



LGPA 2017/18

Accountability Requirements

Kisoro District

(Vote Code: 526)

Assessment	Compliant	%
Yes	2	33%
No	4	67%

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>Non-Compliant</p> <p>Justification: Annual Performance contract had not been submitted by the due date of June 30th of the forthcoming year. Receipt indicate that it was submitted on 11/08/2016</p>	No
Assessment area: Supporting Documents for the Budget required as per the PFMA are submitted and available			
<p>LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).</p>	xxxxx	<p>Compliant</p> <p>Justification: Consolidated Procurement Plan 2016/17 was attached to the Budget.</p>	Yes
Assessment area: Reporting: submission of annual and quarterly budget performance reports			
<p>LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)</p>	xxxxx	<p>Non-Compliant</p> <ul style="list-style-type: none"> • Submission of the Annual Performance report was submitted later than July 31st. Refer to the receipt dated August 11th, 2017; SN-0877. 	No
<p>LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)</p>	xxxxxx	<ul style="list-style-type: none"> •The Quarterly report in question was submitted later than July 31 and is dated Q4-01/08/2017. 	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>xxxxxx</p>	<p>From the Ministry of Finance's inventory of LG submissions of responses to audit queries, this assessment established that Kisoro DLG submitted to PS/ST responses to all the 12 audit findings raised in FY 2015/2016 on 25/05/2017 i.e. after the deadline.</p>	<p>No</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer</p>	<p>xxxxxx</p>	<p>From the Auditor General's report for FY 2016/2017, this assessment established that Kisoro District Local Government received an unqualified audit opinion.</p>	<p>Yes</p>



LGPA 2017/18

Crosscutting Performance Measures

Kisoro District

(Vote Code: 526)

Score 60/100 (60%)

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. <hr/> <ul style="list-style-type: none"> • All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2. 	<p>0</p> <hr/> <p>0</p>	<ul style="list-style-type: none"> • Physical/Structural Plan is non-existent. Physical Plan Registration book was not available as well as the minutes of the committee. However, Physical Planning Committee was appointed but is not functional. There is a general laxity in implementing the Physical Planning Act 2010 <hr/> <ul style="list-style-type: none"> • The district has no approved physical plan, therefore any approved plans of investments cannot be consistent with it because it is nonexistent.
2	<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p>	<ul style="list-style-type: none"> • Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2. 	<p>2</p>	<ul style="list-style-type: none"> • From the Budget Conference Report 2016/17 it highlights priorities such as : Construction of Placenta Pit at Buhozi Health Centre III in Busanza Sub-county; Phased Renovation of of Social Centre house in Nyarusiza Sub-county; Construction of a 5 Stance VIP latrine at Chihe Primary School, Construction of 5 stance VIP latrine at Rutaka P/S in Kirundo Sub-county ; Construction of 5 stance VIP latrine at Rukoro P/S in Chahi Sub County; Construction of a 5 stance VIP latrine at Ruko Primary School in Nyarubuye S/C, which are also linked to the AWP fro the current FY.

		<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	<ul style="list-style-type: none"> Sampled Activities in the AWP that include among others: Construction of Mumateke Gravity Flow Scheme in Murora Subcounty. Status; Gatera Gravity Flow Scheme in Nyarubuye Sub county; Construction of Karenganyambi Gravity Flow Scheme worth in Kirondo Sub county; Renovation of Askari Staff House at Nyondo Subcounty; Phased renovation of social centre house in Nyarusiza Subcounty; Construction of Placenta Pit at Buhozi Health Centre III in Busanza Sub-county; Phased Renovation of of Social Centre house in Nyarusiza Sub-county; Construction of a 5 Stance VIP latrine at Chihe Primary School, Construction of 5 stance VIP latrine at Rutaka P/S in Kirundo Sub-county ; Construction of 5 stance VIP latrine at Rukoro P/S in Chahi Sub County; Construction of a 5 stance VIP latrine at Ruko Primary School in Nyarubuye S/C, were verified to have been extracted from the Development plan 2015/2016-2019/2020 under section 7 of the project profiles.
		<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. 	1	<ul style="list-style-type: none"> From the Five Year Development Plan 2015/2016-2019/2020 Section 7 pages 158ff & TPC Minutes when reviewed provide proof that all project profiles were developed and have been discussed and adhere to the formats in the LG planning guidelines.
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	<ul style="list-style-type: none"> No Annual Statistical Abstract with Gender disaggregated data has been compiled to support budget allocation was compiled.

