



## LGPA 2017/18

Accountability Requirements

Mbale District

(Vote Code: 536)

Assessment	Compliant	%
Yes	5	83%
No	1	17%

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	The LG submitted a final annual performance contract in time on 27/06/2017.	Yes
Assessment area: Supporting Documents for the Budget required as per the PFMA are submitted and available			
LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).	xxxxx	The LG submitted a Budget for FY 2017/18 and a Procurement Plan for FY 2017/18 to MoFPED as two separate documents on 27/06/2017 and 04/08/2017 respectively. Whereas the budget was submitted in time, the procurement plan was submitted after 31st July as a separate document.	No
Assessment area: Reporting: submission of annual and quarterly budget performance reports			
LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)	xxxxx	The LG submitted the annual performance report for FY 2016/17 on 28th July 2017.	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>The LG submitted all the quarterly budget performance reports for FY2016/17 as follows:</p> <p>Quarter 1 submitted on 28/10/2017</p> <p>Quarter 2 submitted on 02/03/2017</p> <p>Quarter 3 submitted on 11/05/2017</p> <p>Quarter 4 submitted on 28/07/2017</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 District made the submission on the 20th March 2017, 22nd March 2017 and 23rd March 2017 for first, second and third submissions respectively. Submission made by Principal Internal Auditor ref AUD/213.</p> <ul style="list-style-type: none"> <li>• Submission letter to the Internal Auditor General dated 20th March 2017.</li> </ul>	<p>Yes</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer</p>	<p>xxxxx</p>	<ul style="list-style-type: none"> <li>• The Auditor General's report for Mbale District Local Government for the year 2016/2017 was unqualified Audit opinion.</li> <li>• The Auditor General's report of December 2017 released in January 2018</li> </ul>	<p>Yes</p>



## **LGPA 2017/18**

Crosscutting Performance Measures

Mbale District

(Vote Code: 536)

Score 49/100 (49%)

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>	0	<p>There is an functional Physical Planning Committee in place that considers new investments composed of 15 members who are technical staff according to the attendance register for the meetings i.e. There are minutes of meetings that sat on; 31/05/17,8/08/17,21/08/17,17/10/17,12/12/17 etc however the LG doesn't have a valid physical structural plan in place and not all submitted plans are approved in time for example; From the registration book, Mr Chandede Alfred submitted a plan for construction of structures for Mt.Elgon School of Nursing on 31/01/2017 and approval was done on 08/08/2017 under MIN. No: 4/DPPC/08/2017, Sunset Education Ministries submitted a plan to construct a private Sunset Primary school on 16/10/2017 and approval done on 12/12/2017.etc which is after 28 days as stipulated in the physical planning guide lines.</p>
		<ul style="list-style-type: none"> <li>• All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2.</li> </ul>	0	<ul style="list-style-type: none"> <li>• The LG doesn't have a valid physical structural plan in place and also there is no single infrastructure investment that has an approved plan implying that there is no consistence with the Physical Plan.</li> </ul>

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

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

2

• According to the AWP for the FY 2017/18 and budget conference that was conducted on 23/11/16, from the report it was established that priorities for the FY 2017/18 are based on the outcomes of budget conference.

For example; the following priorities reflect in both the budget conference report and the AWP FY 2017/18 ;

- Completion of council building(LUkhobo)
- Fencing of the district headquarters
- Establishment of demonstration sites for for cassava, coffee, bananas, beans and maize.
- Refurbishment of container office space at Health centre IV.
- Construction of 2 5stance pit latrines for schools
- Construction of Budwale Gravity Flow Scheme (GFS).

		<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>According to the approved Annual work plan for FY 2017/18, it was established that the capital investments there in are derived from the approved five-year development plan.</p> <p>i.e. The following capital investments that appear in AWP are also reflecting in the LG 5 year Development plan FY 2015/16 – 2019/20 approved under MIN.CO26/05/2015;</p> <ul style="list-style-type: none"> <li>• Drilling of 9 deep boreholes in all sub counties</li> <li>• Construction of 4 classroom blocks at Namagumba and Bubenstye</li> <li>• Construction of 2 public pit latrines at Bumbobi and Namanyonyi sub counties.</li> <li>• Construction of 2 5stance pit latrines for Bushikori PS and Lwangori p/s. Construction of Budwale Gravity Flow Scheme (GFS).</li> <li>• Completion of council building(LUkhobo)</li> <li>• Fencing of the district headquarters</li> </ul> <p>Etc</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>All the project profiles have been developed and appear on chapter 7 of the approved 5 year Development plan from page 187 -220, there is also evidence that the project profiles were discussed in TPC during a meeting that sat 10/04/2017 under MIN.06/DTPC/10/04/2017.</p>
3	<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> <li>• Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum 1 point.</li> </ul>	1	<ul style="list-style-type: none"> <li>• The Annual statistical abstract, with gender dis aggregated data was compiled and presented to the DMC/TPC for discussion to support budget allocation and decision-making on 03/10/2016 under MIN.07/DMC/12/01/2016.</li> </ul>

