



LGPA 2017/18

Accountability Requirements

Kapchorwa District

(Vote Code: 520)

Assessment	Compliant	%
Yes	3	50%
No	3	50%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Assessment area: Annual performance contract			
<p>LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.</p>	xxx	<p>LG submitted a final annual performance contract of the FY 2017/18 on 14/07/2017 according to the MoFPED inventory.</p>	Yes
Assessment area: Supporting Documents for the Budget required as per the PFMA are submitted and available			
<p>LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).</p>	xxxxx	<p>The submitted copy of the LG seen didn't include a Procurement Plan for the FY 2017/18.</p>	No
Assessment area: Reporting: submission of annual and quarterly budget performance reports			
<p>LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)</p>	xxxxx	<p>The LG made a late submission of the annual budget performance report for the FY 2016/17 on 16/08/2017.</p>	No

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

xxxxxx

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

- Quarter 1 - 01/12/2016
- Quarter 2 – 23/02/2017
- Quarter 3 - 23/05/2017
- Quarter 4 – 16/08/2017

No

Assessment area: Audit

<p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous financial year by April 30 (PFMA s. 11 2g). This statement includes actions against all findings where the Auditor General recommended the Accounting Officer to take action (PFMA Act 2015; Local Governments Financial and Accounting Regulations 2007; The Local Governments Act, Cap 243).</p>	<p>XXXXX</p>	<ul style="list-style-type: none"> • The district submitted to the Internal Auditor General the status of implementation of the Auditor General and Internal Audit findings for the financial year 2015/2016. • The source of evidence is the submission letters from CAO verified at the office of the Internal Auditor General and Internal Audit of the district • The Submission letter of reference CR/103/2 dated the 3rd March 2017 and received by the Internal Auditor General on the 10th March 2017 was seen. 	<p>Yes</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer</p>	<p>XXXXX</p>	<ul style="list-style-type: none"> • The Auditor General's Audit opinion for the LG is a qualified opinion. • The source of information was the Auditor General's Report for 2016/2017 dated December 2017. 	<p>Yes</p>



LGPA 2017/18

Crosscutting Performance Measures

Kapchorwa District

(Vote Code: 520)

Score 38/100 (38%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>All new infrastructure projects in: (i) a municipality; and (ii) all Town Councils in a District are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a municipality/district has:</p> <ul style="list-style-type: none"> • A functional Physical Planning Committee in place that considers new investments on time: score 2. <p>• All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2.</p>	<p>0</p> <p>0</p>	<p>There was nothing in place to prove that the Physical Planning Committee is functional, considers new investments on time. i.e. No plans registration book, no committee minutes.</p> <p>No single new infrastructure investment had approved plan. I.e. there is a phased administrative block being constructed but it has no approved plan.</p> <p>The LG doesn't have an approved physical structural plan.</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.

2

According to the priorities in the AWP FY2017/18 approved on 30/05/2017-MIN.26/5/2017, it was established that they were based on the outcomes of the budget conference held on 27/10/2016 at Noah's Ark Hotel.(see report) For example;

- Completion of health unit ward in Tumboboi parish. Appears in report and AWP page 87.
- Construction of (2 class room Block)?? Appears in report and AWP page 90.
- Construction of 20 toilet stances. Appears in report and AWP page 91.
- Procurement of 36 desks. Appears in report and AWP page 91.
- Extension of piped water line to Boron and Loch parishes in Amukol and Gamugo s/cs. Appears in report and AWP page 98.
- Rehabilitation of Tumboboi and Amukol GFS. Appears in report and AWP page 98.

		<ul style="list-style-type: none"> • Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If different, justification has to be provided and evidence that it was approved by Council. Score 2. 	2	<p>According to the priorities in the AWP FY2017/18, it was established that they were derived from the approved five-year development plan that was approved by council during a sitting held on 27/02/2015 under MIN.10/02/2015/2016.</p> <p>For example;</p> <ul style="list-style-type: none"> • Completion of health unit ward in Tumboboi parish. Appears in DDP page 159 and AWP page 87. • Construction of (2 class room Block)?? Appears in DDP 143and AWP page 90. • Construction of 20 toilet stances. Appears in DDP page 143 and AWP page 91. • Procurement of 36 desks. Appears in DDP page 143 and AWP page 91. • Extension of piped water line to Boron and Loch parishes in Amukol and Gamugo s/cs. Appears in DDP page 137and AWP page 98. • Rehabilitation of Tumboboi and Amukol GFS. Appears in DDP page 137 and AWP page 98.
		<ul style="list-style-type: none"> • Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1. 	0	<p>Whereas the Project profiles were developed, it couldn't be established that they were discussed by TPC for all investments.</p>
3	<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> • Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum 1 point. 	0	<p>There is a District statistical abstract for 2017 but without gender disaggregated data and no proof to establish whether it was presented to the TPC to support budget allocation and decision-making</p>

Investment activities in the previous FY were implemented as per AWP.

Maximum 6 points on this performance measure.

• 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

2

From the LG annual approved AWP and budget FY 2016/17 that was approved by council on 11/02/2016 under MIN.8/2/2016, it could be established that all infrastructure projects implemented by the LG in the FY 2016/17 were derived from the 2 documents For example;

- 10(stance pit latrines) at Kapchai and Ngangata P/Ss - AWP page 93 and budget page 7
- 162 desks supplied in 5 primary schools - AWP page 94 and budget page
- Extension of piped water supply at upper Ngasire and Kamiro –Kabore GFS' - AWP page 100 and budget page 25
- Rehabilitation of general Kapchorwa main hospital. - AWP page 90 and budget page 14.