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"> 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	<ul style="list-style-type: none"> A sample of projects implemented & traced from the Engineer's files namely: Construction of Mumateke Gravity Flow Scheme in Murora Subcounty. Status; Gatera Gravity Flow Scheme in Nyarubuye Sub county; Construction of Karenganyambi Gravity Flow Scheme worth in Kirondo Sub county; Renovation of Askari Staff House at Nyondo Subcounty; Phased renovation of social centre house in Nyarusiza Subcounty; Construction of Placenta Pit at Buhozi Health Centre III in Busanza Sub-county; Phased Renovation of of Social Centre house in Nyarusiza Sub-county; Construction of a 5 Stance VIP latrine at Chihe Primary School, Construction of 5 stance VIP latrine at Rutaka P/S in Kirundo Sub-county ; Construction of 5 stance VIP latrine at Rukoro P/S in Chahi Sub County; Construction of a 5 stance VIP latrine at Ruko Primary School in Nyarubuye S/C when compared with the Annual budget performance reports, AWP & Budget were found to be consistent.
		<ul style="list-style-type: none"> 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	<p>Based on the following samples of completed investment projects: KISO 526/WRKS/2016-17/00028 : Construction of Placenta Pit at Buhozi Health Centre III in Busanza Sub-county. Contract Value UGX: 3,825,560 ; KISO 526/WRKS/2016-17/00030: Phased Renovation of of Social Centre house in Nyarusiza Sub-county. Contract Value: UGX: 9,838,840; KISO 526/WRKS/2016-17/00031: Construction of a 5 Stance VIP latrine at Chihe Primary School. Contract Value: UGX 19,800,000. Construction of Mumateke Gravity Flow Scheme (UGX. 79,546,927) in Murora Subcounty; Completion of Gatera Gravity Flow Scheme worth UGX. 84,262,089; in Nyarubuye Sub county; Construction of Karenganyambi Gravity Flow Scheme worth 162,843,903 in Kirondo Sub county; Renovation of Askari Staff House at Nyondo Subcounty worth UGX 9,825,860; Phased renovation of social centre house in Nyarusiza Subcounty valued at UGX. 9.838, 840 were all completed at a rate of 87%.</p>

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 five sampled projects: Construction of Placenta Pit at Buhozi Health Centre III in Busanza Sub-county. Contract Value UGX: 3,825,560 ; Phased Renovation of of Social Centre house in Nyarusiza Sub-county. Contract Value: UGX: 9,838,840; Construction of a 5 Stance VIP latrine at Chihe Primary School. Contract Value: UGX 19,800,000. Construction of Mumateke Gravity Flow Scheme (UGX. 79,546,927) in Murora Subcounty; Completion of Gatera Gravity Flow Scheme worth UGX. 84,262,089; in Nyarubuye Sub county; Construction of Karenganyambi Gravity Flow Scheme worth 162,843,903 in Kirondo Sub county; Renovation of Askari Staff House at Nyondo Subcounty worth UGX 9,825,860; Phased renovation of social centre house in Nyarusiza Subcounty valued at UGX. 9.838, 840 when compared with the Annual budget performance report & Annual financial accounts all indicate being completed within approved budgets.</p>
		<ul style="list-style-type: none"> Evidence that the LG has budgeted and spent at least 80% of O&M budget for infrastructure in the previous FY: score 2 	2	<p>From the following investment projects: Construction of Mumateke Gravity Flow Scheme (UGX. 79,546,927) in Murora Subcounty. Status: Completed.; Completion of Gatera Gravity Flow Scheme worth UGX. 84,262,089; in Nyarubuye Sub county; Construction of Karenganyambi Gravity Flow Scheme worth 162,843,903 in Kirondo Sub county; Renovation of Askari Staff House at Nyondo Subcounty worth UGX 9,825,860. Status: Completed, Phased renovation of social centre house in Nyarusiza Subcounty valued at UGX. 9.838, 840. Status: Completed. This is also complemented by the annual performance report & budget the DLG spent at least 83%.</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	<p>From the personnel files reviewed by this assessment it was established that all Heads of Departments were not appraised during the financial year 2016/2017</p>
		<ul style="list-style-type: none"> • Evidence that the LG has filled all HoDs positions substantively: score 3 	0	<p>Out of 9 Heads of Departments only 3 positions are substantively filled. These are Head of Administration, District Education officer and District community Development Officer.</p> <p>The rest were assigned duties by the Chief Administrative Officer</p>
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"> • Evidence that 100 percent of staff submitted for recruitment have been considered: score 2 	2	<p>From Secretary DSC it was established that 100% of all staff submitted for recruitment were considered as evidenced by</p> <p>The CAO Declaration of vacancies to DSC on 4/10/2016 under ref CR/1564/5 the following vacancies</p> <p>CFO, PHRO, HRO, Inspector of schools, information officer, ADHO, Medical officers, Enrolled midwives, Lab Assistants, Assistant Vet Officers.</p> <p>They were all considered by the DSC in the meeting of 6/12/2016, 5/12/2016, 13th – 17th February 2017 respectively</p>
		<ul style="list-style-type: none"> • Evidence that 100 percent of staff submitted for confirmation have been considered: score 1 	1	<p>From the Secretary District Service Commission this assessment established that all staff submitted by CAO for Confirmation were all considered by DSC in the meeting of 24/10/2016</p>

		<ul style="list-style-type: none"> Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1 	1	<p>From the secretary DSC it was established that 13 Cases of disciplinary were submitted by CAO on 7/6/2017 and 26/5/2017 ref CR/157/2 for action</p> <p>All the submitted disciplinary cases were considered by DSC in a meeting of 4/12/2017</p> <p>CAO acknowledged receipt on action by DSC On 13/12/2017</p>
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"> 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 	3	<p>From the Human Resource Office it was established that all the staff recruited during the financial year 2016/2017 accessed the salary payroll not later than two month after Appointment.</p> <p>The records from IPPS show that the staff who were appointed in the month of February 2017, Assumed duty in the month of march 2017 and accessed payroll in April 2017</p>
		<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	<p>From the Human Resource office this assessment could not establish staff retired during the Financial year 2016/2017 because the retired staff list was not availed for verification</p>
Assessment area: Revenue Mobilization				

