



## LGPA 2017/18

Accountability Requirements

Lyantonde District

(Vote Code: 580)

Assessment	Compliant	%
Yes	3	50%
No	3	50%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Assessment area: Annual performance contract			
LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.	xxx	Annual Performance Contract FY submitted on 13/7/2017 which is later than the timeline date for submission.	No
Assessment area: Supporting Documents for the Budget required as per the PFMA are submitted and available			
LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).	xxxxxx	From the Budget website, Budget was accompanied by a Consolidated Procurement Plan.	Yes
Assessment area: Reporting: submission of annual and quarterly budget performance reports			
LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)	xxxxxx	Q4-Annual Performance report under serial number 0868 submitted 01/08/2017 which is later than the set timeline of July 31st.	No
LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)	xxxxxxx	Q1 under receipt Number 0136 and submitted on 30/11/2016 ; Q2 report submitted on 09/02/2017 under serial number 0305; Q3 report under receipt serial number 0759 submitted on 24/05/2017; Q4 submitted on 01/08/2017 under serial number 0868 which is later than the set timeline	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>	<p>From the Ministry of Finance's inventory of LG submissions of responses to audit queries, this assessment established that Lyantonde District Local Government submitted to PS/ST responses to audit queries raised in FY 2015/2016 on 12/04/2017.</p>	<p>Yes</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer</p>	<p>XXXXX</p>	<p>From the Auditor General's report for FY 2016/2017, this assessment established that Lyantonde District Local Government received an unqualified audit opinion.</p>	<p>Yes</p>



## **LGPA 2017/18**

Crosscutting Performance Measures

Lyantonde District

(Vote Code: 580)

Score 55/100 (55%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>All new infrastructure projects in: (i) a municipality; and (ii) all Town Councils in a District are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a municipality/district has:</p> <ul style="list-style-type: none"> <li>• A functional Physical Planning Committee in place that considers new investments on time: score 2.</li> </ul> <hr/> <ul style="list-style-type: none"> <li>• All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2.</li> </ul>	<p>2</p> <hr/> <p>0</p>	<p>DLG has a functional Physical Planning Committee in place. Appointment letter captured dated January 27th, 2014. Minutes available on file referenced CR/214/15 with the last meeting held on January 30th, 2018.</p> <hr/> <p>No Physical Plan/ Structural plan in place as well as the Registration book.</p>
2	<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p>	<ul style="list-style-type: none"> <li>• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.</li> </ul>	<p>2</p>	<p>From the AWP dated 05/10/2017 the following sampled priorities: (i) Carrying out of OPD Block; Construction of Pit Latrines 5 Stances for staff at the Hospital; Procurement of two Auto Claves; Procurement &amp; Fitting of Scan Probe; Rehabilitation &amp; Expansion of Hospital Administration Block; Rehabilitation &amp; Expansion of Hospital theatre in the Health Department (ii) Procurement of Vehicle; Procurement of Desks for Buyanja P/S; Construction of 3 Stance Pit Latrine Kaliro P/S; in the Education Department (iii) Routine Maintenance of 315KM of District roads; Periodic Maintenance of Kyemamba-Kabingo road 8KM; Rehabilitation of 9.7KM of Kinuka-Bwamiramira- Kankubebe road the mentioned priorities are also reflected in the Budget conference report dated 08/11/2016 that was held at SALAMA SHIELD CONFERENCE CENTRE which is proof of linkage.</p>

		<ul style="list-style-type: none"> <li>Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If different, justification has to be provided and evidence that it was approved by Council. Score 2.</li> </ul>	2	<p>From the AWP dated 05/10/2017, the following Capital investments; (i) Supply of HDPE tanks 24 Cu. M with connecting accessories; (ii) Construction of 12 FCT's 10 Cu. M; (iv) Site Planning for District HQs; (iii) Construction of OPD block at Lyantonde Hospital; (v) Construction of 5 Stance Pit Latrine at Lyantonde Hospital; (vi) Construction of Staff Quarters at Lyantonde Hospital; (vii) Procurement of Computer Desktop for Administration Department; (viii) Procurement of Furniture for Lyantonde District Service Commission are linked with the DDP FY 2015/16-2019/20 dated April 2015 duly signed by the CAO Mr. Okumu Christopher &amp; LCV Chairman Mr Muhangi Fred.</p>
		<ul style="list-style-type: none"> <li>Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1.</li> </ul>	1	<p>Project profiles have been developed and can be traced in the approved 5 Year Development Plan aligned to the NDP II, for the period 2015/16-2019/2020 pages 244ff and it is per LG Planning guideline version April 2014.</p>
3	<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> <li>Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum 1 point.</li> </ul>	1	<p>A copy of the Annual Statistical Abstract dated June 2017 and signed off by the Chairman LCV Mr. Muhangi Fred &amp; CAO- Mr. Iga Martin Paul was availed for assessment &amp; was presented to the TPC for budget allocation and decision-making under TPC Minute 54/06/2015/16-Presentation of the new IPFs projects &amp; Statistical Abstract for FY 2016/17.</p>

4

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 sampled implemented projects in the Annual Budget Performance report & Annual Accounts: (i) Construction of two valley tanks at Lwakajura at Katovu Luwama; (ii) Rehabilitation of the Marteniy Ward at Lyantonde Hospital; (iii) Construction of VIP Latrine at Lyantonde District HQs; (iii) Construction of Classroom blocks at Nakisajja & Kitazigolokwa Primary Schools; (iv) Construction of the Council ceiling at Lyantonde District Hqs; (v) Construction of the Kroiler Chicken house at Kilwooza Parish, Public Water Stand taps; 3 stance VIP latrine at Kitazigolokwa P/S; (vi) Completion of one classroom at Kyabakuza and Kasambya P/S; (vii) Drilling of three boreholes at Lyakajura (Kyemamba), Kabayanda, and Kyempisi; (viii) Construction of a general Ward with Maternity and a 3 stance VIP latrine at Kaliro Health Centre; (ix) Supply of HDPE Water Tanks of 24000 (2No.) & 10,000 (2No.) can be traced in the AWP pages 28, 37, 38 and linked to the budget with minor scope adjustments.

• 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

0

From the annual Budget Performance report the following sampled investment projects were executed in the previous FY: (i) Construction of two valley tanks at Lyakajura at Katovu Luwama at a contract sum of Ugx: 117,569,300/= (ii) Rehabilitation of the Marteniy Ward at Lyantonde Hospital; (iii) Construction of VIP Latrine at Lyantonde District HQs with a budget of 22,000,000/= and a contract price of Ugx: 21,947,528/= (iii) Construction of Classroom blocks at Nakisajja & Kitazigolokwa Primary Schools; (iv) Construction of the Council ceiling at Lyantonde District Hqs with a contract amount of Ugx: 94,907,990/= and actual expenditure of 85,578,052/= (v) Construction of the Kroiler Chicken house at Kilwooza Parish, Public Water Stand taps; 3 stance VIP latrine at Kitazigolokwa P/S with an estimated budget/contract price Ugx: 47,853,084 (vi) Completion of one classroom at Kyabakuza and Kasambya P/S with a contract price of Ugx: 17,991,460/= (vii) Drilling of three boreholes at Lyakajura (Kyemamba), Kabayanda, and Kyempisi; (viii) Construction of a general Ward with Maternity and a 3 stance VIP latrine at Kaliiro Health Centre; (ix) Supply of HDPE Water Tanks of 24000 (2No.) & 10,000 (2No.) with a contract sum of Ugx: 33,979,079/=. In the absence of Engineering Final Certification of Works documents it was difficult to ascertain the completion rates.