• 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

2

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

- 10(stance pit latrines) at Kapchai and Ngangata P/Ss – Completed – 03/05/2017
- 162 desks supplied in 5 primary schools – Completed – 19/03/2017
- Extension of piped water supply at upper Ngasire and Kamiro –Kabore GFS' – Completed – 30/07/2017
- Rehabilitation of general Kapchorwa main hospital. – Completed – 02/05/2017

5	<p>The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects and assets during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2 	2	<p>From the annual budget performance report FY 2016/17, it was evident that the investment projects in the FY 2016/17 were completed within the approved budget.</p> <p>See percentage budget performance below;</p> <ul style="list-style-type: none"> 10(stance pit latrines) at Kapchai and Ngangata P/Ss – 93% 162 desks supplied in 5 primary schools – Completed – 100% Extension of piped water supply at upper Ngasire and Kamiro –Kabore GFS’ – 96% Rehabilitation of general Kapchorwa main hospital. – 100%
		<ul style="list-style-type: none"> Evidence that the LG has budgeted and spent at least 80% of O&M budget for infrastructure in the previous FY: score 2 	0	<p>The LG didn’t budget and spend at least 80% of O&M budget for infrastructure. i.e. its only the administration department that budgeted for O&M and managed to spend only 6.8% of it.</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"> Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2 	0	<ul style="list-style-type: none"> Only the District Education Officer’s file had evidence of appraisal on his personnel file. No appraisal was found for Head of Production, Head of Finance, Head of Works, Head of Health, Head of Natural Resources, Head Community Development Services, Head Management Support during FY 2016/2017.
		<ul style="list-style-type: none"> Evidence that the LG has filled all HoDs positions substantively: score 3 	0	<ul style="list-style-type: none"> Three (3) HoD positions were not substantively filled during FY 2016/2017 namely Head of Work, Head of Production, and Head of Finance. These positions were held in acting capacity.

7	The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.	<ul style="list-style-type: none"> Evidence that 100 percent of staff submitted for recruitment have been considered: score 2 	0	<ul style="list-style-type: none"> Not all declarations of vacancies were responded to by the DSC during FY 2016/2017, for example declaration of 17 positions of Education Assistant (U7) dated April 5th 2017 was not responded to, as well as declaration for Community development officer – (U4) dated April 12th 2017.
	Maximum 4 points on this Performance Measure	<ul style="list-style-type: none"> Evidence that 100 percent of staff submitted for confirmation have been considered: score 1 	1	<ul style="list-style-type: none"> Minute no. 31/2017 to 35/2017, 15/2017(a) (i) to 15/2015 (h) (ii); 22/2016 – 25/2016 indicate considerations for all confirmations submitted to the DSC during FY 2016/2017
		<ul style="list-style-type: none"> Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1 	1	<ul style="list-style-type: none"> Minute no. 33/2017; 33/2016 – 41/2016 indicate due consideration for the seven (7) disciplinary cases submitted to the DSC during FY 2016/2017.
8	Staff recruited and retiring access the salary and pension payroll respectively within two months	<ul style="list-style-type: none"> Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3 	0	<ul style="list-style-type: none"> There are cases of staff who accessed payroll after more than three (3) months of assumption of duty during FY 2016/2017 for example, e.g. Chelangat Nancy, Chemonges Joel, and Nyacho Yakoba Neemah
	Maximum 5 points on this Performance Measure.	<ul style="list-style-type: none"> Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2 	0	<ul style="list-style-type: none"> There is a case of a staff who retired during FY 2016/2017 who did not access and has not accessed the pensions payroll to-date (i.e., Sembur Christopher)
Assessment area: Revenue Mobilization				

9	<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • If increase in OSR from previous FY but one to previous FY is more than 10% : score 4 points • If the increase is from 5 -10% : score 2 point • If the increase is less than 5% : score 0 points. 	0	<ul style="list-style-type: none"> • Local Revenue (OSR) increased from UGX. 184,814,423 in 2015/2016 to UGX.186, 612,117 in 2016/2017. The percentage increase was 0.97%. • The source of information is the Audited Financial Statements for 2015/2016 & 2016/2017, Auditor General's Reports for 2015/2016 & 2016/2017.
10	<p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10% : then 2 points. If more than +/- 10% : zero points. 	0	<ul style="list-style-type: none"> • The Local Revenue ratio for actual against budgeted in 2016/2017 is 59.5%. derived from UGX. 186,612,117 actual from the UGX313, 900,000 budgeted in the year. • The source of information was the the Budget for 2016/2017, Audited Financial Statements for 2016/2017 and the Auditor General's Report for 2016/2017 dated December 2017.
11	<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2 	0	<ul style="list-style-type: none"> • The LG made Local Service Tax (LST) to eleven Sub Counties on the 17th June 2017 amounting to UGX.2, 782,650 and UGX. 5,368,750 to Kapchorwa Municipal Council to UGX. 8,151,400 • No other evidence was available for other remittances. • This fell short of the required UGX. 19, 437,600 to be remitted to LLGs by UGX. 11,286,200 • This was sourced from the Audited Financial Statements and payment vouchers for transfers to the LLGs.

		<ul style="list-style-type: none"> • Evidence that the LG is not using more than 20% of OSR on council activities: score 2 	0	<ul style="list-style-type: none"> • During the Financial Year 2016/2017, LG allocated UGX.43,200,00 for Council activities. This was beyond the UGX. 36, 962,885 (20% of the UGX.184, 814, 423) limit for Local Revenue to be spent on Council Activities. • However, the LG could not avail information to prove otherwise. • This was sourced from the Audited Financial Statements and Local Revenue allocations sheets from the Finance Department.
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Assessment area: Procurement and contract management