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

There is 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 for example;

- Construction of Muruba HC II OPD appears on page 39 of AWP and page 84 of the budget.
- Construction of 15 stance pit latrines in Nauyo, Bunabubulo and Lwangoli primary schools appears on page 44 of AWP and page 21 of the budget.
- Routine maintenance of 267Kms of district roads appears on page 47 of AWP and page 23 of the budget. e.t.c



• 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

According to the LG annual performance report FY 2016/17 and the completion certificates for the investment projects, some of the sampled projects were NOT completed by end of FY; see completion dates below;

- 5 stance pit latrines at Nauyo P/S - completed on 13/06/2017,
- 5 stance pit latrines at Lwangoli p/s - completed on 31/03/2017
- 5 stance pit latrines at Bunabubulo p/s - completed on 04/01/2017
- Muruba HC II OPD - completed late on 2/10/2017
- Completion of Educ/planning building completed – 20/10/2017
- Renovation of Council hall completed on 20/07/2017
- 2 public latrines constructed at Bubyangu and Bungokho S/Cs completed 14/03/2017
- 1 GFS constructed in Budwale S/C completed 16/4/2017
- Construction of Nabumali Bridge on Buwalu – Nabumali road is not complete to date.

It is therefore evident that 6 out the 9 selected investment projects were completed by the end of the FY according to the work plan which is 66.6% performance.

5	<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects and assets during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2</li> </ul>	0	<p>According to the sampled projects below, the LG investment projects in the FY 2016/17 were not completed within approved budget – Max. 15% plus or minus of original budget since it performed at 83% for example;</p> <ul style="list-style-type: none"> <li>Construction of 15 stance pit latrines at Nauyo Lwangoli, Bunabubulo P/Ss performed at 42.8%</li> <li>Muruba HC II OPD construction at 97.2%</li> <li>Completion of Education and planning building and Renovation of Council hall at 95.15.</li> <li>Construction of Nabumali Bridge on Buwalu – Nabumali road at 100% though works not complete due to variation issues.</li> <li>Routine maintenance of 267Kms of district roads at 84.8%</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that the LG has budgeted and spent at least 80% of O&amp;M budget for infrastructure in the previous FY: score 2</li> </ul>	0	<p>From the Final accounts of FY 16/17, The LG budgeted for 1,039,239 and 96,025,966 for O&amp;M for vehicles and others and spent 747,000, 91,272,948 respectively under Administration and 45,880,000, 20,000,000 for civil and vehicle was budgeted whereas 11,777,000 and 2,203,328 was spent respectively under works. Which brings the overall performance to 65.1%</p>
Assessment area: Human Resource Management				
6	<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>Not all HoDs were appraised in the FY 2016/2017; for example the District Health Officer, the Head of Community Based Services, and Head of Finance and Administration.</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that the LG has filled all HoDs positions substantively: score 3</li> </ul>	0	<ul style="list-style-type: none"> <li>Not all positions of HoD were substantively filled in FY 2016/17; for example Head of Works and Transport (District Engineer) was in acting capacity. Currently there is a job advert with a deadline of 22nd January 2018 for filling the position substantively.</li> </ul>

