



LGPA 2017/18

Accountability Requirements

Masindi Municipal Council

(Vote Code: 774)

Assessment	Compliant	%
Yes	5	83%
No	1	17%

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 PFMA and LG Budget guidelines for the coming financial year.</p>	xxx	<p>Not Compliant – Masindi MC submitted the APC 2017/18 to MoFPED after the deadline (see Receipt dated 31st/7/2017 and Receipt No: 4017) i.e. hence not submitted before 30th/6/2017.</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 - Signed and stamped documented evidence exists as proof that the draft Masindi MC APC/Budget 2017/18 submitted to MoFPED on the 8th May 2017 was accompanied by a Procurement Plan (annexed as Annex 2 after page 46).</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>Compliant - Masindi MC APR 2016/17 (Q\$ Consolidated Report) submitted to the MoFPED on the 31st/7/2017 (Receipt No: 0854), hence submitted on time (on or before 31st July 2017).</p>	Yes

<p>LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)</p>	<p>xxxxxx</p>	<p>Compliant – All 4 quarterly reports for the FY 2017/18 were duly submitted on time (i.e. Q1 - 5th/12/2016 Receipt No: 0147; Q2 – 6th/2/2017 Receipt No: 0281; Q3 – 22nd/5/2017 Receipt No: 0737; and Q4 – 31st/7/2017 Receipt No: 0854).</p>	<p>Yes</p>
<p>Assessment area: Audit</p>			
<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>The LG provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous FY by April 30. (PFMA s.112g).</p> <p>The submission letter dated 3rd /4/2017 was submitted on 4th /4/2017. The LG responded to all the 7 audit issues raised.</p>	<p>Yes</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer</p>	<p>xxxxxx</p>	<p>From the Annual report of the Auditor General FY 2016/2017, Masindi MC obtained an unqualified audit opinion.</p>	<p>Yes</p>



LGPA 2017/18

Crosscutting Performance Measures

Masindi Municipal Council

(Vote Code: 774)

Score 83/100 (83%)

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. 	2	<p>The Masindi Municipality's Physical Planning Committee was formed on Town Clerk's appointment letter of the core PPC members and co-optation in the first PPC meeting (dated 14th/3/2011 min. 02/03/2011) in which other members were co-opted e.g. the Architect. Documented evidence indicated that the PPC was functional. The PPC met on a monthly basis to consider (approve or defer) the submitted applications. Indeed, according to a sample of 5 investments, it was confirmed that the PPC was functional (i.e. it met within 28 days to consider new investments and this in line with the approved physical plans). For the FY 2016/17, the PPC met 6 out of 12 times (on the 21st and 28th/6/2017, 7th and 9th/3/2017, 10th and 11th/1/2017, 8th and 9th/11/2016, 20th and 21st/9/2016, 20th and 21st/7/2016). Official records such as the physical plans, the PPC minutes and attendance register the physical planning registration book as well as use of the official physical planning guiding documents (e.g. the Physical Planning Act and the Physical Planning Standards), attested to the fact that the Physical Planning Office was fully functional in support of the PPC's operations.</p>

		<ul style="list-style-type: none"> • All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2. 	2	<p>A review of PPC minutes indicated that applications were being vetted to ensure consistence with the Municipality's Physical Plans. Even so, while there was no documented evidence (e.g. in form of council minutes) to offer proof that Masindi MC's Structural Plan (2008-2018) and Detailed Plan (2008-2018) were approved by council, according to official records got from MoLHUD, (Status of Physical Planning in Uganda 2017, the MoLHUD Physical Planning Department (2015) only considered physical plans for the old town (see Page 6 that states available and valid Structural Plan 2008-2018 and with an available, valid but undated Detailed Plan as at June 2017). The Physical Planning Office presented evidence of existence of a Detailed Plan (2008-2018) based on the old town. Both plans were due for review and both the Municipal Physical Planning Office and the Municipal Procurement Office presented evidence of call for bids (reference number Masi774/Srvcs/17-18/00001) to prepare the municipal physical plans (i.e. an advert in The Monitor of the 24th/10/2017)</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"> • Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2. 	2	<p>Masindi Municipality held a Budget Conference on 28th/10/2017. Based on the contents of the Budget Conference Report (BCR), there was some evidence that the AWP 2017/18 was based on outcomes of the budget conference. The BCR contained departmental presentations that specified the priorities that were easy to glean from the AWP 2017/18. For education, construction of classrooms on page 16 of the AWP 2017/18 and seen on page 4 of the BCR. For health, construction of health centers is not seen in the AWP 2017/18 (on account of lack of funds) but the project seen on page 4 of BCR. For water, investments and their funding are under NWSC hence not seen in the AWP 2017/18 but seen in the BCR.</p>

<ul style="list-style-type: none"> • Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If different, justification has to be provided and evidence that it was approved by Council. Score 2. 	2	<p>There was evidence that the capital investments in the approved AWP 2017/18 were derived from Masindi Municipality's 5-year Development Plan (MDP) 2015/16-2019/20 (especially the project profiles in the appendix). On the AWP-MDP linkages, the approved AWP (pages 16) shows that the education sector investments e.g. construction of classrooms that appears also in the MDP on page 189. For health, there were no capital investments approved and captured in the AWP (NB: what is covered most are recurrent expenditure budget lines on account of lack of funds to support capital investments. Even so, the MDP (pages 183-186) covers health-related plans.</p>
<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	<p>During FY 2016/17, Masindi Municipality TPC met several times. Indeed, some TPC minutes on file for FY 2016/17 offered documented proof that the TPC discussed the developed project profiles seen in the MDP (2015/16-2019/20) annexes. The TPC 19th/7/2016, agenda item 13 and min.13/07/TPC/2016 (from page 8-9) confirmed that there was official presentation and discussion of the project profiles seen in the AWP 2016/17 (pages 14-24) covering education, health, works and natural resources projects. On the whole, evidence from the TPC minutes indicates that discussions tended to dwell more on the more pertinent specifics (e.g. project profiles) than on generalities. Indeed, for the FY2016/17, while NPA's (2017) Certificate of Compliance with Planning Guidelines awarded Masindi Municipality a score of 75% on the robustness of the planning process, the emerging overall average score only hovered below average (39.5%) when all planning aspects were kept into view (see page 83).</p>