9	<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>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	<p>In FY 2016/2017 Kisoro DLG collected local revenue amounting to UGX 292,156,729 while UGX 292,781,699 was collected in FY 2015/2016; implying a reduction of 0.2%.</p>
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	<p>During FY 2016/2017 Kisoro DLG realised local revenue amounting to UGX 292,156,729 against a budget of UGX 468,320,206. This implies that the actual local revenue collected is below the budget by 38%.</p>
11	<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2 • Evidence that the LG is not using more than 20% of OSR on council activities: score 2 	2 0	<p>During FY 2016/2017, Kisoro DLG collected UGX 54,551,154 from Local Service Tax (LST) and remitted a total of UGX 41,432,775 (76%) to Sub-counties(UGX 31,197,300) and Kisoro Municipality (UGX 10,235,475).</p> <p>During FY 2016/2017 Kisoro DLG realised OSR amounting to UGX 292,156,729 of which UGX 60,340,000 (21%) was spent on council allowances.</p>

Assessment area: Procurement and contract management

12

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

Maximum 4 points on this performance measure.

- Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2

0

- Kisoro District LG does not have a substantive senior procurement officer. The Procurement unit is currently headed by a procurement Officer.

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

1

Signed and stamped TEC Minutes dated 16/6/2017 and 3/4/2017 were submitted to Contracts Committee;

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

1

Contracts committee considered recommendations of TEC. Contracts committee decision on a submission report dated 29/11/2016 for Proc Ref: Kisoro 526/wrks/2016/17/00001 for construction of Mumateke gravity flow scheme in murora sub county. Contract awarded to Combine Technical services at UGX: 78,644,227.

Contract committee minutes signed by CC members and dated 16/6/2017 were presented.

<p>13</p>	<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 	<p>2</p>	<p>The LG prepared and submitted a Procurement Plan for FY 2017/18 which was received by PPDA on 23/6/2017</p> <p>The plan covers all infrastructure activities for FY 2017/18 and these are based on approved work plan and budget. Sample infrastructure projects include: routine maintenance of roads, construction and rehabilitation of buildings, construction and rehabilitation of community access roads, construction and rehabilitation of gravity flow scheme, design of gravity flow schemes etc.</p> <p>Kisoro District LG made procurements in 2016/17 which included:</p> <p>KISO 526/WRKS/2016-17/00028 : Construction of Placenta Pit at Buhozi Health Centre III in Busanza Sub-county. Contract Value UGX: 3,825,560</p> <p>KISO 526/WRKS/2016-17/00030: Phased Renovation of of Social Centre house in Nyarusiza Sub-county. Contract Value: UGX: 9,838,840;</p> <p>KISO 526/WRKS/2016-17/00031: Construction of a 5 Stance VIP latrine at Chihe Primary School. Contract Value: UGX 19,800,000.</p>
<p>14</p>	<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 	<p>2</p>	<p>The DLG prepared and submitted bid documents for investments and infrastructure by August 30th, 2017.</p> <p>Sample bid documents prepared in June 2017 include:</p> <p>KISO526/WRKS/2017-18/00003: Construction of 5 stance VIP latrine at Rutaka P/S in Kirundo Sub-county</p> <p>KISO526/WRKS/ 2017-18/00004: Construction of 5 stance VIP latrine at Rukoro P/S in Chahi Sub County;</p> <p>KISO526/WRKS/2017-18/00007: Construction of a 5 stance VIP latrine at Ruko Primary School in Nyarubuye S/C.</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 	2	<p>The LG has prepared an updated contract register for 2016/17. Sample procurement files include:</p> <p>KISO526/WRKS/16-17/000021: Construction of 20 cubic metres ferrocement tank in Kanyenka Village, Muramba Subcounty</p> <p>KISO526/WRKS/16-17/00001: Construction of Mumateke Gravity Flow Scheme in Murora Sub County; and</p> <p>KISO526/WRKS/2016-17/00029 : Installation of Electricity in Chibumba Health Centre II in Murora Sub-county</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 thresholds in FY 2016/17. Sampled projects that followed established thresholds (open selective bidding) and appeared in the Red Pepper dated October 14, 2016 include:</p> <ul style="list-style-type: none"> Construction of Mumateke Gravity Flow Scheme (UGX. 79,546,927) in Murora Subcounty. Status: Completed. Completion of Gatera Gravity Flow Scheme worth UGX. 84,262,089; in Nyarubuye Sub county; Construction of Karenganyambi Gravity Flow Scheme worth 162,843,903 in Kirondo Sub county; <p>Selective Bidding:</p> <ul style="list-style-type: none"> Renovation of Askari Staff House at Nyondo Subcounty worth UGX 9,825,860. Status: Completed, Phased renovation of social centre house in Nyarusiza Subcounty valued at UGX. 9.838, 840. Status: Completed.