5	<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects and assets during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2</li> </ul>	2	<p>From the sampled projects in the AWP &amp; Annual Financial Accounts of MoFPED : (i) Construction of two valley tanks at Lyakajura at Katovu Luwama with a budget of 118,950,000 and works carried out at a contract sum of Ugx: 117,569,300/=; (ii) Construction of VIP Latrine at Lyantonde District HQs with a budget of Ugx: a contract price of Ugx: 21,947,528/=;(iii ) Construction of the Council ceiling at Lyantonde District Hqs with a contract amount of Ugx: 94,907,990/= and actual expenditure of 85,578,052/=; (iv) (ix) Supply of HDPE Water Tanks of 24000 (2No.) &amp; 10,000 (2No.) with a contract sum of Ugx: 33,979,079/=; (v) Construction of VIP Latrine at Lyantonde District HQs with a budget of 22,000,000/= and a contract price of Ugx: 21,947,528/=; were projects completed within the approved budget- Max.15% plus or minus of original budget.</p>
		<ul style="list-style-type: none"> <li>Evidence that the LG has budgeted and spent at least 80% of O&amp;M budget for infrastructure in the previous FY: score 2</li> </ul>	0	<p>Based on the information gathered from the annual budget performance report, annual accounts &amp; annual performance report Lyantonde DLG budgeted UGX: 67,976,000/= for O&amp;M for the roads sector as a case in point and spent Ugx: 28,999,000/= which translates into 42.7% which is below the set minimum.</p>

Assessment area: Human Resource Management

6	<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2</li> </ul>	0	<p>From the Human Resource office this assessment established that 4 out of 9 Heads of departments had signed performance Contracts and had annual performance reports on their personal files for financial year 2016/2017. These include District Education Officer, CFO, Senior Lands Management Officer Acting as DNRO, and Principal Community Development Officer Acting as DCDO.</p> <p>The rest of the staff were not appraised during financial year 2016/2017.</p>
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		<ul style="list-style-type: none"> <li>• Evidence that the LG has filled all HoDs positions substantively: score 3</li> </ul>	0	From the Human Resource office and reviewed personnel files, this assessment established that all the 9 HODs are not substantively appointed.
7	The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.	<ul style="list-style-type: none"> <li>• Evidence that 100 percent of staff submitted for recruitment have been considered: score 2</li> </ul>	0	From Secretary DSC, it was established that the CAO declared vacancies for recruitment to the DSC in the letter dated 15th February 2017  However the submission was not considered in financial year 2016/2017 as the District Service Commission was not fully constituted and approved by Public Service Commission.
	Maximum 4 points on this Performance Measure	<ul style="list-style-type: none"> <li>• Evidence that 100 percent of staff submitted for confirmation have been considered: score 1</li> </ul>	0	From Secretary DSC, it was established that the CAO Submitted staff for confirmation to the DSC in the letters dated 11/1/2017,27/2/2017,  However the submission was not considered in Financial year 2016/2017 as there was no District Service Commission in place
		<ul style="list-style-type: none"> <li>• Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1</li> </ul>	1	From the Secretary DSC this assessment established that there was no submission from CAO on staff for disciplinary action
8	Staff recruited and retiring access the salary and pension payroll respectively within two months	<ul style="list-style-type: none"> <li>• Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3</li> </ul>	0	From the Secretary District Service Commission, this assessment established that there was no recruitment in financial year 2016/2017 because there was no District Service Commission in place
	Maximum 5 points on this Performance Measure.			

		<ul style="list-style-type: none"> <li>Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2</li> </ul>	0	<p>The list of staff retired in the FY 2016/17 was availed for verification.</p> <p>This assessment established that one Head teacher retired in the financial year 2016/2017.</p> <p>From the records this Head teacher retired on 12/9/2016 and Accessed payroll in October 2017</p> <p>It took one year to have this pensioner accessed on payroll</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"> <li>If increase in OSR from previous FY but one to previous FY is more than 10% : score 4 points</li> <li>If the increase is from 5 -10% : score 2 point</li> <li>If the increase is less than 5% : score 0 points.</li> </ul>	0	<p>From the final accounts of FY 2016/2017 the assessment established that Lyantonde District Local Government collected local revenue amounting to UGX 69,984,249 and UGX 105,754,215 in FY 2015/2016 implying a reduction of 33.8%.</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"> <li>If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10% : then 2 points. If more than +/- 10% : zero points.</li> </ul>	2	<p>From the final accounts for FY 2016/2017 this assessment established that Lyantonde District Local Government collected local revenue amounting to UGX 69,984,249 against a revised budget of UGX 69,984,249 implying a realisation ratio of 1%.</p>

11	Local revenue administration, allocation and transparency  Maximum 4 points on this performance measure	<ul style="list-style-type: none"> <li>Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2</li> </ul>	2	From the final accounts for FY 2016/2017 and books of account, this assessment established that Lyantonde District Local Government received local service tax amounting to UGX 25,076,012 of which UGX 17,400,000 (69.4%) was remitted to sub-counties and town councils. This was slightly more than the required 65%.
		<ul style="list-style-type: none"> <li>Evidence that the LG is not using more than 20% of OSR on council activities: score 2</li> </ul>	2	From the CFO, the assessment established that during FY 2016/2017 Lyantonde District Local Government collected local revenue amounting to UGX 69,984,249 of which UGX 13,068,000 (18.7%) was spent on Councillors' allowances.

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.	<ul style="list-style-type: none"> <li>Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2</li> </ul>	0	The District PDU is headed by a senior procurement officer who was substantively recruited on 24/12/2007. The recruitment process for the procurement officer was ongoing at the time of this assessment.
		<ul style="list-style-type: none"> <li>Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1</li> </ul>	1	<ul style="list-style-type: none"> <li>LG presented TEC report under technical compliance evaluation method dated 5/6/2017. Subject: LYAN580/WRKS/16-17/00009. Construction of general ward at Kaliiro Maternity ward and VIP latrine by Geses Uganda Ltd at UGX: 248,239288.</li> <li>Evaluation Report dated 09/02/2017. Subject: LYAN580/WRKS/16-17/00005: Construction of Lyantonde Council Ceiling at the Administration Block at UGX: 94,907,990.</li> </ul>