3	<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum 1 point. 	1	<p>The Draft Statistical Abstracts (April 2017) were seen that captured some gender-related and gender dis-aggregated data and information (e.g. on pages 6, 8 and 9 – respectively. capturing the district population and household structure as well as employment, working age and energy sources respectively). However, even in a status (only about 50% completion), there was evidence that the TPC of the 19th/7/2017 (agenda item 13) deliberated on the statistical abstracts in ways that would help influence allocations and decision making. The TPC called on UBOS to assist Masindi Municipality fill existing information in the draft.</p>
4	<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> 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	<p>All (100%) infrastructure projects implemented in FY 2016/17 by the MMC were derived from the approved AWP and APC/budget as per the 31st/7/2017 Q4 Consolidated Report FY2016/17.</p>
		<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>Most (90.9%) of the projects implemented in FY 2016/17 were completed as per work plan – with 10 completed against the 11 budgeted and planned for as per approval by council. This means, therefore, that as per approved budget and plan, only 1 project was not completed (i.e. the titling of council land covering 4 titles was incomplete).</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>According to details in the Q4 Consolidated APR 2016/17, most investment projects (90.9%) implemented in FY 2016/17 were completed within approved budget (the titling of council land was incomplete for 4 titles in part because of inadequate funds to complete the works).</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 	0	<p>Weak attempts are made to ensure that the budget for O&M corresponds with actual expenditure on O&M. On this, the municipality did not fare well at all because it spent only 53.9% of the O&M budget, hence falling below the recommended 80% threshold. The OBT Reports revealed that Masindi Municipality's O&M budget stood at 187,111,000/= while the actual expenditure for FY2016/17 amounted to a total of 100,860,100/=, that is, clearly far below budget).</p>

Assessment area: Human Resource Management

<p>6</p>	<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 	<p>2</p>	<p>All Heads of Departments that were supposed to be appraised as per guidelines of the MoPS during the previous FY were duly assessed as indicated below:</p> <ul style="list-style-type: none"> <u>Principal Finance Officer: CR/D/ 10753:</u> Appraised on 2/08/2017. Performance Agreement was signed on 2/01/2017 and the Performance Report was also signed on 2/08/17. <u>Municipal Engineer: CR/KT/015:</u> Reported to duty mid-year of the Financial Year (February 2107). Therefore not yet due for performance Appraisal. <u>Senior Environment Officer (Overseen by the Environment Officer): MMC/KF.</u> Performance Plan signed on 27/07/2016 and Report signed on 29/07/16 by the Town Clerk. <u>Natural Resources Officer (Overseen by the Physical Planner): MMC/PP/NG:</u> Appraised on the 29/07/2016 and Performance Report was signed on the same date while the Agreement was duly signed by the Town Clerk but not dated. <u>Principal Education Officer: CR/D/16436</u> Recently appointed and not yet due for appraisal (appointed on 2/06/17-ref.letter CR/D/16713, minute extract 114 2017). <u>Principal Community Development Officer: CR/D/1470.</u> Appraised on 13/04/2015. Performance Agreement signed on 30/02/2015 while the Performance Report was signed 28/07/2016. <u>Head of Production: CR/D/14800.</u> Appraised on 30/06/2017. Performance Agreement signed on 01/07/2016 and Performance Report signed on 30/06/2017 signed by the Town Clerk. <u>Commercial Officer (Vacant).</u> <u>Principal Medical Officer (Overseen by the Health Educator) CR/D/12595:</u> Appraised on 2/08/2017. Performance agreement signed on 24/08/16 and Performance Report signed on the 2/08 2017 by the Town Clerk. <p>The Officers were assessed on issues including:</p>
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| | <ul style="list-style-type: none">• Performance against set outputs and expected outcomes• Human Resource and Finance management• Initiatives and innovations• Action Plans to address the areas of Improvement |
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• Evidence that the LG has filled all HoDs positions substantively: score 3

0

Not all HoD positions are filled substantively at Masindi Municipality. There are 9 positions of HoDs as per approved structure from MoPs but only 4 out of the 9 positions are filled substantively as indicated below:

1. Principal Finance Officer: Personal File ref. No. CR/D/ 10753. Appointed on 20/03/ 2012 as per letter ref.no. CR/D/10753, minute extract no. 38/2012 held from 7th -27th Feb 2012.

2. Principal Education Officer Personal File Ref no. CR/D/ 16436: Appointed on 2/06/2017 as per ref. CR/D/16436, Minute Extract no.114/2017

3. Principal Community Development Officer: Personal File Ref No. CR/D/1470. Appointed on 13/04/2015 as per minute extract no.6/2015.

4. Head of Production: Personal File Ref No. CR/D/14800: Appointed on 25/05/2016 as per letter CR/D/14810. Min. Extract no. 71/2016 that sat on the 16/05/ 2016.

The remaining positions are held by officers in acting capacity or Assignment on Duty by the Town Clerk.

5. Municipal Engineer: Personal File Ref No.CR/KT/015. Appointed on 27/02/2017 as per minute extract. MMC/158/1 No. 22/2017

6. Senior Environment Officer (Vacant) - Overseen by the Environment Officer. Personal Ref. No. MMC/PP/AKF. Appointed on 20/03/2012 and as per min extract no. 43/2012 of the 7th meeting of the 27th Feb 2012.

7. Natural Resources Officer (Vacant). Overseen by the Physical Planner: Personal File Ref No. MMC/PP/NG. Appointed on 15/10/2001 as per letter ref no. PP/NG.