12	<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2 	2	<p>Kapchorwa district has a Senior procurement officer and procurement officer who are substantively appointed. The procurement officer was seconded to Kapchorwa Municipality to give support as the process of recruitment at the municipality is ongoing. The Senior procurement officer was appointed on Minute Number 04/2017 (d); and Procurement officer appointed on Minute No. 32/2017(b)</p>
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	<ul style="list-style-type: none"> Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1 	1	<p>Contracts Committee minutes available indicating the TEC submitted an evaluation reports. For instance, the 48th and 57th contracts committee meetings received evaluation reports on the following projects;</p> <p>(i) MIN CC: 347/10/2017 (i) – Construction of 5 stance toilet at Chemosong P/S</p> <p>(ii) MIN CC: 347/10/2017 (ii) – construction of 5 stance toilet at Ngasire p/s</p> <p>(iii) MIN CC: 347/10/2017 (iii) – construction of 5 stance toilet at Boron p/s</p> <p>(iv) MIN CC: 347/10/2017(vii) – construction of 5 stance latrine at Kapkwai p/s</p> <p>(v) MIN CC: 265/1/2017 (iv) Renovation of Nurses block type 1 at Kapchorwa Hospital</p>
	<ul style="list-style-type: none"> Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1 	1	<p>Various meetings of the contracts committee approved various recommendations that were made the TEC. No variation was seen. Some of the approved projects included;</p> <p>(i) MIN CC 257/12/2016 (i) approved the Renovation of Nurses block type 2 at Kapchorwa Hospital awarded to Sabiny Trust (U) Ltd</p> <p>(ii) MIN CC 257/12/2016 (iii) approved the Renovation of Nurses block type 2 at Kapchorwa Hospital awarded to Rugong Enterprises limited</p> <p>(iii) MIN CC 257/12/2016 (v) approved the construction of 5 stance line pit latrine at Kapchai p/s awarded to Gombe Vision Ent Ltd</p> <p>(iv) MIN CC 265/01/2017 – approved the Renovation of Nurses block type 1 at Kapchorwa Hospital awarded to Sebei overall general agencies</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"> a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2 	2	<p>a) The procurement and Disposal Plan for FY 2017/18 covers all the following infrastructure projects in the approved annual work plan and budget. These includes;</p> <p>(a) construction of 2 classroom block at Kapkwai p/s</p> <p>(b) construction of 5 stance toilets at Chemsong p/s</p> <p>(c) construction of 5 stance toilets at Ngasire p/s</p> <p>(d) construction of 5 stance toilets at Boroni p/s</p> <p>(e) construction of 5 stance toilets at Sansara p/s</p> <p>(f) extension of piped water to Boron</p> <p>(g) extension of piped water to Loch</p> <p>(h) completion of Tumboboi HC II</p> <p>b) The contracts register and the work plan and budget for FY2016/17 all indicate that all the infrastructure projects that were planned in the procurement plan where made by the end of the financial year.</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"> For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2 	2	<p>Bid documents were prepared for the most infrastructure projects, representing 89%, by 30th August, except for one project, completion the construction of Tumboboi HC III because funding was yet to be assured.</p>
		<ul style="list-style-type: none"> For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2 	0	<p>Even though the LG has an updated contracts register, that shows all the projects for the previous FY, the procurement activity files are still incomplete. Some documentation such as project progress reports, interim and completion files were missing on the procurement files.</p>

<ul style="list-style-type: none"> • For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2. 	2	<p>The LG adhered to the procurement threshold, with investments above Ugx. 50m advertised in national newspapers (Daily Monitor Tuesday, May 26, 2016, page 22 and New Vision, Thursday May 18, 2017 page 35) for open domestic bidding, while those that were below Ugx. 50m where conducted under selective bidding with invitation for bids pinned on the procurement notice board. Some of the projects procurement under selective and open domestic bidding includes;</p> <p>(ii) Extension of piped water at Boron valued at Ugx. 82,500,000 – conducted under Open Domestic Bidding</p> <p>(iii) Extension of piped water at Loch valued at Ugx. 63,000,000 – conducted under open domestic bidding</p> <p>(iv) Construction of 2 classroom block at Kapkwai p/s valued at 45,000,000 – conducted under selective bidding process</p> <p>(v) Construction of 5 stance toilets at Boroni p/s valued at 18,000,000 – conducted under selective bidding process</p> <p>(vi) Construction of 5 stance toilets at Ngasire p/s valued at 18,000,000 – conducted under selective bidding process</p> <p>(vii) Renovation of two classroom blocks at Kapchai p/s – Kapc520/wrks/17-18/00016 - conducted under selective bidding process</p>
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15	<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2 	0	<p>Even though most of the works projects were implemented, they don't have interim certificates. Some are still under retention (defects period) and therefore completion certificates haven't been prepared.</p> <p>For those completed, and out of the defects period, such as construction of five stance brick latrine at Ngagata p/s and construction of 5 stance latrine at Kapchai p/s, completion certificates are available.</p>
		<ul style="list-style-type: none"> Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2 	0	<p>No site boards were found on all works projects under implementation that were visited such as construction of 2 classroom block at Kapkwai p/s, construction of 5 toilet stances at Ngasire p/s, extension of pipe water to Boron and Loch.</p>
Assessment area: Financial management				
16	<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4 	4	<ul style="list-style-type: none"> The LG makes monthly Bank Reconciliation Statements using the IFMS Navision application which is automatically generated from the IFMS system and printed out. A copy of the reconciliation statements of the TSSA Number KAP/BK048 dated the 17th January 2018 was availed.
17	<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2. 	0	<ul style="list-style-type: none"> Not able to get more details because of the absence of a claims register though one such notable payment made beyond two months was retention payment for the renovation of KASEREM HCIII and domestic arrears. This was sourced from the payment document and the Audit Report for 2016/2017

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"> Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3. 	3	<ul style="list-style-type: none"> The District LG has a substantive Principal Internal Auditor appointed under DSC Minute 35/2015d. The Internal Audit produced reports for 2016/2017 dated the 5th August 2016, 20th January 2017, 28th April 2017 and 14th August 2017. There were also Management letters dated the 27th July 2016 and 21st April 2017.
		<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> The LG provided information to the Council and LGPAC on the status of the implementation of the Internal Audit findings as per CAO's letter dated the 14th August 2017
		<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> The Internal Audit department made submission of the Internal Audit reports for 2016/2017 dated the 5th August 2016, 20th January 2017, 28th April 2017 and 14th August 2017. There were also Management letters dated the 27th July 2016 and 21st April 2017. LGPAC reviewed the Audit reports as per sittings and reports dated the 14-15th November 2016, 13th-14th March 2017 and 18th July 2017
19	<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4 	0	<ul style="list-style-type: none"> The LG only maintains an Inventory Register and not an Assets Register.

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"> • unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0 	2	<ul style="list-style-type: none"> • The LG got a qualified Audit Opinion for the Financial Year 2016/2017. • The source of information is the Auditor general's Report for 2016/2017 dated December 2017.
Assessment area: Governance, oversight, transparency and accountability				
21	<p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p>	<p>Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2</p>	2	<p>According to the minutes available for FY 2016/17, there is evidence that council sits i.e. sat on 13/02/2017, 04/11/2016,14/09/2016 e.t.c. and yet during the council meeting that was held on 23/07/2016 under MIN.15/06/2016, there was the presentation, consideration and approval of the supplementary budget FY 2016/17.</p> <p>Also under MIN 16/06/2016 council deliberated on an overview of NUSAF3 project presented by CAO.</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"> • Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 2. 	0	<p>No person in place designated to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints.</p>