		<ul style="list-style-type: none"> <li>• Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1</li> </ul>	1	<p>CC Meeting Minutes dated 05/06/2017 presented. Attendance list attached. Subject: LYAN580/Wrks/16-17/00009. Construction of a general ward with maternity ward and VIP latrine at Kaliiro Health Centre III.</p> <p>CC Decision on a submission report dated: 15/02/2017 presented: Subject: LYAN580/WRKS/16-17/ ..... Including Construction of Lyantonde Council Ceiling at the Administration Block at UGX: 94,907,990.</p>
13	<p>The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.</p> <p>Maximum 2 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2</li> </ul>	2	<p>Procurement Plan for FY 2017/18 ; annual work plan and Budget for FY 2017/18 covers all infrastructure Projects : These include:</p> <ul style="list-style-type: none"> <li>• Construction on 3 stance Pit latrine at Kaliiro Primary School at UGX: 13,000,000 (planned-DDEG);</li> <li>• Opening and grading access roads/streets in Mukokoma land area (About 4km) at UGX: 6,240,216 (planned).</li> </ul> <p>LG made procurements in FY 2016/17 as per plan: Examples include:</p> <ul style="list-style-type: none"> <li>• Deep Borehole Drilling under proc ref: LYAN 580/Wrks/16-17/00003 at UGX: 83,269,300. Contract awarded to Sub Saharan Drilling Uganda Limited on 5/6/2017;</li> <li>• Rehabilitation of Boreholes: REF: LYAN 580/Wrks/16-17/00007 at UGX 38,104,000: Contract awarded: 6/2/2017: Lyantonde Hand Pump Mechanics Association.</li> <li>• Construction of valley tanks: Ref: LYAN 580/Wrks/16-17/00001; Contract award date: 2/5/2017. Ferguson Enterprises Limited at UGX: 117,569,300.</li> </ul>

14	<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2</li> </ul>	0	<p>The LG did not present hard copies to account for 80% of the bid documents for investments and infrastructure by August 30,2017 at the time of this assessment.</p>
		<ul style="list-style-type: none"> <li>• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>• The LG presented updated contracts register for FY 2016/17. Titled: Lyantonde DLG Contracts Register</li> </ul> <p>Complete Procurement Files include:</p> <ul style="list-style-type: none"> <li>• LYAN580/WRKS/16-17/00003: Drilling of Boreholes at Kabayanda, Lyakajura and Kyempisi sites in Lyantonde DLG.</li> <li>• LYAN 580/WRKS/16-17/00009: Construction of a general ward with maternity at Kaliiro Health Centre III with VIP Latrine.</li> <li>• LYAN 580/WRKS/16-17/00005: Construction of Lyantonde Council Hall Ceiling at District Administration Block;</li> <li>• LYAN 580/WRKS/16-17/00001: Construction of Two Valley Tanks at Lyakajura and Katovu-Luwama.</li> </ul>
		<ul style="list-style-type: none"> <li>• For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.</li> </ul>	2	<p>The LG adhered to procurement thresholds in FY 2016/17: Prequalification for Tenders.</p> <p>Open National Bidding</p> <ul style="list-style-type: none"> <li>• New Vision Advert dated 4/5/2017: Lyantonde District Local Government Bid Notice No. 3 of financial year 2016/17. Invitation for Bids: Drilling of boreholes at Kabayanda and Lyakajura and Kyempisi (for UGX: 83,269,300); Construction of Maternity Ward at Kaliiro H/C III. (UGX: 248,239,288).</li> <li>• New Vision advert dated: 20/12/2016: Lyantonde District Local Government: Invitation for Bids: Bid Notice No. 2 of Financial Year 2016/17. Subject of Procurement: Construction of District Council Hall Ceiling; Reconstruction works of the maternity ward at Lyantonde Hospital.</li> </ul>

15	<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2</li> </ul>	2	<p>LG prepared interim and completion certificates for works/projects but these did not have input from the environmental officer:</p> <p>Completion certificate No.1 for Construction of two valley dams at Lyakajura and Katovu Luwama: dated 2/6/2017. Start Date: 7/3/2017. Completion date: 30/6/2017. Maximum retention: UGX: 11,756,930</p> <p>Completion Certificate: No 1: Dated 20/6/2017. Supply of 2 HDPE Tanks of 10 cubic metres and 2HDPE Tanks of 24 Cubic metres with connecting accessories by CREST TANKS. Maximum Retention: UGX: 3,397,908.</p>
		<ul style="list-style-type: none"> <li>Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2</li> </ul>	0	<p>For FY 2017/18, LG did not present site boards with name of project, contract value, name of contractor, source of funding and expected duration.</p>
Assessment area: Financial management				
16	<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4</li> </ul>	4	<p>During FY 2016/2017 Lyantode District Local Government operated 4 bank accounts which were reconciled and up to date as of date of this assessment.</p>



17	<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2.</li> </ul>	0	<p>From the CFO, this assessment learnt that a claims register was not maintained. As such, the timeliness of payments to suppliers could not be readily ascertained.</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"> <li>• Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.</li> </ul>	3	<p>From the internal audit department, it was established that all the four quarterly Internal Audit reports for FY 2016/2017 were produced by the Principal Internal Auditor who was substantively appointed on 23/11/2011 based on the personnel records cited by this assessment.</p>
	<p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries: score 2.</li> </ul>	0	<p>From the Clerk to Council and the Internal Audit Department, it was established that by the time of this assessment, Lyantonde District Local Government 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"> <li>• Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1</li> </ul>	0	<p>From the Clerk to Council, it was established that the internal audit reports for FY 2016/2017 were submitted to LG PAC. Based on the minutes cited by this assessment, it was established that LG PAC had not yet discussed and followed up recommendations from internal audit reports for FY 2016/2017.</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"> <li>• Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4</li> </ul>	0	<p>The assets register was obtained from the CFO and verified. It was noted that all the assets acquired by the district are therein recorded. However, the format used is different from that prescribed by Local Government Finance Manual. For instance, the motor vehicle section lacks provisions Make/model, Tyre size, Capacity, Fuel Type and Repair History among others.</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, the assessment established that Lyantonde 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	<p>Based on the minutes of the Council meetings held on the following dates: 11/05/2016; 03/03/2017; 26/05/2017; 10/11/2017; 29/06/2017; 05/05/2017; 03/07/2017; 22/12/2017; 13/10/2016; 22/07/2017. It is these meetings that service delivery issues such as the Budget, Operations of SACCOS; Sector reports, TPC reports, monitoring reports &amp; LG PAC reports were discussed</p>
22	<p>The LG has responded to the feedback/complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<p>• Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 2.</p>	2	<p>From the budget website the Planner Mr. Arinaitwe Isaac is the designated person to coordinate response to feed-back.</p>
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	<p>The LG Payroll and Pensioner Schedule is well displayed on the Public Notice Boards in the Main Administration block.</p>
	<p>Total maximum 4 points on this Performance Measure</p>	<p>• Evidence that the procurement plan and awarded contracts and amounts are published: score 1</p>	0	<p>Consolidated Procurement Plan not displayed but some contract awards are displayed.</p>