8 Commercial Officer (Vacant) No assigned Care taker.

9 Principal Medical Officer (Vacant): Overseen by the Health Educator: Personal File Ref. CR/D/125/95. Appointed on 6/06/2016 letter ref.no. CR/D/595 and as per min extract no. 83/2016.

The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.

Maximum 4 points on this Performance Measure

• Evidence that 100 percent of staff submitted for recruitment have been considered: score 2

2

The DSC considered all (100%) submissions made by the Town Clerk for confirmation of staff. Two submissions were made and considered by the DSC as indicated below:

- The DSC that sat on the 17/11/ 2016 considered 1 staff confirmation as per DSC minutes of 22/05/2017 min. 22/2017 and minute 23/2017.
- The DSC that sat on 14/11/2016, considered the confirmation of 1 teacher and 1 Enrolled Nurse as per minute extract no. 311/2016 and 312/2016.

• Evidence that 100 percent of staff submitted for confirmation have been considered: score 1

1

The DSC considered all (100%) submissions made by the Town Clerk for confirmations of staff. Two submissions were made and considered by the DSC as indicated below:

- The DSC that sat on the 17/11/ 2016 considered 1 staff confirmation as per DSC minutes of 22/05/2017 min. 22/2017 and minute 23/2017.
- The DSC that sat on 14/11/2016, considered the confirmation of 1 teacher and 1 Enrolled Nurse as per minute extract no. 311/2016

• Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1

1

No cases for disciplinary action were forwarded by the Town Clerk to the DSC for Disciplinary action.

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>Two staff were recruited during the previous FY. While one staff, managed to access the salary payroll not later than two months after appointment, the second staff could not access the salary pay roll due to change of structure by MoPS (without timely communication to the LGs) leaving out the position of Agricultural Assistant, while the municipality had recruited basing on the old structure which provide for the Agricultural Assistant. The municipality sought clearance from MoPS to the salary as evidenced by letter dated 2/03/17 ref. MMC/CR/161.</p> <p>The two staff were verified by their personal Reference Nos. and IPPS numbers as indicated below:</p> <ul style="list-style-type: none"> MMCR/CR/156: Appointed on 11/07/2017. IPPS number 1011117 appears on the September 2017 Pay Roll verified at the HRM office. MMC/CR/156: Appointed on 20/02/2017. IPPS number 1010094. Staff missed being captured on the IPPS during the first two month due to reasons mentioned above. 									
		<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>No staff (0%) that retired during the FY(2 staff retired) managed to accesses the Pension Pay Roll not later than two months after retirement as evidenced by the details below:</p> <table border="1" data-bbox="893 1433 1500 1724"> <thead> <tr> <th>IPPS No. to P/Roll</th> <th>Retirement Date</th> <th>Access</th> </tr> </thead> <tbody> <tr> <td>539297 2016</td> <td>18/06/2016</td> <td>Sept</td> </tr> <tr> <td>54136 2017</td> <td>5/05/17</td> <td>June</td> </tr> </tbody> </table>	IPPS No. to P/Roll	Retirement Date	Access	539297 2016	18/06/2016	Sept	54136 2017	5/05/17	June
IPPS No. to P/Roll	Retirement Date	Access											
539297 2016	18/06/2016	Sept											
54136 2017	5/05/17	June											

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. 	4	<p>The actual local revenue collected by the LG in FY 2015/16 was Ugx 1,351,120,394 while in FY 2016/2017 local revenue collected was Ugx 1,533,685,000. This gave an increase in local revenue of Ugx 182,564,606 which is 14% increase.</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. 	2	<p>The MC had a budget of Ugx 1,533,684,000 in FY 2016/17 and the actual local revenue collected in FY 2016/17 was Ugx 1,533,685,000. This was 100% budget realization.</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 	2	<p>The Municipality remitted 50% in form of local revenue to the Divisions as evidenced below;</p> <ul style="list-style-type: none"> • Central Division - Ugx 3,287,656 on 21/11/2016 Voucher No. 9/Nov/2016 • Karujubu Division – Ugx 2,295,000 on 21/11/2016 Voucher No. 10/Nov/2016 • Kigulya Division – Ugx 1,277,500 on 23/11/2016 Voucher No. 12/Nov/2016. <p>The Divisions also remitted 50% to the Municipality which became 100% out of which the MC remitted 30% to each division. Evidence of remitting the 30% was available.</p>

		<ul style="list-style-type: none"> Evidence that the LG is not using more than 20% of OSR on council activities: score 2 	2	<p>The payment vouchers for transfers to statutory bodies (local revenue) for the months of July, August, September, October, November, December 2016 and January, February, March, April, May and June 2017 amounted to Ugx 118,832,000. This was 9% of local revenue spent on council activities in FY 2016/17.</p>
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Assessment area: Procurement and contract management

12	<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2 	0	<ul style="list-style-type: none"> The MC has the position of Procurement officer (refer appointment letter Min No 181/2011 dated 3rd November 2011 signed by Ag Town clerk). There is no position of Assistant procurement officer.
		<ul style="list-style-type: none"> Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1 	1	<p>The TEC produced and submitted the following reports to contracts committee;</p> <p>Construction of 5 stance VIP pit latrine at Kabalega primary school signed by 5 members of TEC undated,</p> <p>Supply and installation of solar street lights in Masindi municipal phase II signed by 3 evaluation members undated,</p> <p>Construction of water borne toilet at Boma ground signed by 7 members of TEC but undated.</p>

		<ul style="list-style-type: none"> • Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1 	1	<p>The contracts committee considered recommendations of the TEC for the following;</p> <p>Construction of 5 stance VIP latrine at Kabalega primary school Min 060 MCC/16-17 signed by contract committee members on 21 Feb 2017,</p> <p>Supply and installation of solar street lights in Masindi municipal phase II Min 052/MMC/16-17 signed by contracts committee members on 21 Feb 2017,</p> <p>Construction of water borne toilet at Boma ground Min 053/MCC/16-17 signed by contracts committee members on 21 Feb 2017.</p>
13	<p>The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.</p> <p>Maximum 2 points on this performance measure.</p>	<ul style="list-style-type: none"> • a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2 	2	<ul style="list-style-type: none"> • The Procurement and Disposal plan for current year covers all infrastructural projects and was signed by procurement officer and Town clerk on 21 Dec 2017 submitted to the Executive Director PPDA. Received by PPDA on 2 Jan 2018. • The MC made procurements in previous year as per plan. The 4th quarter report signed by Town Clerk on 10th Aug 2017 submitted to PPDA on 3rd Aug 2017 and received by PPDA on 16 Aug 2017 shows procurements made.