23	The LG shares information with citizens (Transparency)	Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2	0	At the time of assessment, there was no LG display of Payroll and Pensioner Schedule on public notice boards or by any other means.
	Total maximum 4 points on this Performance Measure	• Evidence that the procurement plan and awarded contracts and amounts are published: score 1	0	There were no publications on awarded contracts and amounts on the notice board and yet still the procurement plan wasn't seen published anywhere.
		• Evidence that the LG performance assessment results and implications, are published e.g. on the budget website for the previous year (from budget requirements): score 1.	0	N/A, central Government didn't carry out any performance assessment for LGs during the FY 2016/17
24	The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens	• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1	0	No proof of communication or explanation seen on guidelines, circulars and policies issued by the national level towards LLGs.
	Maximum 2 points on this performance measure	• Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc..) with the public to provide feed-back on status of activity implementation: score 1.	0	There was no proof to support the fact that LG during FY 2016/17 conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc..) with the public to provide feed-back on status of activity implementation.
Assessment area: Social and environmental safeguards				
25	The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles	• Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2.	0	At the time of assessment, there was no substantial evidence that the GFP has provided support to sectors on gender mainstreaming. There were neither notes nor minutes in which the GFP engaged with sectors on gender mainstreaming.
	Maximum 4 points on this performance measure.			

		<ul style="list-style-type: none"> • Evidence that gender focal point has planned activities for current FY to strengthen women's roles and that more than 90% of previous year's budget for gender activities has been implemented: score 2. 	0	<p>The GFP has planned activities and budget on gender mainstreaming and they are incorporated within the Local government Budget estimates and annual work plan page 35.</p> <p>However, there's no evidence such as annual progress reports, to show that the GFP implemented gender activities in the previous financial year's budget.</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"> • Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 2 	2	<p>Environment screening for various projects conducted and they include plan and budget for mitigation measures. These include;</p> <ul style="list-style-type: none"> (i) Extension of piped water to upper Ngasire (ii) Extension of piped water to Boron (iii) Construction of maternity/children ward at Chebonet HC II (iv) Construction of Chema GFS (v) Construction of 2 classroom block at Sipi p/s
		<ul style="list-style-type: none"> • Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1 	0	<p>Even though the ESMP and screening files were prepared and available on file in the environment office, there was no evidence that these plans and budgets are integrated into the contracts and bid documents. There's thus no budget and plans to monitor environmental issues in the BOQs for the various projects.</p>
		<ul style="list-style-type: none"> • 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	<p>With the exception of Land at Sirinda Village, Cheptua Parish, Kapsinda Parish, where the district is in the process of paying for the land title and the land agreement in place, to construct piped water system, in the other project areas, there currently not land agreements, titles or filled land consent forms on file.</p>

		<ul style="list-style-type: none">• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2	0	No completed project has Environmental and Social Mitigation Certification Form completed and signed by the Environment Officer. This is mainly because the environment officer is not involved at all in initiation and preparation of bid documents, and consequently in the monitoring of the project works.
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LGPA 2017/18

Educational Performance Measures

Kapchorwa District

(Vote Code: 520)

Score 79/100 (79%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Human Resource Management				
1	<p>The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4 Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4 	4	<p>Basing on performance contract with a wage bill of 2,126,265,000/= ,Staff lists and school lists available, a headteacher with 7 teachers were budgeted for in FY 2017/18.</p> <p>The staff lists showed more than 8 teachers per school a headteacher inclusive. Equally, the OBT had the same information.</p>
2	<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0 	3	<p>Out of 327 teachers (staff ceiling), 303 teachers are available (92.7%) leaving a gap of 24 teachers. Which gap according to declaration by DEO to CAO available, and the subsequent submission by CAO to DSC dated 29/03/2017 are intended to fill it.</p>

3	<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6 	6	<p>The 2 positions of inspectors are substantively filled as per structure. The wage bill is in place as per performance contract.</p>
4	<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of Primary Teachers: score 2</p>	2	<p>The recruitment plan was available and declaration from DEO to CAO dated 24/03/2017 and the subsequent submission from CAO to DSC dated 29/03/2017 were in place to address the gap of teachers missing. However, the new DSC will be in place soon.</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>As per structure the 2 inspectors were in place thus no need for recruitment plan.</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"> There is no appraisal on file for the only (Senior) Inspector of schools during FY 2016/2017.
		<p>Evidence that the LG Education department appraised head teachers during the previous FY. • 90% - 100%: score 3 • 70% - 89%: score 2 • Below 70%: score 0</p>	0	<ul style="list-style-type: none"> There are appraisal forms for only thirteen (13) of the twenty (24) head teachers during FY 2016/2017 amounting to 54%.

Assessment area: Monitoring and Inspection

6	<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1 	1	<p>Circulars from MoES to district like: Focus on Inspection [19/07/2017]; Registration of Learners [04/12/2017]; Mobilisation [04/11/2017]; Teacher Support Supervision [30/06/2017]; Circular No. 14 [16/10/2017] were in place. Circulars from district to schools like: Mobilisation [22/11/2017 and Expiry of SMCs [21/08/2017] were seen.</p>
		<ul style="list-style-type: none"> Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level, including on school feeding: score 2 	2	<p>Minutes and attendance lists of meetings for example held on 24/02/2017; 30/06/2017; 23/08/2017 were in place. Issues related to policy were discussed.</p>
7	<p>The LG Education Department has effectively inspected all private and public primary schools</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that all private and public primary schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> 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. 	12	<p>The 24 [government] and 22 [private] schools in the district each had at least 2 copies of feedback inspection report in the file. By implication they were all inspected.</p>
8	<p>LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4 	4	<p>Basing on the minutes of departmental meetings held on 16/06/2016; 29/05/2017; 31/07/2017 issues emanating from inspection reports were discussed and actions taken.</p>
		<ul style="list-style-type: none"> Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2 	0	<p>There were no evidence of submission of reports to either DES headquarters or at Regional Offices - Eastern. Equally, both Inspection and monitoring reports were not in place except quarter 4 FY 2016/17 monitoring report by DEO dated 22/08/2017 and was not submitted.</p>
		<ul style="list-style-type: none"> Evidence that the inspection recommendations are followed-up: score 4 	0	<p>In the absence of consolidated inspection reports and follow-up reports it was difficult to ascertain whether recommendations were monitored.</p>

9	The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES Maximum 10 for this performance measure	<ul style="list-style-type: none"> Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5 	5	Basing on the list of schools presented, the budget web, and OBT in comparison to EMIS data from the MoES, the names and number of schools were tallying.
		<ul style="list-style-type: none"> Evidence that the LG has submitted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and OBT: score 5 	5	Comparing enrolment data at district and statistical forms at schools with EMIS data from MoES , the enrolment data was the same. In schools like: Kapchai [3836] - 272 boys & 281 girls; Sanzara [3835] - 179 boys &184 girls; Kapkwai - 345 boys & 357 girls [EMIS, 2016 and Statistical forms, 2016].