7	<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>Evidence that 100 percent of staff submitted for recruitment have been considered: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>Submissions September 13th 2017; September 2016; May 2017 and DSC minutes for FY 2016/2017 namely 1st July 2016; 2nd and 3rd August 2016, 10th – 13th March 2017 and 19th April 2017, 24th April 2017, 25th May 2017, 16th June 2017 indicate that all submissions for recruitment were considered.</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that 100 percent of staff submitted for confirmation have been considered: score 1</li> </ul>	1	<ul style="list-style-type: none"> <li>Submissions September 13th 2017; September 2016; May 2017 and DSC minutes for FY 2016/2017 namely 1st July 2016; 2nd and 3rd August 2016, 10th – 13th March 2017 and 19th April 2017, 24th April 2017, 25th May 2017, 16th June 2017 indicate that all submissions for confirmation were considered.</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1</li> </ul>	0	<ul style="list-style-type: none"> <li>There is a case of an Information Assistant who did not turn up for Disciplinary hearing (fourth quarterly report of DSC April - June 2017 and Minute extract of the meeting of the DSC held on 16th June 2017).; there is no evidence of conclusive closure of the case.</li> </ul>
8	<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3</li> </ul>	0	<ul style="list-style-type: none"> <li>There are cases of staff who accessed the payroll after over two (2) months of assumption of office, for example Mukanza Joyce, Logose Alima, Mukhaya Doreen, Wamawungo Moses Enoch, Kisakye Sarah, Khaukha Andrew, Bisikwa Jacinta, and Wambuya Wilberforce.</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>There are cases of pensioners who accessed the pension payroll after over two (2) months of retirement; such as Mungoma Joseph, Musakhulu Mary, Asekenye Margaret Dorothy, Mutonyi Josephine Watsala, and Gibugonyi Wilson (retired April 2017 but not yet on payroll).</li> </ul>
Assessment area: Revenue Mobilization				

9	<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• If increase in OSR from previous FY but one to previous FY is more than 10% : score 4 points</li> <li>• If the increase is from 5 -10% : score 2 point</li> <li>• If the increase is less than 5% : score 0 points.</li> </ul>	0	<ul style="list-style-type: none"> <li>• The OSR declined from UGX.447, 067,129 in 2015/2016 to UGX. 349,999,438 in 2016/2017 with a shortfall of 21.72%. This is a shortfall which falls below the 5% range and therefore they score zero</li> <li>• Financial statements of 2015/2016 &amp; 2016/2017, Auditor General's Reports for 2015/2016 &amp; 2016/2017.</li> </ul>
10	<p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10% : then 2 points. If more than +/- 10% : zero points.</li> </ul>	2	<ul style="list-style-type: none"> <li>• The Local Revenue collection for 2016/2017 was UGX. 349,999,438 against the Budget of UGX. 358,650,000 representing 97.1% and this falls within the range of -5%. The source of information is the Audited Accounts for 2016/2017 and a copy of the Financial statements of the District.</li> </ul>
11	<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>• Remittances were made to the LLGs and this was mainly for Local Service Tax (LST) collected during the year.</li> <li>• This was evidenced from the payment vouchers of the Financial Yea for 2016/2017 as one remittance after the main collections done in March 2017, May 2017, December 2016 and November 2016.</li> <li>• The actual amount remitted of the 65% minimum for 2016/2017 was UGX. 62,783,737 to 21 LLGs (Town Councils and Sub Counties).</li> <li>• As well looked at the remittances for 2017/18 amounting to UGX. 59,272,750 effected in January 2018.</li> </ul>

		<ul style="list-style-type: none"> <li>Evidence that the LG is not using more than 20% of OSR on council activities: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>In the Financial Year 2016/2017, the district spent UGX. 102,447,100 on council emoluments and allowances of the UGX.447,067,129 Own Source Revenue (OSR) collected in 2015/2016 representing 22.8% which is beyond the 20% limit.</li> <li>Financial Statements for 2016/2017 for the two expenditure items of . council sittings and standing committees sittings</li> </ul>
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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"> <li>Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>Both the Senior Procurement Officer and Procurement Officer positions are available for Mbale DLG and substantively filled . Senior Procurement officer was appointed under minute 32/2012b/DSE Mbale and the Procurement Officer appointed under minute 021/2015c/DSE Mbale</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1</li> </ul>	1	<ul style="list-style-type: none"> <li>The DPU has separate files for TEC reports that are produced and submitted to the Contracts Committee and a file for the contracts committee showing the reports received from the TEC.</li> <li>All the reports submitted are reflected and can be traced in both files using an identification number such as Minute No. 80.0 Mbal/CC004/10/16 – 17, for the Construction of OPD HC II at Muruba in Nyondo Sub County, Mbale LDG.</li> </ul>

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

1

• According to the contracts committee Minute No. 299.0Mbal/CC0013/05/16-17, the contracts committee approved the Recommendation from the TEC to approve the evaluation report for the award of contract for the Renovation of Council Hall in Mbale District for the procurement reference No. Mbal 536/WRKS/16-17/00036

• On the other hand, Minute No. 300.0Mbal/CC001/05/16-17 shows the contracts committee Rejected a request by the TEC to approve the evaluation report for the award of contract for the Rehabilitation of Boreholes in Lukhonge S/C in Mbale districts, procurement reference No. Mbal 536/wrks/16-17/00041, because the evaluation report was not signed by all members of the evaluation committee.