		<ul style="list-style-type: none"> <li>Evidence that the LG performance assessment results and implications, are published e.g. on the budget website for the previous year (from budget requirements): score 1.</li> </ul>	0	No LG PA was carried out on the previous FY.
24	<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1</li> </ul>	1	From the file reference no. CR/152/16 Vol.III containing Circular Standing Instructions, Guidelines, Policies, invitations to LLGs for meetings; Circulars from MoPS; MoWE; MoLG; UNRA; MoFPED have been communicated to LLGs proof is available that the HLG has communicated, explained guidelines & policies issued by the national level to LLGs.
		<ul style="list-style-type: none"> <li>Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc..) with the public to provide feed-back on status of activity implementation: score 1.</li> </ul>	1	From the Invitation letter titled: "Interface with Sub-County Stakeholders on Key Sector Achievements and Challenges" from the office of the District Chairperson dated 11th May 2017 proof was provided that the DLG carried out mobilization on the following dates: 22/05/2017; 23/05/2017; 24/05/2017; 25/05/2017; 30th/05/2017; 31/05/2017; 1st/05/2017. A payment Voucher titled Council Committee & statutory bodies validated as D/00568 was made in the amounts of 1,186,500/= for the activity. One Baraza report for Mpumudde Sub-County was availed for assessment and is dated December 1, 2016.
Assessment area: Social and environmental safeguards				

25	<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2.</li> </ul> <ul style="list-style-type: none"> <li>• Evidence that gender focal point has planned activities for current FY to strengthen women's roles and that more than 90% of previous year's budget for gender activities has been implemented: score 2.</li> </ul>	2	<p>The Gender Focal Point person conducted a gender sector gap assessment in all departments and presented a report dated 5th November 2016. A midterm report with gender issues, action points and progress achieved was presented to the CAO on 5th February 2018.</p>
26	<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 2</li> </ul>	2	<p>The DLG Environmental Officer presented EIA Review Reports and Screening Reports at the time of this assessment;</p> <ul style="list-style-type: none"> <li>• Screening/monitoring Report for partial construction of maternity ward at Kaliiro Subcounty dated: 9/05/2017;</li> <li>• EIA Review Report for Don Fuel Station dated 6/01/2017;</li> <li>• Screening Report dated 7/10/2016 for Bergen Primary School at Lyantonde Town Council, Kaliiro ward A:</li> </ul>

	<ul style="list-style-type: none"> <li>• Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1</li> </ul>	0	<p>LG did not present evidence on integrating environmental and social management plans in Contract bid documents during this assessment. The District Engineer and Procurement and Disposal Unit did not involve present BOQs where the environmental officer had input.</p>
	<ul style="list-style-type: none"> <li>• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1</li> </ul>	1	<p>LG presented land titles where some projects e.g. LG market have been implemented. These include:</p> <ul style="list-style-type: none"> <li>• Certificate of Title for Block 76, Plot 1564. Private Mailo Land for Lyantonde District Local Government of P.O. Box 10, Lyantonde. Reg. Date: 13/05/2015. Instrument No: MSK-00007377. Size: 0.046 Hectares.</li> <li>• Certificate of Title. Private Mailo land Bock No. 76 ; for Lyantonde District Local Government of P.O. Box 10, Lyantonde. Reg. Date: 15/01/2010. Size: 14.99 Hectares:</li> </ul>
	<ul style="list-style-type: none"> <li>• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2</li> </ul>	0	<p>The environmental officer did not present Environmental and Social mitigation Certification forms completed projects during this assessment. The District Engineer did not involve the environmental officer in the certification of completed projects.</p>



**LGPA 2017/18**

Educational Performance Measures

Lyantonde District

(Vote Code: 580)

Score 56/100 (56%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Human Resource Management				
1	The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)	<ul style="list-style-type: none"> <li>Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4</li> </ul>	4	<ul style="list-style-type: none"> <li>Performance contract FY 2017/18 shows number of teachers on salary is 400 for 47 schools</li> <li>Teachers budgeted for is 466 a number sufficient to meet the threshold(376)</li> </ul>
	Maximum 8 for this performance measure	<ul style="list-style-type: none"> <li>Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4</li> </ul>	0	<ul style="list-style-type: none"> <li>Performance contract FY 2017/18 teachers on salary are 356 for 47 government aided schools</li> <li>Lists of schools and teachers shows that the following schools do not meet the minimum threshold: Buyaga, Nsiika, Makukulu, Kibisi Iusozi, Bamunanika, Kalambi, Kabatema, Katovu, Kyakakala, Nakasozi and Kyemamba</li> </ul>
2	LG has substantively recruited all primary school teachers where there is a wage bill provision	<ul style="list-style-type: none"> <li>Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0</li> </ul>	3	<ul style="list-style-type: none"> <li>Performance contract FY 2017/18 shows that teachers provided for under the wage bill is 466 for 47 government aided schools</li> <li>HRM staff structures and LG approved staff structure according to Wage Analysis and Staffing levels by HRO dated 16th January 2018 and referenced CR/115/1 shows approved teacher posts as 424 and so far 388 and still a vacant 36 thus a 92% coverage.</li> </ul>
3	LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.	<ul style="list-style-type: none"> <li>Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6</li> </ul>	6	<ul style="list-style-type: none"> <li>The two inspectors for which a Wage bill provision has been provided 2017/18 are in place</li> <li>Staff list shows two inspectors in place</li> </ul>
	Maximum 6 for this performance measure			

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	<ul style="list-style-type: none"> <li>• Performance contract FY 2017/18 shows a Recruitment plan 2017/18 that 85 teachers are needed of which 43 teachers to be recruited this FY 2017/18</li> </ul>
	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	0	<ul style="list-style-type: none"> <li>• Staff registers shows two inspectors are in place and no recruitment planned for third inspector as per Recruitment Plan 2017/18</li> </ul>
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	3	<p>This assessment reviewed the personnel files for the 2 Inspectors of Schools. The Inspector files CR/D/10504 and CR/D/10184 respectively.</p> <p>The assessment established that two inspectors were all appraised in financial year 2016/2017</p>
	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	3	<p>From the Human Resource Office, 10 out of 45 Headteachers personnel files were reviewed.</p> <p>The Reviewed personnel files were for the following primary schools Kabasegwa, Kempega, Bubangizi, Kalilo, Kitazigolokwa, Kalama, Nabigoye, Kabetemere, Kinuuka, and Kyewanula Primary schools</p> <p>All the Headteachers for the above primary schools had appraisal reports in their personnel file for calendar year 2016</p>