15	<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2 	2	<p>The LG prepared interim and completion certificate for selected works/projects.</p> <p>Completed projects in FY 2016/2017 include:</p> <p>Interim payment certificate No: 1 dated 04/01/2017: for Renovation of Kisoro District Administration Block.</p> <p>Interim Payment Certificate No 1 for Construction of 2 Stance VIP latrine at Kisoro DLG.</p> <p>Practical Completion Certificate No: CR/752 dated 04/01/2017: Renovation of Kisoro District Administration Block</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>On-going projects (2017/18) are labelled with the name of the project, name of contractor, source of funding and expected duration but the contract value is missing.</p> <p>Sample Projects with Site Boards but no Contract Value include:</p> <p>Rehabilitation of Nyakabande-Bunagana-Rurembwe-Park TC and Nyakabengo-Gatete Roads</p> <p>Rehabilitation of Chibumba-Biizi-Kikakanga RD (17KM): Community Agricultural Infrastructural Improvement Programme Project 3 (CAIIP-3)</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	<p>Monthly Bank reconciliation for the Treasury Single Account reviewed by this assessment were prepared and up to date as of 31 December 2017.</p>
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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	<p>During FY 2016/2017 Kisoro District Local Government did not maintain a payment claims register. As such, the timeliness of payments to suppliers could not be readily ascertained by this assessment.</p>
18	<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</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	<p>During FY 2016/2017, the Principal Internal Auditor produced all the four quarterly internal audit reports. Kisoro DLG has substantive head of Internal Audit appointed on 10/10/2005 based on the appointment letter cited by this assessment.</p>
	<p>Maximum 6 points on this performance measure.</p>	<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. 	0	<p>By the time of this assessment, the Kisoro DLG Administration had not yet provided information to Council and LG PAC on the status of implementation of internal audit recommendations raised during FY 2016/2017.</p>
		<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	<p>This assessment confirmed that internal audit reports for FY 2016/2017 were submitted to the LG PAC. In addition, extracts of LG PAC minutes in respect of meetings where internal audit reports were discussed were obtained and verified by this assessment.</p>
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	<p>The assets register was in place and in the format prescribed by LG Accounting Manual. However, by the time of the assessment, one motor vehicle (cost UGX 173,374,993) registration number LG0016-055 acquired in FY 2016/2017 had not yet been recorded in the register. As such, the register was not up to date.</p>

20	<p>The LG has obtained an unqualified or qualified Audit opinion</p> <p>Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY: • unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0</p>	4	<p>From the Auditor General's report for FY 2016/2017, this assessment established that Kisoro District Local Government received an unqualified audit opinion.</p>
Assessment area: Governance, oversight, transparency and accountability				
21	<p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p>	<p>Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2</p>	2	<ul style="list-style-type: none"> • Council sat 5/8/2016, 27/10/2016, 22/12/2016/ 28/02/2017, 30/3/2017 and 29/5/2017 and discussed among others review and approval of committees (PAC, DSC and Land Committees), BFPs, Reports, Laying of budget, revenue enhancement plans, capacity building plans and procurement plans among others.
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. 	2	<ul style="list-style-type: none"> • Planner is the designated person for coordination of responses to feed-back based on the budget website.
23	<p>The LG shares information with citizens (Transparency)</p>	<p>Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2</p>	2	<ul style="list-style-type: none"> • The pay roll was very well displayed and accessible to the public on the main Notice Board.
	<p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> • Evidence that the procurement plan and awarded contracts and amounts are published: score 1 	0	<ul style="list-style-type: none"> • Procurement plan not displayed though some recently awarded contracts were visible at the time of the LG PA exercise.

		<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> No LG performance assessment was carried out in the FY under review.
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"> Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1 	1	<ul style="list-style-type: none"> An unreferenced flimsy file in the Town Clerks office was availed & reviewed it was confirmed that communications explaining guidelines, circulars especially Budget call papers, policies from MoLG were issued to LLG in the previous year. For example during budget conference of 6/10/2016 involving all LLGs, CAO presented and communicated budget call circular 2017/18 to LLG officials as per attendance attached to report.
		<ul style="list-style-type: none"> 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. 	1	<ul style="list-style-type: none"> Voucher number 21/02 dated 21.12.16 being payment for radio talk shows in the amount of two million eight hundred twenty thousand was availed as proof that that the activity took place. The exercise was coordinated by the Office of the RDC.

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"> Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2. 	2	<p>According to DLG quarterly work plan for 2016/17 , the GFP built capacity of district leaders and technical officers on gender responsive programming in June 2017.</p> <p>The GFP disseminated Gender Policy and Strategy to sector departments in June 2017.</p>
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• 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.

2

• The GFP prepared a work plan for FY 2017/18: Planned activities include continued capacity Building for district leaders and technical staff; Dissemination of gender materials; monitoring of gender mainstreaming in all departments. etc.:

GFP person provided evidence to justify that 90% of the previous year budget was implemented.

Expenditure of 500,000 which was allocated to dissemination of gender policy and strategy. GFP provided Voucher no: PV-SO5695 dated 6/14/2017.

Expenditure on building the capacity of district leaders and technical officers in other sectors on gender responsive programming at UGX: 1,302,000;

Purchase of sheep and goats for domestic development of Batwa Groups at UGX. 5,602,400. Voucher dated 23/6/2017.

Total Recurrent expenditure for FY 2016/17 was 6,348,000. GFP provided expenditure receipts of UGX 6,102,400 dated 23/6/2017. Percentage Spending: 96%

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>Screening for compliance to environmental compliance was conducted for selected projects e.g. primary and secondary schools Kisoro Baptist; Modern Times Secondary School; Kisoro Quality PS; St. Lawrence Natete Primary School among others; and 3 CAAIP Projects among others.</p> <p>Certificates of approval of environmental impact assessments for selected projects were presented. These include:</p> <p>Certificate of approval of EIA for Proposed Commercial Complex on plot 79 Kabale Kisoro Road, North Ward Parish, Kisoro Town Council, Kisoro District dated April 4, 2016. Certificate NO: NEMA/EIA/8384.</p> <p>Certificate of Approval of EIA No. NEMA/EIA... for a proposed Fuel Filling Station located Nyaruhengeni Village, South Ward, Kisoro Town Council, Kisoro District dated 6th January 2016.</p>
		<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>Bid documents e.g. BOQs do not have input from the District Environmental officer.</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>The LG did not present a land title or agreement to suggest that government projects have been implemented on land where DLG has proof of land ownership.</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	<p>The District Environmental Officer did not present completed and signed Environmental and Social Mitigation Certification forms for completed projects during this assessment.</p>