<p>13</p>	<p>The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.</p> <p>Maximum 2 points on this performance measure.</p>	<p>a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2</p>	<p>2</p>	<ul style="list-style-type: none"> <li>• All the infrastructural projects in the approved Performance contract for the FY2017/18 are reflected in the procurement and disposal plan for the FY2017/18. For instance, page 18 of the LG performance contract FY 2017/18 shows the planned outputs for the FY 2017/18, which includes infrastructural projects in health. These includes Completion of Muruba HC III OPD; Construction of the Medical Waste Pit at the Health Centre IV; and construction of ambulance sheds at Bunampango, Budwale, Buwangwa and Naiku, are all appearing in the procurement and disposal plan for FY 2017/18 under Health Section.</li> <li>• All the 8 infrastructural projects that were planned in the FY 2016/17 were procured as per the plan, as evidenced by the quarterly procurement reports. Some of the procurements done includes; <ul style="list-style-type: none"> <li>- Construction of OPD at Muruba Health Centre with procurement no. MBAL/536/WRKS/16-17/00008;</li> <li>- Rehabilitation of 47 boreholes (Batch 1 &amp; 2) in various sub counties in Mbale DLG Procurement Reference No. MBAL 536/WRKS/16-17/0007</li> <li>- Construction of 2 stance pit latrine at Bubirabi and Wambewo RGCs (Ref. No. MBAL 536/WRKS/16-17/00009)</li> <li>- Construction of Budwale GFS (Phase II) (MBAL536/WRKS/16-17/00010)</li> <li>- Renovation of the Council Hall at the District Headquarters (MBAL536/WRKS/16-17/00036</li> <li>- Rehabilitation of Boreholes in Lukhonge S/C in Mbale district (MBAL 536/WRKS/16-17/00041</li> </ul> </li> </ul>
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<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p>	<ul style="list-style-type: none"> <li>For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>At the time of this assessment, all investments/ infrastructural projects for the current FY had bid documents prepared. E.g; Bidding Document for Selective Bidding 2017/18 of the Rehabilitation of Mooni Gravity Flow Scheme in Bunghoko, Mutoto S/C, Procurement Reference Number; MBAL536/WRKS/2017 – 2018/00012 ready by 23rd August 2017.</li> </ul>
<p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>Even though the LG has a contracts register for the previous FY, with all the contracts indicated, the register misses pertinent issues such as the project commencement date, completion date and Retention. The official explanation to this was that the contracts managers don't submit this information to the PDU</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	<ul style="list-style-type: none"> <li>In the LG, all procurement above below the value of UGX. 49m are procured through selective bidding process; bidding documents prepared and invitation for procurement displayed on the notice boards. These included; <ul style="list-style-type: none"> <li>Construction of 2 stance lined pit latrines with Urinals at Lwaboba and Namwiri RGCs (contract value = 16,082,094/=)</li> <li>Rehabilitation of Namnyonyi and Namiri GFCs (contract value = 10,384,000/=)</li> <li>Construction of two stance lined pit latrines at Bubirabi and Wambewo RGCs (contract value = 16,192,031/=).</li> </ul> </li> <li>All procurement above UGX. 49m are done through open bidding process and bidding documents prepared for them and advertised in the New Vision news papers of 28th August 2017. These included among others; <ul style="list-style-type: none"> <li>Rehabilitation of 47 boreholes (Batch 1&amp;2) in various sub counties (contract value = 81,558,060/=)</li> </ul> </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	<ul style="list-style-type: none"> <li>All works projects implemented and completed are certified with both interim and completion reports available in the projects files, which are in the offices of the contracts manager.</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2</li> </ul>	0	<p>All works under implementation in the current financial year have no site boards. The Assistant Eng. Officer in Charge of Building Section, revealed that due to financial challenges, the site boards were scrapped off the B.O.Q to minimise on the costs</p>

Assessment area: Financial management

16	<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4</li> </ul>	4	<ul style="list-style-type: none"> <li>The district makes up to date Bank Reconciliation Statements using the IFMS up to 5th January 2018</li> <li>The IFMS generated transaction afforded the evidence viewed on the computer screen on Monday the 16th January 2018. at 9:44 A.M.</li> </ul>
17	<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2.</li> </ul>	0	<ul style="list-style-type: none"> <li>At the end of the Financial Year 2016/2017, there were outstanding arrears amounting to UGX. 50,653,585 owed to Seven (7) service providers which were brought forward from years back from FY 1999/2000. No Domestic arrears accrued to the Financial Year 2015/2016. Again Over UGX. 72M domestic arrears arising during the Financial Year 2016/2017. This demonstrated that there were possible overdue payment over two months.</li> </ul>

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The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations

Maximum 6 points on this performance measure.

- Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.

3

- The Department has a head of Internal Auditor who is at the rank of Principal Internal Auditor appointed under DSC Minute 18/2007a.

- The Audit Department prepared and submitted four Audit Report as below;

The letters of submission are dated as follows:

- a) 28th October 2016 for First Quarter Report
- b) 31st January 2017 for Second Quarter Report
- c) 28th April 2017 for Third Quarter Report
- d) 21st July 2017 for Fourth quarter Report

- 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

- The LG provides this through the District PAC.

- Evidenced using District Public Accounts Committee minutes obtained from the from the Clerk to Council.

- There were submission of the Minutes and recommendations to the Speaker.

The letters of submission are dated as follows:

- The letters of submission were dated as below;

a) 22nd February 2017 for First Quarter Report

b) 23rd February 2017 for Second Quarter Report

c) 21st July 2017 for Third Quarter Report

		<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>	1	<ul style="list-style-type: none"> <li>Submission letters for the Internal Audit Reports was availed and examined</li> </ul> <p>There were copies to CAO and LGPAC. The minutes of LGPAC provides evidence that the Internal Audit Reports were reviewed.</p> <ul style="list-style-type: none"> <li>Submission letters for the Internal Audit Reports was availed and examined.</li> <li>LGPAC reviewed Internal Audit Reports on its sittings of the 1st March 2017, 3rd March 2017, 15th, 16th &amp; 21st June 2017.</li> </ul>
19	<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4</li> </ul>	0	<ul style="list-style-type: none"> <li>The LG maintained an Assets Register but not in the prescribed format in the Accounting Manual.</li> </ul>
20	<p>The LG has obtained an unqualified or qualified Audit opinion</p> <p>Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY:</p> <ul style="list-style-type: none"> <li>unqualified audit opinion: score 4</li> <li>Qualified: score 2</li> <li>Adverse/disclaimer: score 0</li> </ul>	4	<ul style="list-style-type: none"> <li>The district obtained an unqualified Audit Report for the Financial year 2016/2017. The Source of Information is the Auditor General's report of December 2017 obtained from the office of the Auditor General.</li> </ul>
Assessment area: Governance, oversight, transparency and accountability				

21	<p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p>	<p>Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2</p>	2	<p>There is evidence that the LG Council meets and discusses service delivery related issues i.e. During a council meeting that sat on 19/12/2016 under MIN.CO21/12/2016, council discussed all the committee reports where sector head reports had been discussed and adopted.</p> <p>Also during a council meeting that was held on 28/04/2017 under MIN.CO23/04/17 discussions were based on Youth livelihood and Operation wealth Creation issues.</p>
22	<p>The LG has responded to the feedback/complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 2.</li> </ul>	0	<p>LG has not designated a person to coordinate response to feed-back (grievance /complaints) though it is informally said that the D/CAO does the work but there is no documentation to this effect to ascertain.</p>
23	<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<p>Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2</p>	0	<ul style="list-style-type: none"> <li>The LG did not publish the LG Payroll and Pensioner Schedule on public notice boards.</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that the procurement plan and awarded contracts and amounts are published: score 1</li> </ul>	0	<p>The awarded contracts and amounts are published on the notice boards, however the procurement plan was not published.</p>
		<ul style="list-style-type: none"> <li>Evidence that the LG performance assessment results and implications, are published e.g. on the budget website for the previous year (from budget requirements): score 1.</li> </ul>	0	<p>N/A. The Central Government did not conduct the Annual Performance Assessment for LGs in 2016/17</p>

24	<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1</li> </ul>	1	<p>There is a delivery book in place i.e. In the Planning unit showing evidence that the LG communicated guidelines, circulars and policies issued by the national level to LLGs for example;</p> <ul style="list-style-type: none"> <li>• The budget first call circular for FY 2018/19</li> <li>• DDEG dissemination guidelines</li> <li>• Local Quality Assurance survey</li> <li>• Budget conference call circular etc.</li> </ul>
		<ul style="list-style-type: none"> <li>• Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc..) with the public to provide feed-back on status of activity implementation: score 1.</li> </ul>	1	<p>LG conducted discussions with the public to provide feed-back on status of activity implementation for example;</p> <ul style="list-style-type: none"> <li>• Under MIN 04/DTC/15/05/2017 during a meeting that sat on 15/05/17 that involved all the (SAS) senior Assistant secretaries, AWP implementation progress report was presented and discussed.</li> <li>• During a TPC meeting all LC III chairmen and the district executives, DDEG guidelines were explained to the peoples' representatives.</li> </ul>

