.2%, Lumino 73.1%, Majanji 66.5%, Lunyo 63.4%, Busime at 36.8%</p> <p>From the 4th quarter progress report dated 28th June 2017, 14 boreholes were rehabilitated and 21 new boreholes were drilled.</p> <p>The District implemented in the following sub counties:</p> <p>Lumino s/c: 1 new borehole drilled and 2 boreholes rehabilitated. Majanji s/c : 4 new boreholes drilled and 2 boreholes rehabilitated. Lunyo s/c : 1 new borehole drilled and 2 boreholes rehabilitated. Buteba s/c : 1 new borehole drilled 2 boreholes rehabilitated. Buyanga s/c: 3 new boreholes drilled and 2 boreholes rehabilitated. Buhehe s/c : 1 new borehole drilled and 2 boreholes rehabilitated, Busime s/c : 3 new boreholes drilled and 2 boreholes rehabilitated. Sikuda s/c: 2 new boreholes drilled.</p> <p>Busitema s/c: 1 new borehole drilled and 2 boreholes rehabilitated. Daban s/c: 1 new borehole drilled and 1 borehole rehabilitated.</p> <p>From the above information, all sub counties with safe water coverage below the district were targeted.</p>
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.</p> <ul style="list-style-type: none"> <li>• If more than 95% of the WSS facilities monitored: score 15</li> <li>• 80 - 95% of the WSS facilities monitored: score 10</li> <li>• 70 - 79%: score 7</li> <li>• 60 - 69% monitored: score 5</li> <li>• 50 - 59%: score 3</li> <li>• Less than 50% of WSS facilities monitored - score 0</li> </ul>	0	<p>At the time of the assessment, there were no monthly monitoring and supervision reports in place. Though the District Water office staff highlighted that they do carry out the monitoring and supervision but there were no reports.</p>
4	<p>The LG Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has submitted accurate/consistent data for the current FY: <ul style="list-style-type: none"> <li>o List of water facility which are consistent in both sector MIS reports and OBT: score 10</li> </ul> </li> </ul>	0	<p>At the time of assessment, the district had not submitted any data for the current financial year to the Ministry of Water and Environment.</p>
Assessment area: Procurement and contract management				
5	<p>The LG Water department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4</p>	0	<p>PP Form1 were prepared for all the items in the approved workplan. However at the time of the assessment, these Forms did not bear any date. The originating officer, the authorizing officer and the accounting officer signed all the forms but none of them indicated dates. So it was not possible to establish the date when they were prepared.</p>

6	<p>The DWO has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	0	<p>At the time of the assessment, the office had not appointed any contract managers for any of the contracts despite the fact that some contracts had been completed. There were no contract management plans in place. No evidence of monthly site visits conducted and no site meeting minutes.</p>
		<ul style="list-style-type: none"> <li>• If water and sanitation facilities constructed as per design(s): score 2</li> </ul>	2	<p>The visited facilities include:</p> <ol style="list-style-type: none"> <li>1. A new Borehole in Dabani west in Dabani s/c : DWD 60667. Completed 8/12/2017.</li> <li>2. 2 stance lined / emptiable latrine in Mumutumba Rural growth centre</li> <li>3. A new Borehole in Sichehe village in Masafu s/c : DWD 60649. Completed 3/12/2017</li> <li>4. A new Borehole in Syabo village in Masaba s/c : DWD 60645. Completed 1/12/2017</li> </ol> <p>All the above facilities were constructed as per design.</p>
		<ul style="list-style-type: none"> <li>• If contractor handed over all completed WSS facilities: score 2</li> </ul>	0	<p>At the time of the assessment, the completed facilities had not yet been handed over. They are still under liability period.</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>Completion report on boreholes drilled is in place dated December 2017 by District Water Officer, Lubega Joseph.</p> <p>Contractors also provide completion reports e.g</p> <ol style="list-style-type: none"> <li>1. Borehole completion Report of 6 deep boreholes drilling , pump testing casting and installation Ref BUSI507/WRKS /2016-17/00126 by Maa Technologies U limited.</li> <li>2. Completion report for Drilling , apron casting and hand pump installation of 6 boreholes in Busia District fy 2016/17 by KLR –Uganda Ltd</li> </ol> <p>However, there were no evidence of Completion certificates.</p>