LGPA 2017/18

Educational Performance Measures

Kisoro District

(Vote Code: 526)

Score 51/100 (51%)

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>The performance contract shows budget for 1620 teachers as per approved Structure</p> <p>Wage bill provision FY 2017/18 is for 1620 teachers sufficient to meet the minimum threshold of one head teacher and one teacher per class</p> <p>Performance contract for the DLG and Staff lists shows shortfall of 200 teachers and therefore does not meet the threshold as required in the measure.</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>The performance contract shows wage bill for 1620 according to approved Structure and Annual performance report for the period shows current staffing of 1420 therefore a shortfall of 200 teachers depicting an 87.6% filled up positions</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>All inspectors in the department recruited and in place according to the DLG approved structure and staff list availed to the team</p>

4	The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.	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	2	Recruitment Plan for FY 2017/18 as part of Performance contract seen and has provisions for the recruitment of 243 teachers
	Maximum 4 for this performance measure	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	2	All two inspectors in place as per approved staff structure and also according to staff list reviewed
5	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.	Evidence that the LG Education department appraised school inspectors during the previous FY • 100% school inspectors: score 3	0	From the personnel files it was established that the inspector was not appraised during the Financial year 2016/2017 because he was recruited on 13/1/2017 and had not completed one year to be eligible for assessment. The personal file for the principal inspector of schools was not availed for verification.
	Maximum 6 for this performance measure	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	0	From the Human Resource office 12 personnel files for Head teachers were sampled from 135 primary schools. Out of 12 head teachers sampled only 2 were appraised during the financial year 2016/2017
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 	0	<ul style="list-style-type: none"> Circulars to schools from MoES got and seen Circulars seen on Teacher support supervision at school levels(sampled schools) No evidence shown at DEOs office on communication of circulars and guidelines to schools in the absence of minutes of meeting between Head teachers and DEO
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 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 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. 	8	<ul style="list-style-type: none"> Reviewed inspection reports show that public schools were inspected and only two private schools inspected in 2016/17 In FY 2016/17 only the following number of schools were inspected: QTR 1: 120 QTR 2: 89 QTR 3: 128 QTR 4: 115 Thus averaging 113 schools inspected per term representing a 83.7% schools inspected per term. Inspectors note that no financial releases are made for inspection of private schools.

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	<ul style="list-style-type: none"> Minutes of staff meeting of the Department dated 04/1016 shows discussions of issues of inspections under MIN 3/Educ/2016, Minutes of 1/7/2016 min 2/EDUC/2016/016 shows discussion of teacher enrolment and management
		<ul style="list-style-type: none"> Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2 	2	<ul style="list-style-type: none"> DES Acknowledgment Form 4 Note seen for inspection reports for FY 2016/2017 dated 15/09/2017 Four Quarterly inspection reports for FY 2016/17 seen
		<ul style="list-style-type: none"> Evidence that the inspection recommendations are followed-up: score 4 	0	<ul style="list-style-type: none"> Sampled four schools and found three schools have no inspection recommendations made and followed up. One school head teacher not available and minutes not accessed
9	<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> List of schools which are consistent with both EMIS reports and OBT: score 5 	5	<ul style="list-style-type: none"> EMIS forms shows that total schools are 135 public schools List of schools from DEO shows 135 public Schools
		<p>Evidence that the LG has submitted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and OBT: score 5</p>	0	<ul style="list-style-type: none"> List of schools and enrolment shows total of UPE is 70,938(33,643 males and 37,295 females) pupils as provided by DEO Performance contract indicates total enrolment as 73,997 for UPE EMIS data shows 69,767 enrolled in UPE
Assessment area: Governance, oversight, transparency and accountability				

10	<p>The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc...during the previous FY: score 2 	2	<ul style="list-style-type: none"> Minutes availed from the Social Services Standing Committee and dated 27/02/2017; 10/03/2017; 12/04/2017; 04/05/2017 show that the Education Sector committee met to discuss service delivery issues that included the sector budget; implementation plans, supervision reports; PLE performance results. Although the reports are presented, minutes don't indicate discussions of critical service delivery issues and follow up of action points in supervision reports.
		<ul style="list-style-type: none"> Evidence that the education sector committee has presented issues that requires approval to Council: score 2 	2	<ul style="list-style-type: none"> Minutes availed dated 27/02/2017; 10/03/2017; 12/04/2017; 04/05/2017 show presented issues and recommendations that required approval from Council to the effect.
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>	0	<ul style="list-style-type: none"> No evidence or file of SMC reports on file or even minutes in Education department. Informed that the files and minutes are with Head teacher of Chihe Primary School 108 schools have SMCs according to list of schools that signed for appointment letters for their respective SMCs in 2016 but no evidence to show functionality in terms of discussions etc as required in the manual.
12	<p>The LG has publicised all schools receiving non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3 	3	<ul style="list-style-type: none"> UPE IPF for all schools for QTR 1 2017/2018 seen on notice boards displayed