Assessment area: Governance, oversight, transparency and accountability

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	<ul style="list-style-type: none"> Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc...during the previous FY: score 2 	2	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 20/04/2017, under MIN.3/3/2017, sector budget for Education FY 2017/18 was presented by the DEO for discussion.
		<ul style="list-style-type: none"> Evidence that the education sector committee has presented issues that requires approval to Council: score 2 	2	<p>From the committee minutes, it was established that a committee sat and presented issues that required approval to Council for example during a committee meeting that sat on 29/11/2016,the following were some of the issues recommended for approval in council;</p> <ul style="list-style-type: none"> Council to lobby for additional development grants to fix the deficit in classrooms,desks,teachers' houses, toilets and water supplies Service commission speeds up the recruitment of head teachers, deputy head teachers and school inspectors to SNF, CGC. etc...

11	<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0</p>	5	<p>Information available indicated that SMCs are appointed and expire same time. Circular dated 21/08/2017 calling for renewal of SMCs was in place. Appointment letters and a list of all SMCs members were in place.</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>Lists of schools for FY 2016/17 and FY 2017/18 [so far] with UPE funds received were pinned on the notice board of Education Department.</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>	<p>• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30: score 4</p>	4	<p>Procurement workplan dated 17/05/2016 and procurement requests dated 25/10/2017 with time schedules for projects 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"> • Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points 	3	<p>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; supply of stationery to the department, supply of eighteen desks to BUGIMOTWA Primary School, supply of 72 metallic desks to NYANGATA Primary School, supply of 72 metallic desks to CHEMOSONG Primary School, supply of 36 desks to KASEREM Primary School and supply of 36 metallic desks to KAPSIRIKWO Primary School. The certification and approval for all these payments by the department took zero to 34 days.</p>
Assessment area: Financial management and reporting				
15	<p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by mid-July for consolidation: score 4 	0	<p>From the annual budget performance report FY 2016/17, page 93, it's evident that the department made a late submission of the annual performance report for the FY 2016/17. i.e. submitted on 11/08/2017</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"> • Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points o If all queries are not responded to score 0 	2	<ul style="list-style-type: none"> • The sector had three (3) queries for the Financial Year 2016/2017 evidenced with the Internal Audit Management letters (dated the 21st April 2017 and the Internal Audit reports 5th August 2016, 30th October 2016, 20th January 2017, 28th April 2017 and 4th August 2017). • The CAO's, responses f to the Internal Audit report dated the 14th August 2017 provides prove that the sector provided the status on the Internal Audit findings. • These included Activity reports for the inspection, monitoring and supervision activities, acknowledgements by the recipients of funds advanced, supporting documents such as receipts, invoices required.
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Assessment area: Social and environmental safeguards

17	<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc....: Score 2 	2	<p>Documents in place show that Sebei Diocess and Straight Talk Foundation [under the programme - Better Life for Girls (boys inclusive)] have conducted different interventions with both senior women/men teachers on reproductive health and other related issues.</p>
		<ul style="list-style-type: none"> • Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2 	2	<p>The Gender in Education Sector policy booklet was seen and the distribution list to schools and other stakeholders were in place.</p>
		<ul style="list-style-type: none"> • Evidence that the School Management Committee meet the guideline on gender composition: score 1 	1	<p>The appointment letters of SMC members at district and schools and a list of all SMCs and their compositions indicated each committee with at least 3 women members.</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"> • Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 3: 	3	<p>Records of meetings with headteachers and training of teachers by NEMA were available. In addition to the two the department in collaboration with NEMA organized environment competitions 2017 and the adjudication mark sheet was in place. A visit to sampled schools witnessed structured compounds with trees and flowers planted.</p>
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LGPA 2017/18

Health Performance Measures

Kapchorwa District

(Vote Code: 520)

Score 41/100 (41%)

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"> • Review of the performance contract 2017/18 and approved structure revealed that there are 361 established position filled. • Review of wage IPFs for the current year revealed that there 362 positions of health worker with a wage bill provision for the year 2017/18 • Hence 100% of the structure for primary health workers with a wage bill provision from PHC wage for the current FY has been filled.
2	<p>The LG Health department has submitted a comprehensive recruitment plan to the HRM department</p> <p>Maximum 4 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers: score 4</p>	4	<ul style="list-style-type: none"> • The staff recruitment plan for the year 2017/18 was reviewed and it was established that 16 vacant positions of health workers had been included. • There is also communication from the DHO to the CAO with copy to the District planner and PHRP dated 5th April 2017 reiterating the same
3	<p>The LG Health department has ensured that performance appraisal for health facility in charge is conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the health facility in-charge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0</p>	0	<ul style="list-style-type: none"> • There is no appraisal form found for the only hospital (Kapchorwa Hospital) head in the district during FY 2016/2017. There are no HC IVs in the district.

4	<p>The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4 	4	<ul style="list-style-type: none"> There are 3 midwives and 2 enrolled nurses deployed in Chebonet HC III and another 3 midwives and 2 enrolled nurses deployed at Sipi HC III This is consistent with the staff lists submitted together with the budget 2017/18
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Assessment area: Monitoring and Supervision

5	<p>The DHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3 	0	<ul style="list-style-type: none"> There was no evidence to indicate that the DHO communicated ALL of the following guidelines issued by the national level in the previous year: <ol style="list-style-type: none"> PHC grants guidelines 2016/17 MoH guidelines for eye care – October 2016 Uganda Clinical Guidelines – 2016 Essential Medicines & Health Supplies List – 2016 MoH Resettlement Policy Framework – 2016 Health Sector Quality Improvement Framework and Strategic Plan 2015/16 – 2019/20, June 2016
		<ul style="list-style-type: none"> Evidence that the DHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3 	0	<ul style="list-style-type: none"> DHT meetings held on the 3rd August 20016, 3rd March 2017, 6th June 2017 and 19th June 2017 did not indicate discussions with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level