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>	2	<ul style="list-style-type: none"> <li>• The GFP has notes used to guide the LG departments in mainstreaming gender into their activities through training workshops</li> </ul>
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		<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	<ul style="list-style-type: none"> <li>- The GFP has planned activities to strengthen women's roles in indicated in the gender sector work plan and budget for the FY2017/18.</li> <li>- All the women council activities were undertaken under the human resource budget which included conducting training of the lower local councils on managing women's IGAs.</li> <li>- Gender section received UGX. 2m, this was utilised for women's day celebrations.</li> <li>- Received UGX 1.7m per quarter and utilised 100% of all the disbursement though it was lower than the budgeted for.</li> </ul>
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>	0	<ul style="list-style-type: none"> <li>• There's no environmental screening that has been done for all projects, where required, implemented at the LG. According to the Environmental Officer, the office has been neglected and not involved in any of the activities at all stages.</li> <li>• The only EIA that was prepared was for the NUSAF 3 project, which was also not implemented.</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>The environment office is not involved in any stage of procurement process and there's thus no evidence that environmental issues are integrated into the bid documents, for the previous and the current financial years. According to the environment officer, Bids are prepared and implemented by the works department and certificate of completion issued without the involvement of the environment office.</p>

		<ul style="list-style-type: none"> <li>• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1</li> </ul>	0	<p>Except for one project, construction of a public pit latrine at Lwaboba Trading Centre, there's no evidence of land agreements or titles of proof of ownership of land on which the infrastructural investments are established. According to the district water engineer, the LG works on mutual understanding with the community to release land, though always land owners don't want to sign agreements in fear of fraudsters.</p>
		<ul style="list-style-type: none"> <li>• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2</li> </ul>	0	<p>All completed projects have no Environmental and Social Mitigation Certification Form in their files. Explanations from the project managers indicated that environmental officer hasn't been involved in all infrastructural projects at all. Even on the interim and project completion certificates, the environment officer has nowhere to sign or acknowledge project completion.</p>



## **LGPA 2017/18**

Educational Performance Measures

Mbale District

(Vote Code: 536)

Score 69/100 (69%)



No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Human Resource Management				
1	<p>The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4</li> <li>Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4</li> </ul>	4	<p>All schools have classes up to primary seven. According to performance contract, the budget suffices the current teaching force of 1632 this FY.</p> <p>Secondly, the available staff lists indicate that each school has more than 8</p> <p>Monthly returns of December 2017 and the staff lists according to OBT show that each school has a headteacher and 7 teachers. The gap of 53 teachers (30 teachers and 23 headteachers) is being addressed by the advert in place dated 20/12/2017 and closing on 22/01/2018</p>
2	<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0</li> </ul>	3	<p>Out of the staff ceiling of 1632 teachers, 53 teachers are yet to be recruited, thus, 96.6% filled. An advert dated 20/12/2017 with a closing date of 22/01/2018 was in place.</p>

3	<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6</li> </ul>	6	<p>Wage bill for 2 inspectors in post was provided for in FY 2016/2017 and FY 2017/2018.</p>
4	<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of Primary Teachers: score 2</p>	2	<p>Recruitment plan was submitted alongside the performance agreement with provisions of filling teachers position. An advert to this effect was in place dated 20/12/2017 and closing date is 22/01/2018.</p>
		<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of School Inspectors: score 2</p>	0	<p>Although the recruitment plan was submitted, there was no provision for inspectors positions yet there is need for one.</p>
5	<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department appraised school inspectors during the previous FY • 100% school inspectors: score 3</p>	3	<ul style="list-style-type: none"> <li>The one (1) school inspector during FY 2016/2017 was appraised.</li> </ul>
		<p>Evidence that the LG Education department appraised head teachers during the previous FY. • 90% - 100%: score 3 • 70% - 89%: score 2 • Below 70%: score 0</p>	0	<ul style="list-style-type: none"> <li>File containing appraisal forms for primary school head teachers had only 37 appraisals out of the expected 104; thus only 36% appraisals for primary school headteachers were conducted during FY 2016/2017.</li> </ul>