Assessment area: Procurement and contract management

13	<p>The LG Education department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30: score 4 	0	<ul style="list-style-type: none"> Procurement plan dated 19/05/17 and submitted to the PDU and items consolidated in DLG procurement plan dated 21/06/17 on pages 4 and 5 Also evidence of procurement plan seen in Performance contract pages 50 and 51 However submitted after April 30th
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>During FY 2016/2016, the Education Department certified suppliers' payment requests within two weeks on average, and payments were done within 30 days period as per contract agreements.</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 	4	<p>Cumulative Quarterly performance reports provided as follows: Q1- 14/10/2016; Q2-16/01/2017; Q3- 10/04/2017; Q4- 12/07/2017 which is within the set timeline.</p>
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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 	0	<p>By the time of this assessment, the Education Department had not yet provided information on the status of implementation of three internal audit recommendations raised during FY 2016/2017.</p>
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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 	0	<ul style="list-style-type: none"> • Circulars to schools seen on issues of violence, registration and management safety, but no circulars seen on gender, feeding •no evidence of collaboration or consultation in the absence of minutes or correspondence among the two departments
		<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 	0	<ul style="list-style-type: none"> • No minutes availed of meetings between DEO and Head teachers
		<ul style="list-style-type: none"> • Evidence that the School Management Committee meet the guideline on gender composition: score 1 	1	<ul style="list-style-type: none"> • Sampled schools(Matinza, Gikoro, Mutolere, Chuho P/S) guidelines on gender composition of SMCs followed as Schedule 2 of the Education Act 2008 states that at least two members being female of the foundation body representatives

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: 	0	<ul style="list-style-type: none"> • No minutes availed of meetings between DEO and teachers • Sampled schools of Nsabimana, Nshimiyimana, Matinza and Mutolere Primary schools no evidence of environment management guidelines shared or disseminated • No circulars seen disseminated or passed on to schools from DEO
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LGPA 2017/18

Health Performance Measures

Kisoro District

(Vote Code: 526)

Score 47/100 (47%)

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	<p>Current staff structure is 605/735 (82%). The current allocated funds of 4.956.000.000 UGX are consumed by the current staff, and thus there was no approved funds for recruiting additional staff even when the district lacks critical staff such as a pharmacist, dispensers, dental surgeons and nutritionist</p>
2	<p>The LG Health department has submitted a comprehensive recruitment plan to the HRM department</p> <p>Maximum 4 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers: score 4</p>	4	<p>There is evidence that the DHO submitted a recruitment plan/request to HRM. The recruitment plan was submitted on 12th March 2017 for recruitment of 95 staff although, vacant posts were not budgeted for this FY since there are no funds allocated in the wage bill provision.</p>
3	<p>The LG Health department has ensured that performance appraisal for health facility in charge is conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the health facility in-charge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0</p>	0	<p>From the personnel files this assessment established that the in charge for Chahafi HCIV, Rubuguri HCIV, Busanza HCIV and Kisoro District hospital were not appraised during financial year 2016/2017</p>

4	<p>The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4 	4	<p>The HCW as indicated in the staff lists are deployed in the health facilities. The HCW fill daily attendances which are consolidated at the end of the month and entered into HRIS. A review of both rural and urban Health facilities in HRIS indicated that staff are deployed based on need and patient load at different facilities. For example, Kisoro Hospital has 5 senior clinical officers against 1 in the establishment. Junior clinical officers and nursing officers are deployed to lower health facilities. Rubuguri HCIII which is the farthest was adequately filled. The district also ensures that deployments remain within budget. The HRIS contained the staff list deployed and hard copies of attendances were available for review.</p>
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Assessment area: Monitoring and Supervision

5	<p>The DHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3 	3	<ul style="list-style-type: none"> At the district, circulars of FY16/17 from MoH were not available or archived as hard copies, however, the DHO indicated communication is usually summarized and sent by mTrac due to budget constraints. A review of the mTrac system, indicated that several communications are shared with all in-charges. E.g. There was a communication on recall of a specific batch of Albendazole from all HF due to quality issues. At the facility, e.g. Kisoro Hospital there was evidence of having received guidelines on utilization of HSD PHC non wage grants from the MoH (dated 28th October 2016 and received 11th November 2016). Medical Superintendent also indicated having received messages from the mTRAC system
		<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"> There was no evidence of meeting minutes held to disseminate any guidelines to HF in-charges. Due to budget constraints, the DHO resorted to communication using mTrac and emails. The Uganda clinical guidelines available was distributed by the National Medical stores in the current FY.

6	<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3</p>	0	<p>There is evidence that the DHT didn't supervise all the HCIV and district hospital in the last FY 16/17. In Q1 the hospital was supervised and only 2/3 HCIV were supervised. In Q2 and Q3 Hospital was not supervised and only 2/3 HCIV were supervised. Q4 no supervision was done as funds were reallocated to Ebola prevention alerts</p>
		<p>Evidence that DHT has supervised lower level health facilities within the previous FY: • If 100% supervised: score 3 points • 80 - 99% of the health facilities: score 2 • 60 - 79% of the health facilities: score 1 • Less than 60% of the health facilities: score 0</p>	0	<p>From the supervision reports, there is evidence that the DHT supervises lower Health facilities, however, less than 60% of the HF were supervised. In Q1 only 16 out of 35 lower government health facilities were supervised whereas in Q2 only 8 out of 35 lower HF were supervised. Low supervisions were attributed to inadequate allocation of funds</p>
7	<p>The Health Sub-district(s) have effectively provided support supervision to lower level health units</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that health facilities have been supervised by HSD and reports produced: • If 100% supervised score 6 points • 80 - 99% of the health facilities: score 4 • 60 - 79% of the health facilities: score 2 • Less than 60% of the health facilities: score 0</p>	0	<p>Kisoro has 3 HSD (South, West and East), however, there was no evidence of HSD supervision reports available at the district for any of the 3 HSD. At the Kisoro Hospital (HSD south), it was confirmed that they have not received funds to carry out HSD support supervision for the last 2 Financial years.</p>