6	<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3</p>	0	<ul style="list-style-type: none"> • The district availed only 2 integrated support supervision reports by the DHT quarter 1 and quarter 2 for FY 2016/17. • This was further verified in the supervision log book at Kapchorwa Hospital. It was logged that on the 15th October 2016 DHT members conducted integrated support supervision. Also on the 29th November 2016 a team that included the DHO, Cold chain & TB focal person conducted integrated support supervision
		<p>Evidence that DHT has supervised lower level health facilities within the previous FY:</p> <ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • The district availed only 2 integrated support supervision reports by the DHT quarter 1 and quarter 2 for FY 2016/17. This was further verified in the supervision log book at Chebonet HC III and Sipi HC III
7	<p>The Health Sub-district(s) have effectively provided support supervision to lower level health units</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that health facilities have been supervised by HSD and reports produced:</p> <ul style="list-style-type: none"> • If 100% supervised score 6 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 	0	<ul style="list-style-type: none"> • Kapchorwa Hospital (HSD) did not avail supervision reports nor HSD meeting minutes for the FY 2016/17 • DHT meetings held on the 3rd August 20016, 3rd March 2017, 6th June 2017 and 19th June 2017 did not indicate discussions regarding HSD supervening lower level HFs • Supervision log books at Chebonet HC III and Sipi HC III did not have logs of all the mandatory quarterly HSD supervisions during 2016/17

8	<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4 	0	<ul style="list-style-type: none"> • All the mandatory quarterly DHT and HSD supervision reports for the FY 2016/17 were not available
		<ul style="list-style-type: none"> • Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6 	0	<ul style="list-style-type: none"> • DHT meeting minutes for the FY 2016/17 did not indicate discussions regarding all the mandatory quarterly DHT support supervision reports • The HSD did not avail HSD meeting minutes for the FY 2016/17
9	<p>The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports and OBT: score 10 	0	<ul style="list-style-type: none"> • The lists of facilities in OBT and HIMS are not consistent with each other – The HIMS list from MoH includes HFs like Tegres HC III and Tigrim HC II that are not in the OBT. The HIMS still has Tegres HC III and Tigrim under Kapchorwa district yet these are now under Kapchorwa Municipality • It is important to note that there are NGO HFs on the HIMS list though not a subject of this assessment

Assessment area: Governance, oversight, transparency and accountability

10	<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2 	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.15/11/2016, sector report for Health highlighting achievements registered between September – October 2016 was presented by the DHO for discussion.</p>
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		<ul style="list-style-type: none"> • Evidence that the health sector committee has presented issues that require approval to Council: score 2 	2	<p>From the committee minutes, it was established that the committee sat and presented issues that required approval to Council for example during a committee meeting that sat on 26/07/2016, the following were some of the issues recommended for approval in council;</p> <ul style="list-style-type: none"> • Allocation of 42million from local revenue to the health sector to cater for doctor's top up. • Construction of Ngangata and sanzara health centers. • Meeting with health facility 'in charges' to discuss the attendance reports and to develop an action plan to curb absenteeism. Etc...
11	<p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 5 points</p>	<p>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> • If 100% of randomly sampled facilities: score 5 • If 80-99% : score 3 • If 70-79%: : score 1 • If less than 70%: score 0 	5	<ul style="list-style-type: none"> • ALL 3 sampled HFs (Kapchorwa Hospital, Chebonet HC III and Sipi HCIII availed all the mandatory quarterly HUMC meeting minutes. • I all meeting minutes discussions of budget and resources were identified e.g. Kapchorwa Hospital HUMC Quarter 1 meeting min.07/072016: Presentation of the budget estimate for 2016/17
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"> • 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 	0	<ul style="list-style-type: none"> • There was no evidence on the public notice board at the DHOs office that the office had publicised all health facilities receiving PHC non-wage recurrent grants.
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"> • 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 	2	<ul style="list-style-type: none"> • There was a submission letters to DPU that covered all investment items in the approved Sector annual work plan and budget dated 28th July 2017
		<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	<ul style="list-style-type: none"> • There was a copy of form PP1 (PD Entry code – 520, Subject of procurement – Stationary) was submitted by DHO to the PDU. It was confirmed by DHO on the 30th August 2016 and the delivery was verified by the internal auditor on 16th January 2017
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"> • Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time: • 100% - score 8 • 70-99% – score 4 • Below 70% - score 0 	8	<ul style="list-style-type: none"> • There was a Procurement Plan to NMS for 2016/17 signed by all health facility in-charges in the district. It was signed and submitted to NMS by the DHO on the 27th January 2016.
15	<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 2 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points 	2	<ul style="list-style-type: none"> • The DHO made timely certification and recommendations for payments to suppliers in time. This was evidenced from the payments documents (vouchers, funds requisition forms, interim certificates) for the following; Repair of departmental car UG 4651, Extra Works renovation of KASEREM HCIII Staff House, Repair of desk top Computer, Construction of Children's' and Maternity Ward at CHEBONET HC III, supply of office stationery. The certification and approval for all the above by the DHO ranged from zero to 28 days.

Assessment area: Financial management and reporting

16	<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4 	0	<ul style="list-style-type: none"> • From the annual budget performance report FY 2016/17, page 89, it's evident that the department made a late submission of the annual performance report for the FY 2016/17. i.e. submitted on 11/08/2017
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>	2	<ul style="list-style-type: none"> • The sector had five (5) queries for the Financial Year 2016/2017 evidenced with the Internal Audit on certifications of constructions works, lack of supporting documents for support supervision and sensitization workshops and other lacking accountabilities. Management letters (dated the 21st April 2017 and the Internal Audit reports 5th August 2016, 30th October 2016, 20th January 2017, 28th April 2017 and 4th August 2017). • The CAO's, responses f to the Internal Audit report dated the 14th August 2017 provides prove that the sector provided the status on the Internal Audit findings. The responses included availing supporting documents, activity reports and construction inspection and certification reports by the Engineer.