14	<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2 	0	<ul style="list-style-type: none"> The MC prepared 50% of the bid documents late. The invitation to Bid for provision of consultancy services works and supplies under open domestic bidding was run on 24 Oct 2017 on daily monitor newspaper .There was delay in submissions.
		<ul style="list-style-type: none"> For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2 	0	<ul style="list-style-type: none"> The MC did have a contracts register showing subject of procurement, method of procurement, ref No ,source of funding, date of award and contract value in Ug shs signed by procurement officer on 20/06/2017 .However it was not updated.
		<ul style="list-style-type: none"> For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2. 	2	<ul style="list-style-type: none"> For the previous year the MC had thresholds for procurement methods for open bidding above-50,000,000/= selective bidding not exceeding 50,000,000/=. Example open bidding- supply and installation of 10 solar lights ports at 76,284,000/=. for selective bidding- construction of 5 stance VIP latrine at Kabalega PS at 19,250,000/=.construction of waterborne toilet at Boma ground for selective bidding at 42,003,339/=
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	<ul style="list-style-type: none"> The following projects for the previous FY had interim completion certificates; <p>Interim certificate for construction of 5 stance lined VIP pit latrine at Kabalega PS. Completion date 16th June 2017 signed by assistant engineer and Municipal engineer on 12/01/2017,</p> <p>Interim certificate for construction of waterborne toilet at Booma ground. Completion date 16th June 2017 signed by assistant engineer and municipal engineer on 18/01/2017.</p> <p>Interim certificate for installation of 10 solar street lights.completiion date 16th June 2017 signed by assistant engineer and municipal engineer on 06/2/2018,</p> <p>Construction of a 5 stance pit latrine for boys at Biizi primary school.signed by assistant Eng and municipal engineer on 21/06/2017.</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 	2	No infrastructural projects for the current year had begun by the time of assessment
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Assessment area: Financial management

16	<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4 	4	<p>There was evidence that the LG made monthly and up to-date bank reconciliations from the cash books which were reconciled as at 30/6/2017. Bank reconciliation for FY 2017/2018 is done on the IFMS system. Bank reconciliation for TSA was as at 2/2/2018 from the IFMS system and a hard copy was availed to the assessor.</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. 	2	<p>The payment requests and vouchers sampled showed timely payment of the suppliers. E.g.</p> <ul style="list-style-type: none"> Claim for payment by Kona Co. Ltd for construction of a water borne toilet at Boma ground dated 24/4/2017 was recommended for payment on 2/5/2017 and paid on 2/5/2017. Request for payment by Roadways technical engineering services Ltd for supply and installation of 10 solar street lights phase 2 in Masindi town dated 6/5/2017 was forwarded for payment on 11/5/2017 and paid on 17/5/2017. Request for payment by Romej surveyors and contractors Ltd for construction of a 5 stance lined pit latrine at Masindi Army P/S dated 4/5/2017 was forwarded on 30/5/2017 and paid on 31/5/2017. Claim for supply of 40 office chairs and 15 tables by Vick general Co. Ltd dated 8/5/2017 was approved on 22/5/2017 and paid on 22/5/2017, Request for payment by Roadways technical engineering services Ltd for supply and installation of 10 solar street lights phase 2 in Masindi town dated 7/4/2017 was approved on 10/4/2017 and paid on 10/4/2017. Claim for payment by Kona Co. Ltd for construction of a water borne toilet at Boma ground dated 30/5/2017 was recommended for payment on 30/5/2017 and paid on 31/5/2017.
18	<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3. 	3	<p>The MC has a substantive senior internal auditor appointment letter dated 15th/7/2009, minute No. 122/2009 and reference MTC/156. It also has a substantive internal auditor confirmation letter dated 29/5/2013, minute No. 37/2013 and reference MMC/PP/NA. They produced all the four quarterly internal audit reports for FY 2016/17. The quarterly internal audit reports were submitted to MoLGs and Directorate of internal audit as follows; 1st quarter 5/12/2016, 2nd quarter 31/1/2017, 3rd quarter 4/5/2017 and 4th quarter 17/8/2017.</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. 	2	<p>The LG has provided information to Council and LGPAC on the status of implementation of internal audit findings for the previous FY as indicated in the quarterly audit reports for FY 2016/17. The audit reports show “actions taken by management and outstanding issues” in the audit reports. The audit reports also show the management responses to how they have handled the audit queries in all the quarterly audit reports. Furthermore, there was evidence of providing information to LGPAC, in “responses to the issues raised in internal audit report FY 2016/17” report addressed to Chairperson LGPAC and copied to mayor and Senior internal auditor, signed by Town clerk. These reports were dated 20/2/2017, 15/6/2017, 20/6/2017 and 23/8/2017 discussing all the quarterly audit reports. These responses’ reports are a result of Town clerk’s meeting with all the queried officials and departments (follow up).</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>There was evidence of signatures and dates on the top cover of the quarterly internal audit reports to show that the internal audit reports for the previous FY were submitted to LG Accounting officer and LGPAC. 1st quarter was submitted to LGPAC on 7/7/2016, Accounting officer 6/7/2016 and mayor on 6/12/2016. 2nd quarter submitted to LGPAC, Town clerk and mayor on 31/1/2017. 3rd quarter submitted to LGPAC, Town clerk and mayor on 28/4/2017 and 4th quarter submitted to LGPAC, Town clerk and mayor on 31/7/2017. The LGPAC reports reviewing the Quarterly audit reports were available; 1st and 2nd quarter LGPAC report dated 1st/7 2017, 3rd quarter LGPAC report dated 3/7/2017 and 4th quarter LGPAC report dated 1/11/2017. Furthermore, there was evidence of providing information to LGPAC, in “responses to the issues raised in internal audit report FY 2016/17” report addressed to Chairperson LGPAC and copied to mayor and Senior internal auditor, signed by Town clerk. These reports were dated 20/2/2017, 15/6/2017, 20/6/2017 and 23/8/2017 discussing all the quarterly audit reports. These responses’ reports are a result of Town clerk’s meeting with all the queried officials and departments (follow up).</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 	4	<p>The LG had two asset registers namely;</p> <ol style="list-style-type: none"> 1. Heavy vehicles and Heavy plants. 2. Land and buildings. <p>The registers were detailed and up dated up to end of FY 2016/17 with depreciation calculated. The MC had not yet acquired any asset in FY 2017/18 as explained by the accountant (salary). it was in the format as per accounting manual.</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 Annual report of the Auditor General FY 2016/2017, Masindi MC obtained 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>There was some documented evidence that Masindi Municipal Council was functional, at least more than being modestly so. For instance, it met 6 out of 6 mandatory times (per financial year) in FY 2016/17. The council meetings happened on the 20th/12/2016, 17th/11/2016, 1st/9/2016, 23rd/3/2017, 25th and 31st/5/2017, as well as 21st/4/2016). On a few occasions when the district council met, it deliberated on relevant service-delivery issues e.g. discussion of budgets, plans and reports. Many times, the council meetings slightly covered both education and health committee related reports and recommendations to council for approval (e.g. see minutes of council on the 17th/11/2016, 1st/9/2016, 23rd/3/2017 as well as 25th and 31st/5/2017). Even so, even here the issues on education and health prominently featured in the minutes than one would find issues to do with water (the exception to the rule being council's deliberations on the 25th and 31st/5/2017 as seen on page 10 where proposals on the wells to construct are mooted). In addition, the council minutes were often silent when it came to covering aspects such as TPC reports, monitoring reports and performance assessment results cum reports.</p>
22	<p>The LG has responded to the feedback/complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 2. 	2	<p>The Town Clerk's letter dated 26th October 2016 appointed Ms. Pheonah KABACUNZI as the designated Focal Point Person assigned to represent the Masindi Municipal Council to access the budget website (www.budget.go.ug), respond to complaints submitted to MoFPED, give feedback after consultation and offer any other required information.</p>