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	<ul style="list-style-type: none"> <li>The DWO made timely certification and recommendations for payments to suppliers in time. The payments documents (vouchers, funds requisition forms, interim certificates) for the following projects in 2016/2017; Drilling, Casting and Installation of additional Boreholes at BUTANGATI, BUHALALIRE WEST &amp; BUHAULI in BUSIME, BUYANGA &amp; BULUMBI Sub Counties, Tyres for the departmental Vehicle, modification of the Speaker's Office, Rehabilitation of Two Flash Toilets at RED CROSS HCIV, Borehole Siting and Drilling Supervision of 12 Hand Pumps, Retention for a Two Stance Pit Latrine at MUGASIA Trading centre and Drilling, Casting and Installation of Four Boreholes at NEKAKA, BUSIGUMBA, SIRERE &amp; BUYIMINI. The Certification ranged from one to 29 days.</li> </ul>
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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>	0	<p>From the annual performance report, the department acknowledged submission of the annual performance report for FY 2016/17 on 26/07/2017 which is a late submission.</p>
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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>	0	<ul style="list-style-type: none"> <li>The sector had two (2) queries for the Financial Year 2016/2017 evidenced with the Internal Audit Reports on lacking accountability and no certification of construction works,</li> <li>There was no evidence of formal responses to Audit findings (Internal Audit Reports and Management letters) availed for examination.</li> </ul>
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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>From the committee minutes, it was established that a committee sat and discussed service delivery issues for example during a committee meeting that sat on 8/02/2017, under MIN.004/WC/7-8/2/2017, Review of Water sector reports for the 2nd quarter FY 2016/17 was done presented by the DWO.</p>
		<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>During a committee meeting that sat on 27/04/2017, under MIN.WC/5/4/2017, the following were some of the issues recommended for approval in council;</p> <ul style="list-style-type: none"> <li>• That Yala village in Dabani S/C is non existent and therefore the borehole should be re allocated to Buwumba TC.</li> <li>• Rehabilitation of borehole at Lukaka be swapped with Bwanikha borehole.</li> <li>• Busyahuba borehole drilling be re allocated to Nasweswe P/S. Etc....</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>At the time of assessment the AWP, the budget and the Water Development grant releases and expenditures were not displayed on the district notice boards.</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>	2	<p>The visited facilities include:</p> <ol style="list-style-type: none"> <li>1. A new Borehole in Dabani west in Dabani s/c : DWD 60667. Completed 8/12/2017.</li> <li>2. 2 stance lined / emptiable latrine in Mumutumba Rural growth centre</li> <li>3. A new Borehole in Sichehe village in Masafu s/c : DWD 60649. Completed 3/12/2017</li> <li>4. A new Borehole in Syabo village in Masaba s/c : DWD 60645. Completed 1/12/2017</li> </ol> <p>All the above facilities were well 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>At the time of assessment there was no information on tenders, contract awards displayed on the district notice boards</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>At the time of assessment there was no evidence of application letters from the communities, though for the visited facilities the communities indicated they had applied.</p> <p>Communities had not completed payment of CCCC. Only one facility visited a bank deposit slip was available deposited UGX 200,000/= in Stambic Bank for Dabani West borehole. It was deposited by Bwire Israel.</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>For the visited facilities of :</p> <ol style="list-style-type: none"> <li>A new Borehole in Dabani west in Dabani s/c : DWD 60667. Completed 8/12/2017.</li> <li>2 stance lined / emptiable latrine in Mumutumba Rural growth centre</li> <li>A new Borehole in Sichehe village in Masafu s/c : DWD 60649. Completed 3/12/2017</li> <li>A new Borehole in Syabo village in Masaba s/c : DWD 60645. Completed 1/12/2017</li> </ol> <p>There was no evidence of O&amp;M funds collected.</p>
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Assessment area: Social and environmental safeguards

13	The LG Water department has devised strategies for environmental conservation and management	<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	At the time of the assessment, there were no screening templates in place.
	Maximum 4 points for this performance measure	<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	At the time of assessment, there was no evidence of follow made.
		<ul style="list-style-type: none"> <li>Evidence that construction and supervision contracts have clause on environmental protection: score 1</li> </ul>	0	<p>Contracts sampled included:</p> <ol style="list-style-type: none"> <li>Drilling, casting, Pump testing and installation of 6 units of boreholes Lot 1 under WDG by M/S PMP Holdings Ltd. Ref BUSI 507/WRKS/207-2018/00132.</li> <li>Drilling, casting, Pump testing and installation of 7 units of boreholes Lot 3 under WDG by M/S KLR (U) LTD. Ref BUSI 507/WRKS/2017-2018/00332.</li> </ol> <p>The sampled contracts did not have a clause on Environmental Protection and Management.</p>



14	<p>The LG Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• If at least 50% WSCs are women as per the sector critical requirements: score 3</li> </ul>	3	<p>For the financial year 2016/17 a total of 14 WUC were sampled from the lists on formation of WUC dated, 24/01/2017, 25/01/2017, 27/01/2017, 7/10/2017, 17/10/2017 and 21/10/2017. From this information 10/14 communities had 50% the WUC as women.</p>
15	<p>Gender- and special-needs sensitive sanitation facilities in public places/RGCs.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3</li> </ul>	0	<p>The visited 2 stance lined / emptiable latrine in Mumutumba Rural growth centre had separate stances but was not labelled to show men and women. PWD were not catered for in terms of stance though there was a rump on this facility.</p>