Assessment area: Social and environmental safeguards

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



LGPA 2017/18

Water & Environment Performance Measures

Kapchorwa District

(Vote Code: 520)

Score 37/100 (37%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: score 10 	0	<p>The District Water and Sanitation Sector Grant Annual Work plan dated 13th July 2016 addressed to Permanent Secretary Ministry of Water and Environment received by MWE on 17th July 2017, the district safe water coverage is at 74% and the district planned to provide:</p> <ul style="list-style-type: none"> Piped water system to Boron Parish to cover Gamogo and Amukol sub counties under contract Ref Kapc520/Wrks/17-18/00001. Piped water extension to Loch Parish in Gamogo subcounties. This has been completed .Proc Ref Kapc520/Wrks/17-18/00002 Rehabilitation of Tumboboi GFS in Kaptanya subcounty Protection of Cheptiliyal Spring in Kaptanya subcounty <p>From the safe water coverage data from MIS database of Ministry of Water and Environment as at 14th January 2017 , these targeted subcounties have a safe water coverage at 92% for Amukol s/c and at 79% for Kaptanya s/c. This safe water coverage is above that of the district. The subcounties with safe water coverage below that of the district were not targeted e.g Kapsinda at 56%, Kawowo at 60% and Chpeteret at 63%.</p>

2	<p>The LG Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15 	0	<p>From the 4th quarter Progress Report For Fy 2016/17 dated 14th July 2017 addressed to Permanent Secretary MWE signed for Mr. Kawooya David Chief Administrative Officer of the District the safe water coverage is at 74 %</p> <p>From the District Water and Sanitation Sector Grant Annual Work plan FY 16/17 dated 15th July 2016 received at Directorate of Water Development on 3rd August 2016 and approved by MWE On 11th August 2016 the district planned to construct:</p> <ul style="list-style-type: none"> - piped water system in Kamiro - Kabore in Chema s/c by M/S Kongowo Contractors Ltd - piped water Extension to Upper Ngasire in Munarya in Munarya s/c <p>These targeted subcounties have safewater coverage at 95%. which is above the district safe water coverage. The subcounties with safewater coverage below the district were not targeted and these include: Kapsinda s/c at 56% s/c, Kawowo s/c at 60% and Chepeteret s/c at 63%.</p>
Assessment area: Monitoring and Supervision				

<p>3</p>	<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>	<p>15</p>	<p>From the 4th quarter Progress Report For Fy 2016/17 dated 14th July 2017 addressed to Permanent Secretary MWE signed for Mr. Kawooya David Chief Administrative Officer of the District the following projects were implemented during the financial year:</p> <ul style="list-style-type: none"> - Construction of piped water system Kamiro- Kabore in Chema s/c by M/S Kongowo Contractors Ltd at a cost of UGX.68,315,000/= by M/S Kongowo Contractors Ltd. - Piped water Extension to Upper Ngasire in Munarya in Munarya s/c at a cost of UGX 77,451,425/= by Trinity Technical Agencies. <p>A supervision report dated 7th February 2017 addressed to Chief Administrative Officer Kapchorwa thru The District Engineer and prepared by the District Water Officer/Project Manager Mr. Olal David William indicate that the Kamiro – Kabore scheme was visited more than once.</p> <p>An inspection report dated 20th March 2017 addressed to CAO and prepared and signed by DWO show that Cheema project was visited.</p> <p>Supervision reports for piped water extension to upper Ngasire by District Water Officer dated 13th February 2017 and 22nd May 2017 to CAO highlight that the projects were supervised.</p> <p>A site visit report dated 18th April 2017 by DWO show that works were supervised.</p>
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4	<p>The LG Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has submitted accurate/consistent data for the current FY: o List of water facility which are consistent in both sector MIS reports and OBT: score 10 	0	<p>Data has not yet been submitted by the District to the Ministry of Water and Environment . Works are ongoing.</p>
Assessment area: Procurement and contract management				
5	<p>The LG Water department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4</p>	4	<p>A requisition LG PP Form 1 signed by DWO (Olal David William) on 2/05/2017 and by CFO (Kurong James) on 2/05/2017 and Ag CAO (Ddamba Henry)on the same day show that for Piped Water Extension to Boron Parish at UGX 82,500,000 show that requisition submitted on time</p> <p>A requisition LG PP Form 1 signed by DWO (Olal David William) on 2/05/2017 and by CFO (Kurong James) on 2/05/2017 and Ag CAO (Ddamba Henry)on the same day show that for Piped Water System For Loch Parish at UGX 63,000,000 show that requisition submitted on time.</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"> If the DWO prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2 	0	<p>A letter dated 2nd October 2017 from the Chief Administrative Officer addressed to Olal David the District Water Officer indicate the appointment of DWO as Contract Supervisor for various projects. However, there was no Contract Management plan in place although field visit /supervision reports were in place.</p>

<p>• If water and sanitation facilities constructed as per design(s): score 2</p>	<p>0</p>	<p>The visited tap stands on Loch Gravity Flow systems included those in Kikolo village, Jewa village, Gewa East, Guzuzwa village and Mafuti village. The aprons around the tapstands were poorly constructed for all the tapstands. The communities reported that water takes two weeks without flowing and they complained of sabotage from other community members living above their line.</p> <p>- Gewa tapstand in Chebelet parish was constructed in a road reserve and located at a cliff where it can easily be eroded by rains.</p> <p>- Mafutu tapstand . There was a private connection about 20 meters from this tap, which was not on the original design. And this may affect the pressure of water along the pipe line.</p> <p>- Tap at Guzuzwa village had been vandalised and water was freely jetting out. There was a pipe burst about 20 meters away and the community had put a stone around the pipe to reduce water leakages.</p> <p>- At Jewa village tap, the spill overwater stagnates around the apron. Along the pipe line there were reported pipe bursts close to the tap and along the pipe line. The community reported to have used tyre rubbers to tie the pipes but there were visible water leakages. The community also reported that those living up the line do block their line by pushing stones and polythene bags in the pipe which blocks water from flowing.</p> <p>All the taps did not have soak pits.</p>
<p>• If contractor handed over all completed WSS facilities: score 2</p>	<p>0</p>	<p>Works on Loch Gravity flow system are still under defects liability period so the contractor has not yet handed over the system.</p> <p>Works under other contracts are still ongoing.</p>