23	The LG shares information with citizens (Transparency)	Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2	2	Documented evidence seen of publishing payroll register on the Municipality's Main Block's notice board albeit there was no documented evidence of posting of the pension schedule.
	Total maximum 4 points on this Performance Measure	• Evidence that the procurement plan and awarded contracts and amounts are published: score 1	1	Documented evidence seen of publishing of procurement register on the Municipality's Main Block's notice board although the contents covered the years obsolete information (contract awards for the FY 2015/16 posted alongside that for FY 2016/17 and FY 2017/18).
		• 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	Not Applicable (N/A) – There was no LGPA in the FY under review.
24	The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens	• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1	0	There was no documented evidence that information relayed through central government agencies' (MoFPED, MoLG, OPM, etc) e.g. circulars, guidelines, policies and procedures (on DDEG, NAADS, NUSAF, etc) are disseminated or remitted to Lower level Local Governments (LLG) through Masindi Municipal Council (MCC).
	Maximum 2 points on this performance measure	• Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc..) with the public to provide feed-back on status of activity implementation: score 1.	1	For the FY 2016/17, there was documented evidence in form Community Group Discussions (e.g. the 17th/8/2017 Report and Attendance Register covering Community Handover of Projects in the Education Department for FY 2016/17 – discussions based on initial dissemination of information on work done and community dialogues on what they are to receive). Documented evidence was also made available on Radio (Kings – 93.6 FM) Talk Show (e.g. one carried out on the 12th/5/2017 on government policy(s) on cooperatives for wealth creation).
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	<ul style="list-style-type: none"> The Gender focal person provided guidance and support to departments through the following; <ul style="list-style-type: none"> Training and sensitisation of community in gender community leaders women, youth and PWDs signed by principal CDO on 28th /06/2017, Training report on gender inequalities between women and men signed by principal CDO on 18 June 2017, Report on collection and analysis dissemination of gender disaggregated data signed by Principal CDO on 6th Dec 2016, Report on mentoring of technical staff on gender mainstreaming signed by PCDO on 11th Jan 2017.
		<ul style="list-style-type: none"> Evidence that gender focal point has planned activities for current FY to strengthen women's roles and that more than 90% of previous year's budget for gender activities has been implemented: score 2. 	2	<p>The Gender Focal point had planned activities for current yr which include;</p> <p>Submission of gender and equity action plan for FY 2017/18 showing sector departments of health, production, environment, water, agriculture signed by PCDO dated 14th Jul 2017 .Work plan shows department, gender equity concern, intervention required and responsible person.</p> <p>The previous year's budget included; increase community awareness on gender at 5M UGshs, Build capacity in women groups, support to women councils at 4M UG shs. The GFP used 90% of budget for implemented activities.</p>

LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition

Maximum 6 points on this performance measure

• 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

• Environmental screening was done for the following projects;

Construction of water borne toilets at Boma ground signed by Environment officer on 27/8/2016,

Construction of 5 stance pit latrine at Kabalega PS signed by environment officer on 10/08/2016,

Installation of street solar lights at MC signed by environment officer on 17/07/2017,

Preparation of physical development plan for Masindi Municipality signed by Environment officer on 17/07/2017.

Construction of two classroom block at Kabalye settlement primary school signed by environment officer on 28 July 2017.