8	<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<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	<p>At the district LG, there was no evidence that reports were discussed and used to make recommendations for corrective actions during the previous FY.</p>
		<ul style="list-style-type: none"> • Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6 	0	<p>The DHT minutes lacks column for responsible person to follow up and subsequent meetings don't start with review of previous minutes and feedback on actions undertaken</p>
9	<p>The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> o List of health facilities which are consistent with both HMIS reports and OBT: score 10 	10	<p>The LG submits HMIS reports for 42 health facilities, this includes 1 PNFP hospital, 2 PNFP HCIII, 1 PNFP HCII and 3 PFP clinics. It is a requirement that all these facilities report HMIS data to the MoH. In PBS there are 39 facilities receiving PHC funds, excluding the PFP clinics. Reporting rate was at 100% for all the 42 reports in the last quarter as generated by the district biostatistician.</p>

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	<ul style="list-style-type: none"> • Reviewed Council minutes dated 27/02/2017; 10/03/2017; 12/04/2017; 04/05/2017 from the Social Services standing Committee which houses the health sector committee show discussions of the health sector implementation plans/work plans, monitoring reports, supervision reports and sector budget.
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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	<ul style="list-style-type: none"> Based on the Council minutes dated 27/02/2017; 10/03/2017; 12/04/2017; 04/05/2017 and the health Sector standing committee recommendations there is proof of presentation of issues ranging from implementation plans/work plans, monitoring reports, supervision reports and sector budget. that required approval from Council.
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 	0	<ul style="list-style-type: none"> Current HUMCs/Boards have been in existent for the past 3 years. The district has just completed appointment of 13 chairpersons for HUMC for various Health facilities. Current HUMCs are functional however, at the hospital and 4 Health facilities visited they did not hold all the 4 mandatory quarterly meetings. Q1 meetings were not held at the hospital due to delay in release of funds. At Nyakabande HCII, funds for HUMC meeting were used to weld broken doors. Minutes were available for only ¾ quarters
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	<p>There was no evidence of publicizing HF receiving PHC non-wage recurrent grants on the notice boards. It was indicated that notices are usually removed after a month. However, this could not be ascertained.</p>

Assessment area: Procurement and contract management

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"> • Annual & Quarterly performance report was submitted to the Planning Unit for Consolidation on 27/07/2017 which is later than the set timeline.
17	<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0</p>	0	<p>By the time of this assessment, the Health Department had not yet provided information on the status of implementation of three internal audit recommendations raised during FY 2016/2017.</p>
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	<p>All the facilities visited meet the gender composition of at least one third females. All the 5 facilities visited had at least one third of the HUMC members to be female. At Nyabihuniko HCIII 4/10, Kisoro Hospital 4/7, Nyakinama HCIII 3/6, Chahafi HCIV 4/7, and Nyakabande HCII 2/6</p>

		<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	<p>There was no evidence that the LG has issued guidelines on management of sanitation in Health facilities. However, a visit to the facilities, the facility staff available indicated that Partner RHITES-SW has trained HCWs on sanitation though no records were available for this training. They indicated having received job aids but these were also not displayed anywhere in the at Nyakinama HCIII. At Nyakabande HCII, they had not received training in the last FY</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"> • Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal : score 2 points. 	2	<p>Through the support of USAID RHITES-EC, health facilities have received guidelines on medical waste management. The facility staff in Kisoro Hospital indicated having received a training, coloured bin liners from RHITES-SW. In addition, Green label a USAID contracted company, collects medical wastes every week. At Nyakinama HCIII, Nyakande HCII, Chahafi HCIV and Nyabihuniko HCIII the staff indicated mentorships, posters from RHITES-SW were displayed while coloured bins and bin liners were available for waste segregation.</p>



LGPA 2017/18

Water & Environment Performance Measures

Kisoro District

(Vote Code: 526)

Score 82/100 (82%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: score 10 	10	<ul style="list-style-type: none"> Summary of the safe water coverage showing the average safe water coverage of the district (43%) and each of the sub county was presented. 5 Sub-counties were found to be below the average safe water coverage and these included nyakinama, chahi, bukumbiri, Muramba and Nyarusiza.. 4 sub-counties below the district safe water coverage were targeted in the AWP 2017/2018 which includes bukimbiri, chahi, muramba and Nyarusiza sub-counties.
2	<p>The LG Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15 	15	<ul style="list-style-type: none"> From the budget for financial year 2016/2017 and the annual progress reports on quarterly basis submitted to the line ministry, it was established that 3 water facilities of rain water harvesting tanks were implemented in the sub counties of safe water coverage below the district average as planned for in the budget. These included 2 in muramba and 1 in nyarusiza
Assessment area: Monitoring and Supervision				