		<ul style="list-style-type: none"> • If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2 	0	<p>The DWO prepared a supervision report dated 13th December 2017 to the CAO (attached to payment voucher no PV-WKNUS00447 for the extension of piped water to Loch Parish. Payment certificate and measurement sheets were attached. However, there was no field completion report by the contractor.</p>
7	<ul style="list-style-type: none"> • Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 	<ul style="list-style-type: none"> • Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 	3	<ul style="list-style-type: none"> • The DWO made timely certification and recommendations for payments to suppliers in time. The payments documents (vouchers, funds requisition forms, interim certificates) for the following projects; Piped water system at KAMIRO-KABORE, extension of piped water to UPPER NGASIRE , extension of MUNARYA piped water system, CHEBELAT piped water system, rehabilitation of SEBEI COLLEGE TEGERES water scheme, NYANGATA gravity flow scheme, protection of six water springs at MUNERU, CHEBUNGAI,KURUMBOY,KOBIL, KULULU and MWESA. The certification and approval for those payments by the DWO took zero to fifty 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"> • Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5 	0	<p>From the annual budget performance report FY 2016/17, page 99, it's evident that the department made a late submission of the annual performance report for the FY 2016/17. i.e. submitted on 11/08/2017</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"> 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 5 If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0 	3	<ul style="list-style-type: none"> The sector had three (3) queries for the Financial Year 2016/2017 evidenced with the Internal Audit Management letters (dated the 21st April 2017 and the Internal Audit reports 5th August 2016, 30th October 2016, 20th January 2017, 28th April 2017 and 4th August 2017) on lacking accountabilities for monies advanced to staff in the department, The DWO was queried for funds advanced to carry out an activity with three staff to carry out inspection and supervision on the Gravity Flow Schemes. The CAO's, responses f to the Internal Audit report dated the 14th August 2017 provides prove that the sector provided the status on the Internal Audit findings
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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"> Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3 	3	<p>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 03/05/2017, Under MIN.17/05/2017, sector draft budget and work plan FY 2017/18 was presented by the DWO for discussion</p>
		<ul style="list-style-type: none"> Evidence that the water sector committee has presented issues that require approval to Council: score 3 	3	<p>From the committee minutes, it was established that the committee sat and presented issues that required approval to Council for example during a committee meeting that sat on 16/03/2017, the following were some of the issues recommended for approval in council;</p> <ul style="list-style-type: none"> Funds be reallocated to Ngangata GFS. PRDP funds be allocated to water sector Communities should own their GFSs by co-funding. Etc....

11	<p>The LG Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> • The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2 <ul style="list-style-type: none"> • All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2 <ul style="list-style-type: none"> • Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2 	0	<p>There were no displays on the notice boards</p> <p>The visited tap stands on Loch Gravity Flow systems included those in Kikolo village, Jewa village, Gewa East, Guzuzwa village, Mafuti village. The labelling was very poor and personalised (names of individuals) on one of the tap stand e.g at Kikolo village had a label of Nangoli Bosco, wonyera Felix. Three tap stands were not labelled at all.</p> <p>There were no displays on the 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"> • If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1 	1	<p>The communities apply for water sources and pay for them, Examples include: .</p> <ul style="list-style-type: none"> - Malundu village in Lochi Parish applied for a piped water system on 30th November 2017 as per LC 1 stamp. Signed by Nakimolo Bonifance , LC1 Chairperons and Wanasolo Benard Secretary for women. Payment of UGX 50,000/= was made as CCCC. A receipt was issued by Kapchorwa District Local Government with a stamp from DWO dated 14th November 2017. - Rerende village in Boron Parish of Amukol s/c application for a piped water system. Applied for on 15/07/2018 signed by Sabilal Joseph LC1 chairpeosn and Yeko Jamula Secretary for women. This community also paid UGx 50,00/= as evidenced by a receipt issued by Kapchorwa District Local I Government dated 16/10/2018

		<ul style="list-style-type: none"> • Number of water supply facilities with WSCs that are functioning evidenced by collection of O&M funds and carrying out preventive maintenance and minor repairs, for the current FY: score 2 	0	<p>For the visited tap stands on Loch Gravity Flow systems which included Kikolo village, Jewa village, Gewa East, Guzuzwa village, Mafuti village only Kikolo community indicated that they had started collecting money for Operation and Maintenance and had UGX 20,000/= at hand except there was no evidence to prove</p>
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Assessment area: Social and environmental safeguards

13	<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2 	2	<p>Environment and Social Management Plan for Piped water Extension to Upper Ngasire in Munarya in Munarya s/c was in place. It was prepared by the Senior Environment Officer (Otangole O . Silvester) and checked by District Natural Resource Officer (Chemangai Awadi) dated 17th August 2016</p> <p>Environment Screening was done. Environmental and Social Screening Form signed by Senior Environment Officer on 17th /08/2016 was available.</p> <p>Environment and Social Management Plan for Construction of piped water system Kamiro- Kabore in Chema s/c by M/S Kongowo Contractors Ltd was in place. It was prepared by the Senior Environment Officer (Otangole O Silvester) and checked by District Natural Resource Officer (Chemangai Awadi) dated 18th August 2016.</p> <p>Environment Screening was also done as evidenced on Environmental and Social Screening Form signed by Senior Environment Officer on 18th /08/2016.</p>
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		<ul style="list-style-type: none"> • Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1 	0	<p>There were only two water projects during Financial year 2016/17</p> <p>a) Construction of piped water system Kamiro- Kabore in Chema s/c by M/S Kongowo Contractors Ltd</p> <p>b) Piped water Extension to Upper Ngasire in Munarya in Munarya s/c</p> <p>There were no evidence of follow done on the above projects</p>
		<ul style="list-style-type: none"> • Evidence that construction and supervision contracts have clause on environmental protection: score 1 	0	<p>The contracts sampled included:</p> <p>Ref Kapcs 520/WrKs /16-17/0001 and Ref Kapcs 520/Wrks/16-17.</p> <p>The Forms of Agreements /contracts for the above projects did not have any clause on Environment Protection.</p>
14	<p>The LG Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • If at least 50% WSCs are women as per the sector critical requirements: score 3 	3	<p>From the report for Second quarter For software activities prepared by ADWO Mobilisation Yapmusobo Razia dated 22nd January 2018 addressed to CAO a list of WUC committees indicate 30 WUC out of 39 had at least 50%of the members being women.</p> <p>The visited tap stands on Loch Gravity Flow systems had 50% representation of women. These included taps in Kikolo village, Jewa village, Gewa East, Guzuzwa village, Mafuti village.</p>

15	Gender- and special-needs sensitive sanitation facilities in public places/RGCs. Maximum 3 points for this performance measure	• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3	0	No latrines constructed by the districts during financial year 2017/18 and even 2016/17
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