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

1

The MC integrated environmental and social management for following projects in contracts;

Construction of 5 stance VIP pit latrine at Masindi primary school .environmental safeguards included on site restoration, landscaping and drainage of waste water, construction of waterborne toilet at Boma grounds-environmental safeguards include. levelling, soak pit and Hedge.

• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1

1

No expected land issues. There was no proof of land issues that were viewed at the time of assessment.

		<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 	2	<p>There were environmental and social mitigation certification forms for the following;</p> <p>Construction of water borne toilets at Boma ground signed by environment officer on 30/5/2017,</p> <p>Construction of 5 stance pit latrine at Kabalega PS signed by environment officer on 8/05/2017,</p> <p>Installation of street solar lights at MC signed by environment officer on 12/06/2017</p>
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LGPA 2017/18

Educational Performance Measures

Masindi Municipal Council

(Vote Code: 774)

Score 84/100 (84%)

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 	4	Masindi Municipal Council has budgeted for a Head Teacher and 7 teachers per school as evidenced approved budget estimates FY 2017/18.
		<ul style="list-style-type: none"> Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4 	4	Masindi M/C has made the required deployments as evidenced by the 2016/17 staff list
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 	6	<p>Masindi M/C has filled all (100%) of the 366 positions in structure for primary schools.</p> <p>Verified the evidence by the MMC structure authorised by the P/S Ministry of Public Service in Circular No. ARC 135/306/01 dated 20/02/27</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	<ul style="list-style-type: none"> Masindi MC has substantively filled position of 1 inspector provided for by the wage bill as evidenced by the 2017/18 performance contract signed by the DEO
4	<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of Primary Teachers: score 2</p>	2	<ul style="list-style-type: none"> No recruitment plan in place because all positions of teachers are filled as evidenced by the FY 2018/17 performance contract
		<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of School Inspectors: score 2</p>	2	<ul style="list-style-type: none"> There is no recruitment plan needed since the position of the one inspector are substantively filled as evidenced by FY 2018/17 performance contract
5	<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department appraised school inspectors during the previous FY • 100% school inspectors: score 3</p>	3	<p>There is 1 Inspector of Schools in Masindi Municipality and he was duly appraised by the Municipal Education Officer.</p> <ul style="list-style-type: none"> Inspector of Schools: Personal File ref: MMC/CR/156. Appointed on 27/03/2017 as per DSC minute 34/2015 The Inspector was appraised on 01/07/2017. The Performance Plan was signed by the head of department and the Appraisal report (PS Form 5) was duly signed 1/07/2017 by the municipal Education Officer.

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

There are 27 substantively appointed Head Teachers in Masindi Municipality. All the 27 (100%) Head teachers were appraised (for calendar year 2016) by the Division heads, witnessed by the SMC Chairpersons. The Performance Plans/Agreements were duly endorsed by the Municipal Education Officer. A random sample of 5 files was taken and all the 5 files contained appraisal documents as indicated below:

1. CR/D/11292- Performance Agreement and report duly reviewed and signed by the Municipal education officer on the 19/12/2016

2. CR/D/11259- Performance Agreement and report duly reviewed and signed by the Municipal Education officer on the 7/12/2016

3. CR/D/11200- Performance Agreement and Report duly reviewed and signed by the Municipal Education officer on the 19/12/2016

4. CR/D/11291- Performance Agreement and Report duly reviewed and signed by the Municipal Education officer on the 13/12/2016

5. CR/D/11240- Performance Agreement and Report duly reviewed and signed by the Municipal Education officer on the 13/12/2016

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 • 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 	1	<p>THE Masindi MC received several circulars and guideline which include the following:</p> <ul style="list-style-type: none"> • Performance in Teaching Service by the P/S Ministry of Public Service on 18/11/16 • Unauthorised school charges by the P/S MOES on 15/02/17 • Provision of water to pupils at school by MOES 15/12/16 <p>There was no documentary evidence to show that MMEO had held any sensitisation meetings with H/teachers regarding any guidelines or circulars</p>
7	<p>The LG Education Department has effectively inspected all private and public primary schools</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all private and public primary schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> o 100% - score 12 o 90 to 99% - score 10 o 80 to 89% - score 8 o 70 to 79% - score 6 o 60 to 69% - score 3 o 50 to 59% score 1 o Below 50% score 0. 	12	<p>Masindi MC has made the requisite inspection for all (100%) private and public schools during 2016/17 . Verified the evidence from the Q1, Q2 Q3 and Q4 of 2016/17 inspection reports</p>

<p>LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4 	4	<p>The MMC Education department met and discussed inspection reports as evidenced in the minutes of departmental meetings on the following dates</p> <ul style="list-style-type: none"> • 15/07/17 • 20/06/17
	<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	<p>The MMEO duly submitted the inspection reports. Verified the evidence from the following acknowledgement notes from the Directorate of Education Standards (DES</p> <ul style="list-style-type: none"> • 22/09/16 for receipt of Q1 report • 09/01//17 for receipt of Q2 report • 7/04/17 for receipt of Q3 • 19/06/17 for receipt of Q4 report
	<ul style="list-style-type: none"> • Evidence that the inspection recommendations are followed-up: score 4 	4	<p>MMC EO appropriately responded to the inspection recommendations as evidenced in the minutes of the meeting of 25/07/17 which made the following resolutions</p> <ul style="list-style-type: none"> • Provided Technical Support to Private schools • Early child Development Frame work be used as the Curriculum for Nursery Children • Inspection of schools to be for all schools including private ones

9	The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES	<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	Data submitted by MM on government aided schools is consistent with EMIS report and OBT as evidenced below by data from the same sources: EMIS 29 Schools OBT 29 Schools
	Maximum 10 for this performance measure	Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> Enrolment data for all schools which is consistent with EMIS report and OBT: score 5 	0	Data submitted by MM on UPE enrollment is not consistent with EMIS report and OBT as evidenced below by data from the same sources EMIS ----14450 students OBT 13510 students