3	<p>The LG Water department carries out monthly monitoring and supervision of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the LG Water department has monitored each of WSS facilities at least annually. • If more than 95% of the WSS facilities monitored: score 15 • 80 - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60 - 69% monitored: score 5 • 50 - 59%: score 3 • Less than 50% of WSS facilities monitored -score 0</p>	15	<ul style="list-style-type: none"> - From the annual progress reports, 17 projects were implemented (8 springs and 5 RWHT and 4 piped supply systems) - 12 monthly progress supervision and monitoring reports on 17 projects were compiled by the Assistant engineering officer and presented to DWO for the 17 projects implemented.
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: <ul style="list-style-type: none"> o List of water facility which are consistent in both sector MIS reports and OBT: score 10 	10	<ul style="list-style-type: none"> • The reports of MIS obtained from MoWE, the performance contracts and the OBT attached to AWP 2017/2018 submitted on 23/6/2017 Shows the same list of projects that are consistent and in the MIS reports and performance contracts established from the MoWE and at the district These included construction of 8 springs, 8 piped water and rehabilitation of 2 GFS

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	<ul style="list-style-type: none"> • From the submission report to PDU by DWO, it was established that all the investment items in the annual work plan were submitted to PDU for procurement on 27/4/2017 for the financial year 2017/2018
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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	<ul style="list-style-type: none"> - From the 5 projects sampled (3water tanks, 2 srpings, and 2 GFFS, It was established that - Appointment letters for the implemented project for rain water tanks and springs available and signed by the district engineer - No site meeting minutes and reports for WWS infrastructure - No copy of the site visitors book and site instructions book - No contract management plan
		<ul style="list-style-type: none"> • If water and sanitation facilities constructed as per design(s): score 2 	2	<ul style="list-style-type: none"> - From the site visits, BOQs and designs and drawings presented by DWO, for facilities of water tanks and springs, it was established that the facilities were constructed as per designs.
		<ul style="list-style-type: none"> • If contractor handed over all completed WSS facilities: score 2 	0	<ul style="list-style-type: none"> - No handover reports by the contractor seen
		<ul style="list-style-type: none"> • If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2 	2	<ul style="list-style-type: none"> - From the contract management file, it was established that all the projects implemented were certified by DWO for payment and completion reports attached.
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 	0	<ul style="list-style-type: none"> - From the contract management file, it was established that the DWO together with DE certified and recommended works for payment however it was established that recommendations for payment of 5 projects out 11 sampled were delayed for more than a week.
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 	5	<p>The performance report from the planning unit which was submitted by the department for financial year 2016/2017 dated 08/07/2017 was availed & reviewed and it was established all quarterly progress reports were submitted to the planner by target milestone of mid-july 2017 the 1st, 2nd, 3rd and 4th progress reports were submitted to the planner on 3/11/2016, 10/2/2017, 19/5/2017 and 28/6/07 respectively.</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 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 	5	<p>During FY 2016/2017 the water department was not audited by the District Internal Audit Department. As such, the water department did not have any audit query.</p>

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>Based on the Council minutes of the Standing Committee dated 27/02/2017; 10/03/2017; 12/04/2017 & 04/05/2017 as well as copies of the reports from DWO submitted to sectoral committee, 4 quarterly reports and minutes of DWSCC meetings for the previous financial year available on file including supervision reports, performance assessment results, the committee responsible for water met and discussed service delivery issues related to the water sector.</p>
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		<ul style="list-style-type: none"> Evidence that the water sector committee has presented issues that require approval to Council: score 3 	3	<ul style="list-style-type: none"> From the Clerk to Council report & the Standing Committee minutes availed dated 27/02/2017; 10/03/2017; 12/04/2017 & 04/05/2017 alongside recommendations the committee presented to council issues ranging from budget, workplans, implementation reports, supervisory reports for approval to Council were presented.
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 	2	<ul style="list-style-type: none"> From the district notice board, it was established that they were displays of releases, procurements plans
		<ul style="list-style-type: none"> All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2 	0	<ul style="list-style-type: none"> from the site visits, it was established that All rain water tanks and springs not labelled Only GFS schemes labelled.
		<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 	2	<ul style="list-style-type: none"> from the district Notice board it was established that tender invitations, notice of the best evaluated bidder, amount of the contract were displayed
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 	0	<ul style="list-style-type: none"> An application file for the communities was established and application forms requesting for water facilities written by communities and stamped by LCI and sub-county chief were filed. No receipts or file showing community contributions seen for the financial year 2017-2018

		<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	<ul style="list-style-type: none"> • No evidence of receipts or inventory for the collected funds to show collections and utilisation of funds collected for O7M. • No minutes or reports for the community meetings
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"> • 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 	0	<ul style="list-style-type: none"> - Only the GFS design report has a component of environmental impact assessment report - All other projects don't have environmental reports
	Maximum 4 points for this performance measure	<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	<ul style="list-style-type: none"> • No evidence of any environmental concerns presented
		<ul style="list-style-type: none"> • Evidence that construction and supervision contracts have clause on environmental protection: score 1 	1	<ul style="list-style-type: none"> • It was established from the contract management file that the BOQs had a drainage channel and planting of grass in the spring protection and soak pits for rain water tanks
14	The LG Water department has promoted gender equity in WSC composition. Maximum 3 points for this performance measure	<ul style="list-style-type: none"> • If at least 50% WSCs are women as per the sector critical requirements: score 3 	3	<ul style="list-style-type: none"> • From the software report attached to the submitted 2nd quarter progress report of 2016/2017 it was established that women are 75% of the composition of water and sanitation committees

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