Assessment area: Monitoring and Inspection

6	The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1</li> </ul>	1	<ul style="list-style-type: none"> <li>• Guidelines, circulars, policies from MoEs and reviewed include <ul style="list-style-type: none"> <li>o Teacher support supervision</li> <li>o School Feeding programme guidelines</li> <li>o Circular 5/2017 Uganda National Primary schools performing Arts Festival Syllabus for 2017</li> <li>o Temporary Closure of Bridge schools dated 5th August 2016 ref ADM/48/315/01</li> </ul> </li> <li>• Communication means (eg letters) by DEO to schools <ul style="list-style-type: none"> <li>o Circular dated 9th March 2017 by DEO to Schools on dress code, licensing and registration, planting trees, EMIS data, etc</li> </ul> </li> <li>• Sampled schools shows guidelines communicated below <ul style="list-style-type: none"> <li>o Teacher support supervision</li> <li>o Feeding programme guidelines CR/311 dated 25/05/2017</li> <li>o Circular 5/2017 Uganda National Primary schools performing Arts Festival Syllabus for 2017</li> </ul> </li> </ul> <p>Circulars disseminated as required</p>
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		<ul style="list-style-type: none"> <li>Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level, including on school feeding: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>Minutes from meetings between DEO and head teachers held on 7/06/2017, 13/04/2017, 31/01/2017, 30/11/2016 reviewed.</li> <li>Meeting held on 30th November, 2016 under Min 3(c)/2016 shows discussion on Teacher supervision, Licensing and registration of schools, Measuring Learning achievement, schools fee charges, and Under Min 4/11/2016 teacher supervision, school feeding,</li> </ul>
7	<p>The LG Education Department has effectively inspected all private and public primary schools</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all private and public primary schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> <li>o 100% - score 12</li> <li>o 90 to 99% - score 10</li> <li>o 80 to 89% - score 8</li> <li>o 70 to 79% - score 6</li> <li>o 60 to 69% - score 3</li> <li>o 50 to 59% score 1</li> <li>o Below 50% score 0.</li> </ul> </li> </ul>	1	<ul style="list-style-type: none"> <li>Inventory of schools inspected in FY 2016/17 and School inspection reports shows that</li> <li>QTR 1 50 government aided and 9 private schools were inspected</li> <li>QTR 2 25 government aided and 0 private schools were inspected</li> <li>QTR 3 50 government aided no private schools were inspected</li> <li>QTR 4 50 government aided no private schools were inspected</li> </ul> <p>List of schools shows 47 government aided and 35 private schools thus inspection coverage is 52%</p>
8	<p>LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4</li> <li>Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2</li> <li>Evidence that the inspection recommendations are followed-up: score 4</li> </ul>	4	<ul style="list-style-type: none"> <li>Minutes of departmental meetings held on 25th November 2016 under Min 134/11/2016 and under Min 138/11/2016, Min 139/11/2016 discussed and agreed on corrective actions for streamlining inspections,</li> <li>Departmental Minutes held on 12/04/2017 shows discussion and recommendations for corrective action under Min 144/04/2017 regarding absenteeism and reposting of teachers, submission of statistical forms</li> <li>Departmental Minutes held on 20/04/2017 under Min 150/04/2017 shows discussions on inspections that relate to indiscipline among teachers</li> </ul>
			2	<ul style="list-style-type: none"> <li>DES records on School inspections acknowledgment form 4 dated 5th September 2017 shows that inspection reports for QTR 3 and 4 submitted</li> </ul>
			4	<p>School inspection reports reviewed and show recommendations were made and action plans agreed upon.</p> <ul style="list-style-type: none"> <li>Sampled schools recommendations provided and followed up and include: <ul style="list-style-type: none"> <li>Nabigoye Primary School – recommendation made on improvement of teaching English tenses on 20/03/2017 and an action plan developed and was followed up on 30/06/17</li> <li>Lugala primary school on 18/07/2017 shows recommendation of improving Literacy through the use of numerous activities such acting rhymes, acting dialogues, acting poems etc and this was followed up on 28th July 2017</li> <li>Mother Care preparatory school( a private school) was inspected on 10/07/2017 and it was a follow up on agreed upon actions during the post inspection conference on 21/06/2017 about how to teach concepts in social studies and there was improvement and further agreement and commitment by the teacher in a duly signed action plan</li> </ul> </li> </ul>



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>	<p>• Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5</p> <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"> <li>• Performance contract FY 2017/18 shows that there are 47 government aided schools</li> <li>• List of schools shows that there are 50 government aided and 35 private schools</li> <li>• EMIS forms that there a total of 47 government aided schools and 61 private schools in Lyantonde</li> </ul> <ul style="list-style-type: none"> <li>• Performance contract shows 20,036 pupils enrolled in UPE</li> <li>• EMIS forms show that there 19,732 pupils in UPE</li> </ul>
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>	<p>• 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</p> <p>• Evidence that the education sector committee has presented issues that requires approval to Council: score 2</p>	2	<p>From the minutes of the Social Services Standing Committee which houses the Council responsible for education, council met and discussed issues of service delivery, inspection &amp; monitoring reports, budget, Work plans as follows: 24/08/2016; 25/10/2016; 25/04/2017; 15/02/2017;22/12/2016; 23/08/2017; 28/06/2017; 15/06/2017; 05/10/2016.</p> <p>On the following dates i.e. 24/08/2016; 25/10/2016; 25/04/2017; 15/02/2017;22/12/2016; 23/08/2017; 28/06/2017; 15/06/2017; 05/10/2016 the committee responsible for education presented issues thatincluded: PLE Performance; Sector Implementation plan; Inspection reports, Activity reports &amp; TPC reports.</p>
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	<ul style="list-style-type: none"> <li>• Files of SMC minutes at DEO's office show that schools have all SMCs and they are functional</li> <li>• Randomly Sampled schools(St Lawrence Kalambi, Kabatema, Bamunanika, Kyabbuza) show all have SMCs and have minutes on file and regularly hold meetings. A review of their minutes shows:</li> <li>• St Lawrence Kalambi held meetings on 9/3/2017 and under Min Vii/03/2017 discussed budget issues, Meeting on 22/06/17 under min Vii/06/2017 discussed budget issues, Meeting held on 22/08/2017 under Min V/08/2017, meeting held on 26/09/2017 under Min VII/09/2017 budget issues were discussed</li> <li>• Kabatema Primary School held meetings on 22/11/2017 and under Min 3/2017 budget issues were discussed, Meetings held on 18/10/2017 under Min VIII/03/2017 budget issues were discussed, Meeting held on 19/06/2017 under Min 06/06/2017 budget issues discussed</li> <li>• Kyabuza Primary school held meetings on 20/09/17 under Min 05/09/2017 budget issues were discussed, Meeting 04/08/2017 under min 5/08/2017 budget issues discussed, held meeting on 21/02/2017 under Min 4/2/2017 budget issues discussed</li> <li>• Bamunanika Primary school held meeting on 22/11/2017, 18/10/2017, 19/06/2017 and 21/03/2017 and under Min3/2017, Min 06/06/2017, Min 05/2017 budget issues were discussed.</li> </ul>

12	<p>The LG has publicised all schools receiving non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3</li> </ul>	0	<ul style="list-style-type: none"> <li>No list of schools and non-wage grant allocations found on Notice boards</li> </ul>
Assessment area: Procurement and contract management				
13	<p>The LG Education department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30: score 4</li> </ul>	0	<ul style="list-style-type: none"> <li>Procurement request documents from Education to PDU reviewed and shows receipt of request by PDU on 26th June 2017 for a purchase of a vehicle as per the Sector AWP</li> <li>Submission beyond April 30th as required by guideline</li> </ul>
14	<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	3	<p>From the list of 2 payment requests raised in the Education Department in FY 2016/2017, all of them were recommended by the Head of Department within one day.</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"> <li>Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by mid-July for consolidation: score 4</li> </ul>	0	<p>Annual performance report- Q4 was submitted on 31/07/2017 which is later than the set timeline of mid-July.</p>