Assessment area: Governance, oversight, transparency and accountability

10	The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council	<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	Health, Education and Community-based Services Committee (HEC) is responsible for education as well as others. Evidence from the committee minutes were available to confirm that it met, prepared for presentation, discussion and approval of council education service delivery issues, including departmental priorities – budget, challenges, plans, reports, recommendations and updates (as seen in the committees minutes of the 10th/5/2017, 3rd/3/2017, 14th/12/2016 and 9th/11/2016). Even so, there was no evidence in the minutes' discussion of results from performance assessments, inspection and monitoring.
	Maximum 4 for this performance measure	<ul style="list-style-type: none"> Evidence that the education sector committee has presented issues that requires approval to Council: score 2 	2	Some minutes of council's deliberations indicated that representatives of HEC presented education sector issues to council for approval. This is clear from minutes of the 17th/11/2016, 1st/9/2016, 23rd/3/2017 as well as 25th and 31st/5/2017).

11	<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO)</p> <ul style="list-style-type: none"> • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0 	5	<p>All primary schools have functional SMS as evidenced by the minutes of the SMC meetings of the sample from the DEOs office</p> <p>Rwijere P/S of</p> <ul style="list-style-type: none"> • 11/12/17 • 20/11/17 • 17/07/17 • 26/07/17 • 03/03/17 <p>Kamurasi P/S</p> <ul style="list-style-type: none"> • 15/02/17 • 06/10/17 • 03/07/17
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 	0	<p>There was no evidence of any publications of UPE funds received at the notice boards nor on any of the individual schools visited during the assessment.</p>
Assessment area: Procurement and contract management				

13	<p>The LG Education department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • 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 	4	<p>The MC EO timely submitted the 2016/17 procurement requests to the DPU as evidenced by the procurement request forms submitted to the DPU on 01/09/16 .</p>
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14	<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<p>• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points</p>	3	<p>The LG education department timely certified and initiated payment for suppliers as evidenced from the sampled payment requests and vouchers;</p> <ul style="list-style-type: none"> • Request from Innokia group Ltd for construction of a 5 stance lined latrine at Kabalega P/S dated 28/4/2017 was recommended by DEO for payment on 31/5/2017 and paid on 1/6/2017 • Claim from Kamurungi Holdings Ltd for payment for completion of a 5 stance lined VIP latrine at Biizi P/S dated 21/6/2017 and recommended for payment by Principal education officer on 26/6/2017 and paid on 29/6/2017. • Claim for payment by Vick general Co. Ltd for supply of 3 seater desks to schools dated 3/5/2017 was forwarded by principal education officer on 11/5/2017 and paid on 22/5/2017. • Claim for payment of retention for supply of 83 seater desks, 30 office chairs and 30 tables to Masindi MC dated 8/11/2016 was recommended for payment on 8/11/2016 and paid on 9/11/2016. • Claim for payment of retention for construction of 5 stance lined latrine at Masindi Junior School dated 24/10/2016 by Kahora technical services Ltd recommended for payment on 9/11/2016 and paid on 9/11/2016.
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>According to the LG Planner's records and evidence from the Q4 Consolidated APR for the FY 2016/17, the education department submitted inputs to the planning unit for all 4 quarters for FY 2016/17 (i.e. Q1 - 5th/12/2016 Receipt No: 0147; Q2 –6th/2/2017 Receipt No: 0281; Q3 – 22nd/5/2017 Receipt No: 0737; and Q4 – 31st/7/2017 Receipt No: 0854), the submissions were often slow, hence the submission of the Q4 APR on the deadline date not before (meant to be submitted before 31st/7/2017).</p>
16	<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points o If all queries are not responded to score 0 	0	<p>The education department had internal audit queries in all the quarterly audit reports for FY 2016/17. 1st quarter audit queries were responded to in “responses to issues raised in internal audit report for 1st quarter FY 2016/17 report to LGPAC dated 20/2/2017”. Responses to 3rd quarter were dated 15/6/2017. For example LGPAC report for 3rd quarter shows that the audit query for UPE Grant Ugx 48,742,619 was accounted for and verified by the auditor. Fourth quarter had one audit query of UPE un accounted for of Ugx 1,414,825. This was not responded to.</p>

Assessment area: Social and environmental safeguards

17	<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc...: Score 2 	2	<p>The MMC ED office disseminated gender guidelines as evidenced in the report of the workshop of 23/03/17 to disseminate gender guidelines to senior women /men.</p>
		<ul style="list-style-type: none"> Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2 	0	<p>The was no evidence to show dissemination of guidelines on sanitation</p>

		<ul style="list-style-type: none"> • Evidence that the School Management Committee meet the guideline on gender composition: score 1 	1	<p>Masindi duly meet the guideline on gender composition of SMC as evidenced from the sample of the two schools visited namely:</p> <ul style="list-style-type: none"> • Masindi Public School 5/6 (Founding members) are women • Masindi Town Model Primary School 2/6 (Founding members are women)
18	<p>LG Education department has ensured that guidelines on environmental management are disseminated</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 3: 	3	<p>Guideline on environmental management were issued. This is evidenced circular of Guidance of Schools environment management compliance by the Town Clerk on 19/07/16</p>



LGPA 2017/18

Health Performance Measures

Masindi Municipal Council

(Vote Code: 774)

Score 87/100 (87%)