Assessment area: Monitoring and Inspection

6	<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1</li> <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>	<p>0</p> <p>2</p>	<p>There was only one circular sent to schools in the FY 2016/2017</p> <p>Minutes of meetings and workshops held on 06/10/2016; 10/02/2016; 28/10/2016; 24/10/2016; 07/07/2017; 16/06/2017; and 10/02/2017 were in place.</p>
7	<p>The LG Education Department has effectively inspected all private and public primary schools</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all private and public primary schools have been inspected at least once per term and reports produced: o 100% - score 12 o 90 to 99% - score 10 o 80 to 89% - score 8 o 70 to 79% - score 6 o 60 to 69% - score 3 o 50 to 59% score 1 o Below 50% score 0.</li> </ul>	<p>3</p>	<p>Out of the 152 schools (104 government, 48 private) for FY 2016/2017, in quarter 1 - 115; quarter 2 - 113; quarter 3 - 97; and quarter 4 - 87 schools respectively were inspected bringing in an average of 67.8% of schools inspected.</p>
8	<p>LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4</li> </ul>	<p>4</p>	<p>Departmental meeting minutes read and studied alongside available reports show recommendations made in view of findings from inspection visits.</p>

		<ul style="list-style-type: none"> <li>Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2</li> </ul>	0	<p>Inspection reports for quarters 1 &amp; 2 were submitted on 8/5/2017 to DES regional offices - Eastern, but DES headquarters has no information to this effect. Quarters 3 &amp; 4 inspection reports were not available. So no submission.</p> <p>DEO's monitoring reports for quarter 1 dated 30/09/2017 was submitted to MoES 31/10/2017. Quarter 3 report dated 20/04/2017 was not submitted. Quarters 2 &amp; 4 reports were not available.</p>
		<ul style="list-style-type: none"> <li>Evidence that the inspection recommendations are followed-up: score 4</li> </ul>	4	<p>Out of the reports available whose recommendations discussed, there were follow-up reports and evidence of visits to schools backed this view as there was evidence of communication from DEO's office to this effect.</p>
9	<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> <li>List of schools which are consistent with both EMIS reports and OBT: score 5</li> </ul> </li> </ul> <p>Evidence that the LG has submitted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and OBT: score 5</p>	5	<p>Basing on statistical forms, list of schools and performance contract at DEO's office against EMIS data received from MoES there was consistence in names and number of schools.</p> <p>Comparing EMIS data from MoES with data in statistical forms and OBT at district enrolment figures were the same.</p>
Assessment area: Governance, oversight, transparency and accountability				

10	<p>The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc...during the previous FY: score 2</li> </ul> <ul style="list-style-type: none"> <li>Evidence that the education sector committee has presented issues that requires approval to Council: score 2</li> </ul>	2	<p>According to committee minutes, education committee met and discussed service delivery issues for example Under MIN H&amp;E 19/03/17 during a committee meeting that sat on 14/03/2017, a complete progress report submitted by the DEO was discussed and adopted for further consideration in council.</p> <p>The education sector committee presented issues that require approval to Council,for example;</p> <p>During a committee meeting that sat on 9/11/2016 under MIN.E&amp;H.04/11/2016 the committee made the following recommendations for approval in council;</p> <ul style="list-style-type: none"> <li>That the community be sensitized on the effect of Imbalu on the learners.</li> <li>The abandoned construction works in schools be referred to works, production and natural resources committee.</li> <li>DEO should come up with list of schools without sitting facilities. E.t.c....</li> </ul>
11	<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0</p>	5	<p>Findings indicated that all SMCs for all schools are appointed on the same date as appointment letters in SMC files at schools and DEO's office indicated and expire in February 2019. Minutes of meetings in SMC files at district and at schools illustrate functionality of SMCs.</p>

12	<p>The LG has publicised all schools receiving non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3</li> </ul>	0	<p>Both notice boards at CAO's and DEO's offices had no information to this effect pinned up.</p>
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Assessment area: Procurement and contract management

13	<p>The LG Education department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30: score 4</li> </ul>	4	<p>The sector requests and annual work plan were in place with time schedules for execution attached.</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>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	3	<ul style="list-style-type: none"> <li>• The Department made timely certification and approval of payments once requisitions were raised. The examined payments had certification time ranging from one to Twelve days). The source of information was the payments vouchers and other documents for Education department. The examined documents included payments for; Departmental Vehicle, Desks for Primary schools, Toilet Stances for Primary Schools planned for the financial year 2016/2017.</li> </ul>
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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>The Education sector didn't acknowledge submission of its annual performance report for FY 2016/17 to ascertain timely submission to the planner.</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 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</li> </ul>	0	<ul style="list-style-type: none"> <li>There were two (2) Audit queries on lacking accountability for UPE funds, Inspectors did not account for first and second quarter Inspection activities with no inspection reports.</li> <li>There were no formal submissions to the Internal Audit on the status of the implementation of all the Audit findings in the department.</li> </ul>