16	<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</li> <li>o If sector has no audit query score 4</li> <li>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</li> <li>o If all queries are not responded to score 0</li> </ul>	2	<p>From the quarterly internal audit reports for FY 2016/2017, it was established that the Education Department has 1 audit query which was responded to by the time of this assessment.</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"> <li>• Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc...: Score 2</li> <li>• Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2</li> <li>• Evidence that the School Management Committee meet the guideline on gender composition: score 1</li> </ul>	2   2  0	<ul style="list-style-type: none"> <li>• Understanding and managing menstruation: A reader for learners distributed and discussed and distribution meeting and discussions held on 14th March 2017. The meeting was in collaboration with DCDO at DLG level and also Gender department MOES</li> <li>• A report of a meeting of DEO and Head teachers dated 5th October 2017 shows dissemination and discussion of issues of acquisition and provision of sanitary pads and towels among girl pupils.</li> <li>• Inspection report 3rd QTR shows that issues of separation of toilets for girls and boys were discussed and meetings supported by DCDO as the gender focal person</li> <li>• Lists of SMC and composition of members shows that all schools have the requisite female representatives for foundation bodies except Lugala P/S</li> </ul>
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18	<p>LG Education department has ensured that guidelines on environmental management are disseminated</p> <p>Maximum 3 points for this performance measure</p>	<p>• 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:</p>	3	<ul style="list-style-type: none"> <li>• Minutes of meeting held on 16/10/2017 under Min 3/2017 during the ceremony of ground breaking for construction of GPE Schools the Environment officer disseminated environment guidelines and safeguards in schools and especially under construction</li> <li>• Minutes of meeting between DEO and schools dated 28/12/2017 shows under Min 111/2017 environment club commissioned and guidelines on waste management, planting trees disseminated, all facilitated by the Senior environment officer alongside DEO and DCDO at Kibisi Lusozi P/S</li> <li>• Inspection reports of second quarter 2016/17 dated 6th December 2026 show that tree planting was to be followed up as an initiative of the department</li> </ul>
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## **LGPA 2017/18**

Health Performance Measures

Lyantonde District

(Vote Code: 580)

Score 59/100 (59%)

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>• Following an analysis of the wage budget for FY17/18 there was a surplus of funds 2,464,117,000 UGX, which were used to hire 15 staff in this FY17/18: 1 DHO, 8 Mid wives, 2 Enrolled nurses, 1 dispense, 1 theatre attendant, 1 dark room attendant and 1 nursing officer. A letter dated 7th December 2018 inviting the health department to conduct interviews on the 14th and 15th of December 2017 by the District Service Commission.</p> <p>Current positions filled 321/392 (81.9%)</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>The health department submitted a comprehensive recruitment plan for the FY17/18 dated 18th Jan 2017.</p> <p>15 out of 17 proposed posts have been recruited.</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>	8	<p>The District has one District Hospital (Lyantonde) and 3 HCIII (Kinuuka, Kalilo, and Mpumudde).</p> <p>From the personnel files this assessment established that the Health Unit charges for all the above health centre III facilities had performance appraisal reports on their file for 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"> <li>• Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4</li> </ul>	4	<ul style="list-style-type: none"> <li>• There is evidence that the Health department deployed the health care workers to facilities based on needs assessment and work load at facilities.</li> <li>• Lyantonde Hospital has 142 staff deployed with 6 on study leave,</li> <li>• Kiyinda HC2 has 5 staff deployed,</li> <li>• Kalilo HC3 had 16 staff deployed at the facility</li> <li>• Katovu HC2 has 4 deployed at the facility while 4 others had been transferred to the hospital and other facilities in need of critical staff</li> <li>• Kinuuka HC3 has 16 staff deployed at the facility</li> </ul> <p>All the deployed staff at facilities were in line with the staff list at the health department.</p>
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Assessment area: Monitoring and Supervision

5	<p>The DHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3</li> </ul>	3	<p>The DHO conducted onsite mentorships at facility level on “consolidated guidelines for prevention and Treatment of HIV in Uganda 2016” on 8th May – 11th May 2017 and 27th – 29th June 2017. All communications received from MoH are filed and disseminated to facilities during district meetings with In-Charges.</p>
		<ul style="list-style-type: none"> <li>• Evidence that the DHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3</li> </ul>	3	<p>The was evidence that the DHO held 4 meetings with health facility in-charges and among other things explained MoH guidelines and policies. Meetings were held on Q1 8/8/2016, Q2: 25/10/16, Q3 13/02/2017, Q4:11/04/2017</p>

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

Maximum 6 points for this performance measure

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

0

The District has one hospital and no HCIV. Although there was evidence at the DHO of presence of the 4 quarterly supervision reports (Q1 28th Sept 2016, Q2: 20th Dec 2016, Q3: 30th March 2017, Q4: 30th June 2017); upon verification at the Hospital there was no evidence in the supervision book to indicate that the DHT had conducted all the 4 mandatory supervisions in the FY16/17. Supervision conducted were for specific program areas by members of the DHT while others were conducted by partners

Evidence that DHT has supervised lower level health facilities within the previous FY: • If 100% supervised: score 3 points • 80 - 99% of the health facilities: score 2 • 60 - 79% of the health facilities: score 1 • Less than 60% of the health facilities: score 0

0

- Although there was evidence at the DHO of all the 4 quarterly supervision reports; upon verification at the facilities it was noted that The DHT didn't conduct all the 4 quarterly supervisions to all the lower health facilities

- At Katovu HC2; Supervisions were conducted by program specific staff and not integrated support supervision on 7th Nov 2016 by the DTLS, 21st Feb 2017 by District Medicine Management Supervisor (DMMS) for SPARS visit

- At Kinuuka HC3 DHT visited on 24th Oct 2017, DMMS for SPARS visits on 22nd July 2016 and 6th Sept 2016 for Data quality improvement .

At Kalilo HC3 DMMS visited on 08 April 2017 and 21st June 2017 for SPARS supervision visit

There was no evidence at the facilities for the DHT integrated support supervision carried out by the district health department



7	<p>The Health Sub-district(s) have effectively provided support supervision to lower level health units</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that health facilities have been supervised by HSD and reports produced: • If 100% supervised score 6 points • 80 - 99% of the health facilities: score 4 • 60 - 79% of the health facilities: score 2 • Less than 60% of the health facilities: score 0</p>	0	<ul style="list-style-type: none"> <li>• The district has one Health Sub district. The HSD did not conduct all the 4 quarterly support supervisions to the lower health facilities</li> <li>• At Kiyinda HC2 HSD conducted supervision on 29th Nov 2016</li> <li>• At Kalilo HC3 HSD supervision was carried out on 30th Nov 2016</li> <li>• At Kinuuka HC3 30th Sept 2016 by the HSD staff from Lyantonde Hospital</li> </ul> <p>At Katovu HC2, there was no evidence of HSD supervision carried out in the Supervision Book</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"> <li>• Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4</li> </ul>	0	<p>The District Health office conducted District health management Team meetings (DHMT) with health facility in-charges. (Q1: 8/8/2016, Q2: 25/10/2016, Q3 13/02/2017, Q4: 11/04/2017).</p> <p>However, there are no specific recommendations for corrective action indicated in the meeting minutes.</p> <p>Issues such as staff absenteeism noted in Q2, rising infections rate was noted in Q4, stock out of antimalarial in Q3 but no recommendations were indicated</p>
		<ul style="list-style-type: none"> <li>• Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6</li> </ul>	0	<p>There is no evidence that the recommendations are followed up and actions taken from the DHMT and DHT meetings.</p>