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 • 60 – 80% - score 3 • Less than 60% filled: score 0</p>	6	<p>The LG has filled 91% (65/71) of the approved staff for health facilities with a wage bill. This is verifiable in the OBT of the health department at the Municipal Council.</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>A recruitment plan signed on 24/05/2017 by the principal medical officer was submitted to HRM for the current FY. A copy is available at the office of the principal medical officer for verification.</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>There is no HC IV in the municipality. One HC III of Nyakitiibwa, offers some of the services that are supposed to be offered by an HC IV facility. The In-Charge (CR/D/10644 was appraised by the Municipal Health Educator on 16/08/2017. The Performance Plan was signed on 30/06/2017 while the Appraisal form PS Form 5 was duly endorsed by the Health Educator on 16/08/2017.</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>Health care workers have been equitably deployed in line with the list included in the OBT and staff deployed at the health facilities.</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	<p>This evidence was established. For example, the Municipal Council health department received guidelines for service delivery standards which were communicated to the lower level health facilities by the Principal Medical Officer on 7/7/2017 through a circular ref. HEA/357/1. Acknowledgement of receipt of these guidelines was attached.</p>
		<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	<p>This could not be verified by documentary evidence since minutes do not include items related to dissemination of the guidelines.</p>
6	<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3</p>	3	<p>This is not applicable. The Municipal Council has no Health Center IV for supervision by the municipal Council which serves as the HSD.</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>	3	<p>100% (6/6) of health facilities were supervised as confirmed by support supervision reports both the sampled health facilities and support supervision reports at the office of the principal medical officer.</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>	6	<p>All health facilities were supervised by the Municipal HSD. This can be verified at the two health facilities, Kibwona HCII and Kirasa HC II in the support supervision records.</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 • Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6 	4 6	<p>Support supervision reports were discussed and recommendations made for corrective actions during the previous FY. This is verifiable in the support supervision (red books) at the health facilities Kibwona and Kirasa.</p> <p>This evidence was established. For example, on 20/10/2016, it was recommended during a support supervision exercise that staff transfers be effected. This was followed up in a meeting held on 30/11/2017 in Min. 33/10/2017, with a list staff proposed for transfer included.</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: o List of health facilities which are consistent with both HMIS reports and OBT: score 10 	10	<p>This evidence was established. Consistency with HMIS reports for 2016/2017 for the 6 health facilities in the municipality through comparison with facilities in the OBT at the office of the Principal Health Officer.</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	<p>Health, Education and Community-based Services Committee (HEC) is responsible for health as well as others. Evidence from the committee minutes were available to confirm that it met, prepared for presentation, discussion and approval of council health service delivery issues, including departmental priorities – budget, challenges, plans, reports, recommendations and updates (as seen in the committees minutes of the 10th/5/2017, 3rd/3/2017, 14th/12/2016 and 9th/11/2016). Even so, there was no evidence in the minutes' for discussion of results from performance assessments, supervision and monitoring.</p>
		<ul style="list-style-type: none"> • Evidence that the health sector committee has presented issues that require approval to Council: score 2 	2	<p>Some minutes of council's deliberations indicated that representatives of HEC presented health sector issues to council for approval. This is clear from minutes of the 17th/11/2016, 1st/9/2016, 23rd/3/2017 as well as 25th and 31st/5/2017).</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"> • If 100% of randomly sampled facilities: score 5 • If 80-99% : score 3 • If 70-79%: : score 1 • If less than 70%: score 0 	5	<p>100% of health facilities sampled (Kibwana HC II and Kirasa HC II) were found to have functional HUMCs as verified by minutes at the health facilities and membership of the HUMCs at both health facilities. A back up list at the office of the Principal Medical Officer is also available for verification.</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"> • 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 	3	<p>The Municipal Health office has publicized PHC releases on the notice board. Specific releases for health facilities for Q1 and Q2 FY 2017/2018 were posted on the health facility notice boards.</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"> • Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2 	2	<p>A submission letter on 20/04/2017 forwarded to PDU on 24/04/2017 for planned procurements worth Ugx 9,190,000/=</p>
		<p>Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2</p>	2	<p>Since no procurement was planned. This indicator was not applicable for the municipal Council.</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"> • Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time: • 100% - score 8 • 70-99% – score 4 • Below 70% - score 0 	8	<p>A procurement plan for medical supplies for 2017/2018 was prepared by the Municipal Health Officer for all the 6 health facilities on 15/12/2016. The role of the municipal Medical Officer was to monitor stocks and advise on redistribution.</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"> • Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points 	0	<p>There were no payment requests and vouchers in the Health files. Most of the payment vouchers and requests were from the department for facilitation e.g. to attend workshops and seminars, monitoring, sensitisation and transport to Kampala among others. Therefore, it was not possible to assess them. The Accountant explained that Health department didn't get funding from the centre for capital developments in FY 2016/17</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"> 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 	4	<p>According to the LG Planner's records and evidence from the Q4 Consolidated APR for the FY 2016/17, while the health department submitted inputs to the planning unit for all 4 quarters for FY 2016/17 (i.e. Q1 - 5th/12/2016 Receipt No: 0147; Q2 – 6th/2/2017 Receipt No: 0281; Q3 – 22nd/5/2017 Receipt No: 0737; and Q4 – 31st/7/2017 Receipt No: 0854), the submissions were often slow, hence the submission of the Q4 APR on the deadline date not before (meant to be submitted before 31st/7/2017).</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>The Health department had internal audit queries in all the quarterly audit reports for FY 2016/17. 1st quarter audit queries were responded to in “responses to issues raised in internal audit report for 1st quarter FY 2016/17 report to LGPAC dated 20/2/2017”. Responses to 3rd quarter were dated 15/6/2017. For example LGPAC report for 3rd quarter shows that the audit query of Ugx 7,198,000 in the health department was responded to by making accountability and query was dropped. Fourth quarter internal audit report had outstanding audit queries of un accounted for funds amounting to Ugx 10,680,000.</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>	<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 HUMCs for the 6 health facilities in the municipal council meet the gender composition of at least 30% females. The list of HUMC members is available at both the health health facility and the municipal health office.</p>
	<p>Maximum 4 points</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>The LG has not issued these guidelines to the health facilities. At the time of the assessment it could not be established if these had been provided MOH.</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.	0	<p>The LG has not issued these guidelines to the lower level health facilities. At the time of assessment, it could not be confirmed whether the MOH had issued these to the LG.</p>
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