9	<p>The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> <li>o List of health facilities which are consistent with both HMIS reports and OBT: score 10</li> </ul> </li> </ul>	10	<ul style="list-style-type: none"> <li>• The District has 29 facilities (1 Govt Hospital, 4 Govt HC3, 2 PNFP HC3, 13 Govt HC2, 9 PFP facilities )</li> <li>• All the 29 facilities submit HMIS forms to the DHO. The facilities receiving PHC funds and in OBT are 20 facilities (1 Hosp, 4 HC3, and 13 HC2) and all these 20 facilities are submitting HMIS reports to the Ministry of Health</li> </ul>
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Assessment area: Governance, oversight, transparency and accountability

10	<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2</li> </ul>	2	<p>Based on the minutes availed for assessment the Social Services Standing Committee which houses the committee responsible for health issues, met and discussed service delivery issues as follows: 24/08/2016; 25/10/2016; 25/04/2017; 15/02/2017;22/12/2016; 23/08/2017; 28/06/2017; 15/06/2017; 05/10/2016 and these included Sector Implementation plan; Inspection reports, Activity reports &amp; TPC reports.</p>
		<ul style="list-style-type: none"> <li>• Evidence that the health sector committee has presented issues that require approval to Council: score 2</li> </ul>	2	<p>Issues presented on the following dates; 24/08/2016; 25/10/2016; 25/04/2017; 15/02/2017;22/12/2016; 23/08/2017; 28/06/2017; 15/06/2017; 05/10/2016 included health sector work plans; monthly financial reports for the health sector; Inspection reports; construction of the Maternity Ward at Lyantonde Hospital and construction of a 3 stance VIP Pit Latrine.</p>

11	<p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 5 points</p>	<p>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> <li>• If 100% of randomly sampled facilities: score 5</li> <li>• If 80-99% : score 3</li> <li>• If 70-79%: : score 1</li> <li>• If less than 70%: score 0</li> </ul>	0	<ul style="list-style-type: none"> <li>• The facilities visited have functional HUMC boards, meetings held</li> <li>• Lyantonde Hospital Q1: 25/08/2016, Q2: 15/11/2016, Q3: 14/03/2017, Q4 02/06/2017</li> <li>• Kalilo HC3: Q1: Minutes not seen Q2: 7/10/2016, Q3: 4/01/2017, Q4: 04/04/2017</li> <li>• Kinuuka HC3 Minutes not seen • Kiyinda HC2: Q2 16/11/2016, Q3 06/03/2017</li> <li>• Katovu HC2: Q3 17/03/2017</li> </ul> <p>Out of 5 facilities visited; 1/5 (20%) held the 4 mandatory HUMC meeting minutes</p>
12	<p>The LG has publicised all health facilities receiving PHC non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards: score 3</li> </ul>	3	<p>The LG publicised the 20 facilities receiving PHC on the notice board for the Current FY17/18</p>
Assessment area: Procurement and contract management				
13	<p>The LG Health department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2</li> </ul> <p>Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2</p>	0	<p>The annual procurement plan was submitted on 14th June 2017</p> <p>Procurement request was submitted on 23rd June 2017 by the health department: Request was for Rehabilitation of OPD Block, expansion of the Theatre, extension of the Male ward and construction of pit latrines at Lyantonde Hospital</p>

14	<p>The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time:</li> <li>• 100% - score 8</li> <li>• 70-99% – score 4</li> <li>• Below 70% - score 0</li> </ul>	8	<p>There was evidence that the DHO supported all the 18 government facilities to prepare the procurement plans. One Hospital and participated in revision of the Health facility drug kit for four HC3 and 13 HC2 submitted to NMS on 13th December 2016</p>
15	<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 2 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points</li> </ul>	2	<p>From the list of 5 payment requests raised in the Health Department in FY 2016/2017, it was established that all were recommended by the Head of Department within one week.</p>
Assessment area: Financial management and reporting				
16	<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4</li> </ul>	0	<p>Annual performance report-Q4 for the health sector was submitted on the 31st/07/2017 which is later than the set timeline of mid-July.</p>

17	<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0</p>	0	<p>From the quarterly internal audit reports for FY 2016/2017, it was established that the Health Department has 10 audit queries of which, 1 was not yet responded to by the time of this assessment.</p>
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Assessment area: Social and environmental safeguards

18	<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> <li>• Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2</li> </ul>	0	<p>The HUMC gender composition of the facilities is; Lyantonde Hospital 2/9 Kiyinda HC2: 1/8 Kalilo HC3 2/8 Kinuuka HC3: 4/8 Katovu HC2: 3/7</p> <p>The Hospital, Kiyinda HC2 and Kalilo HC3, don't meet the gender composition for HUMC</p>
		<ul style="list-style-type: none"> <li>• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2</li> </ul>	0	<p>There was no evidence the LG had issued sanitation guidelines to facilities. Pit latrines are clearly labelled separating male from female at Lyantonde Hospital and Kinuuka KC3. At Kiyinda HC2 and Katovu HC2 there was only 2 stance pit latrine used by both staff and patients.</p> <p>At Kalilo there was a 4 stance pit latrine under construction while the old structure does not separate male from female</p>

19	<p>The LG Health department has issued guidelines on medical waste management</p> <p>Maximum 2 points</p>	<ul style="list-style-type: none"> <li>• Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal : score 2 points.</li> </ul>	2	<p>In the Hospital there were waste management disposal guidelines with SOPs displayed on the walls and they had received training from the LG and partner Rakai Health Sciences Project.</p> <p>At Kiyinda HC2 there were waste segregation SOPs on the walls. Kalilo HC3 and Kinuuka HC3 were trained in waste care management with support from LG and Mildmay and guidelines were available.</p>
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## **LGPA 2017/18**

Water & Environment Performance Measures

Lyantonde District

(Vote Code: 580)

Score 68/100 (68%)

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"> <li>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</li> </ul>	10	<ul style="list-style-type: none"> <li>From the DWO, a Summary showing the average safe water coverage of the district (47%) and each of the sub counties was Obtained fro the national water atlas</li> <li>2 Sub-counties are below the average safe water coverage and these included Kasagama 33%, Mpumudde 22%,</li> <li>All the 2 sub-counties below the district safe water coverage were targeted in the AWP 2017/2018</li> </ul>
2	<p>The LG Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15</li> </ul>	15	<ul style="list-style-type: none"> <li>From the AWP and budget for financial year 2016/2017 and the annual progress reports on quarterly basis submitted to the line ministry, it was established that 2 Ferro cement Tanks and of 6m3 and 4 ferro cement tanks of 10m3 were planned and implemented in kasagama S/C with safe water coverage of 33% and mpumudde S/C with safe water coverage 22% respectively.</li> </ul>
Assessment area: Monitoring and Supervision				



3	<p>The LG Water department carries out monthly monitoring and supervision of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the LG Water department has monitored each of WSS facilities at least annually. • If more than 95% of the WSS facilities monitored: score 15 • 80 - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60 - 69% monitored: score 5 • 50 - 59%: score 3 • Less than 50% of WSS facilities monitored -score 0</p>	15	<ul style="list-style-type: none"> <li>- From the AWP and progress reports from the DWO it was established that 69 projects were implemented.</li> <li>- From the DWO report file 2016/2017 it was established that supervision reports for all the projects were available and these included supervision reports for borehole rehabilitation and Ferro cement tanks constructions dated 16/1/2017</li> </ul>
4	<p>The LG Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	0	<ul style="list-style-type: none"> <li>• The reports of MIS obtained from MoWE, the performance contracts and the OBT attached to AWP 2017/2018 submitted to MoWE shows that some of the projects are not consistent.</li> <li>• In OBT there are 4 ferro cement tanks while in the work plan submitted to the MoWE indicates 12 Ferro cement hence the data not consistent</li> </ul>
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"> <li>• From the procurement file in the DWO it was established that the DWO Submitted procurement requests to PDU on 29/3/2017.</li> </ul>

6

The DWO has appointed Contract Manager and has effectively managed the WSS contracts

Maximum 8 points for this performance measure

• If the DWO prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2

0

- From the DWO it was established that was no contract management plan in place for the contracts implemented  
- From DWO it was established that they were no site meeting minutes, no site reports

• If water and sanitation facilities constructed as per design(s): score 2

2

- From the sampled project visits, of 2 Ferro cement tanks at Kaliro and 2 Ferro cement tank at katovu it was established that the facilities were constructed according to designs and specifications there was a soak pi, roof slab, gutters taps to fetch water

• If contractor handed over all completed WSS facilities: score 2

0

- From DWO in the contract file it was established that they were No handover reports by the contractor

• If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2

2

- From DWO in the contract file, it was established that all the projects implemented were certified by DWO for payment and completion reports attached. These included 2 Valley tanks in katovu and completion report compiled on 2/6/2017.

7	<ul style="list-style-type: none"> <li>Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	<ul style="list-style-type: none"> <li>Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	3	<p>From the list of 5 payment requests raised in the Water Department in FY 2016/2017, it was established that all were recommended by the Head of Department within an average of 2 days.- From the Payment certificate file in the DWO, it was established that DWO officer certified works in time.</p> <ul style="list-style-type: none"> <li>The contractor submitted his claim for the construction of 2 valley tanks on 2/6/2017 and the DWO certified it on 2/6/2017 and a report of 2/6/2017 attached.</li> <li>The contractor submitted his claim for the supply of HDPE Tanks on 20/6/2017 and the DWO certified it on 20/6/2017.</li> </ul>
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Assessment area: Financial management and reporting

8	<p>The LG Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5</li> </ul>	0	<p>Q4 annual water sector performance report submitted on 31/07/2017 which is later than the timeline set of mid-July.</p>
9	<p>LG Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</li> <li>If sector has no audit query score 5</li> <li>If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3</li> <li>If queries are not responded to score 0</li> </ul>	5	<p>From the quarterly internal audit reports for FY 2016/2017, it was established that the Water Department has no audit query.</p>

Assessment area: Governance, oversight, transparency and accountability

<p>10</p>	<p>The LG committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3</li> </ul>	<p>3</p>	<p>From the Council minutes of the Social Services Standing Committee which houses the Water sector, Council Committee responsible for water met on the following dates: 24/08/2016; 25/10/2016; 25/04/2017; 15/02/2017;22/12/2016; 23/08/2017; 28/06/2017; 15/06/2017; 05/10/2016 and discussed service delivery issues relating to water &amp; sanitation, supervision &amp; monitoring reports.</p>
		<ul style="list-style-type: none"> <li>• Evidence that the water sector committee has presented issues that require approval to Council: score 3</li> </ul>	<p>3</p>	<p>From the council responsible for water the following issues were presented: Activity reports, Water Sector investment plan; Inspection reports; Water Sector Budget, monitoring report and monthly financial reports in all the meetings whose dates are: 24/08/2016; 25/10/2016; 25/04/2017; 15/02/2017;22/12/2016; 23/08/2017; 28/06/2017; 15/06/2017; 05/10/2016.</p>
<p>11</p>	<p>The LG Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2</li> </ul>	<p>2</p>	<p>From the district notice board, it was established that they were displays of releases, procurements plans</p> <p>- From the DWO A report on advocacy meetings from the departmental minute file was compiled on 29/12/2016 and was established that there were discussions of expenditures and releases</p>

		<ul style="list-style-type: none"> <li>• All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>• From the 5 sampled projects in the field which included 2 tanks in kasgama, 2 tanks in Mpumudde, 1 valley tank in katovu</li> </ul> <p>it was established that all had no sign boards</p>
		<ul style="list-style-type: none"> <li>• Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>• From the district notice board it was established that, invitation to tenders, best evaluated bidders were displayed on labelled sign board</li> </ul>
12	<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1</li> </ul>	1	<ul style="list-style-type: none"> <li>• From the DWO in the sub county work plan file and field visits, it was established that there are application forms submitted by sub county chief and community contribution if form of local materials on construction of Ferro cent tanks in kaliro, kikesa in mpumudde Subcounties</li> </ul>
		<ul style="list-style-type: none"> <li>• Number of water supply facilities with WSCs that are functioning evidenced by collection of O&amp;M funds and carrying out preventive maintenance and minor repairs, for the current FY: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>• From the 5 sampled projects in the field which included 2 tanks in kasgama, 2 tanks in Mpumudde, 1 valley tank in katovu</li> <li>• it was established that there were no collection of O&amp;M fees</li> </ul>
Assessment area: Social and environmental safeguards				

13	<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2</li> <li>• Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1</li> <li>• Evidence that construction and supervision contracts have clause on environmental protection: score 1</li> </ul>	<p>0</p> <p>0</p> <p>1</p>	<ul style="list-style-type: none"> <li>- From the DWO it was established that the environmental and social screening was not done for the Ferro cement tanks and bore hole rehabilitation</li> <li>• From the DWO it was established that there were no follow up support on environmental concerns in the financial year 2016/2017</li> <li>• From the contract file in the DWO it was established that the BOQs for Ferro cement tanks had environmental clauses in the bill no, 5 clause 14 , allow for environmental restorations</li> </ul>
14	<p>The LG Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• If at least 50% WSCs are women as per the sector critical requirements: score 3</li> </ul>	<p>0</p>	<ul style="list-style-type: none"> <li>• From the extension workers file it was established that the composition of women on WSC is less than 50%</li> </ul>
15	<p>Gender- and special-needs sensitive sanitation facilities in public places/RGCs.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3</li> </ul>	<p>0</p>	<p>From the DWO it was established that there no sanitation projects that were done</p>