Assessment area: Social and environmental safeguards

17	<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p>	<ul style="list-style-type: none"> <li>Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc...: Score 2</li> </ul>	2	<p>In collaboration with gender officer, NGOs and CBOs under MOU signed with the district, trained both senior women and senior men teachers and issued guidelines.</p>
	<p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2</li> </ul>	2	<p>Basing on reports, programmes and minutes of workshops of SEE MINISTRIES (UG.), WISE CHOICE and HUNGER PROJECT, trainings were conducted to this effect.</p>
		<ul style="list-style-type: none"> <li>Evidence that the School Management Committee meet the guideline on gender composition: score 1</li> </ul>	1	<p>According to appointment letters of SMC members, minutes of meetings of the committees and attendance lists, each school committee had not less than 3 women members.</p>

18	<p>LG Education department has ensured that guidelines on environmental management are disseminated</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 3:</li> </ul>	3	<p>Minutes of meetings with headteachers studied, issues of environment were discussed and guidelines on environment in schools explained.</p> <p>An Integrated Territorial Climate Plan (2014 - 2029) was developed in September 2013 with support from UNDP to guide schools on environment management.</p>
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## **LGPA 2017/18**

Health Performance Measures

Mbale District

(Vote Code: 536)

Score 41/100 (41%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Human resource planning and management				
1	<p>LG has substantively recruited primary health workers with a wage bill provision from PHC wage</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that LG has filled the structure for primary health workers with a wage bill provision from PHC wage for the current FY • More than 80% filled: score 6 points, • 60 – 80% - score 3 • Less than 60% filled: score 0</p>	6	<ul style="list-style-type: none"> <li>• There is evidence of effort to recruit primary health workers – Mbale district service commission Vacancies: External advert 001/2017</li> <li>• Salary budget analysis as at 21st December 2017 revealed that of the approved PHC wage bill of UGX 3,567,882,817 for 2017/1, UGX 1,783,941,408 had been released for quarters 1 and 2. Of this UGX 1,771,037,614 had been spent. This is evidence that 99% of primary health workers with a wage bill provision from PHC wage have been filled.</li> </ul>
2	<p>The LG Health department has submitted a comprehensive recruitment plan to the HRM department</p> <p>Maximum 4 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers: score 4</p>	4	<ul style="list-style-type: none"> <li>• Review of the performance contract and the corresponding recruitment plan 2017/2018 revealed that the vacant positions of health worker have been included in the staff recruitment plan that is in the performance contract for the FY 2017/18</li> </ul>

3	<p>The LG Health department has ensured that performance appraisal for health facility in charge is conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the health facility in-charge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0</p>	0	<ul style="list-style-type: none"> <li>• There is no evidence on file that the two (2) In-charges of Grade IV HCs were appraised during FY 2016/2017.</li> </ul>
4	<p>The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4</li> </ul>	0	<ul style="list-style-type: none"> <li>• Visited 4 health facilities, but was only able to compare the health worker lists submitted with the budget for the current FY 2017/18 with the displayed duty roaster at 3 of the health facilities (Nakaloke HC III, Bufumbo HC IV and Jewa HC III). Whereas the majority of health workers were actually deployed in the health facilities indicated on the list submitted with the budget, there were a few that were not deployed as indicated due to retirements and transfers to other health facilities</li> </ul>

Assessment area: Monitoring and Supervision

The DHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities

Maximum 6 for this performance measure

• Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3

0

• There was no evidence provided (No communication letters) that the DHO communicated the following guidelines issued by the national level during the FY 2016/17

1. PHC grants guidelines 2016/17

2. MoH guidelines for eye care – October 2016

3. Uganda Clinical Guidelines – 2016

4. Essential Medicines & Health Supplies List – 2016

5. MoH Resettlement Policy Framework – 2016

6. Health Sector Quality Improvement Framework and Strategic Plan 2015/16 – 2019/20, June 2016

• In the 3 health facilities visited (Nakaloke HC III, Bufumbo HC IV and Jewa HC III) of all guidelines above issued by the national level only the following guidelines were found:

1. Essential Medicines & Health Supplies List – 2016

2. Uganda Clinical Guidelines – 2016

• 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

• There were only 2 signed minutes for 2 DHT meetings health during the FY 2016/2017, One was held on the 14th February 2017 and another on the 13th June 2017. In both these minutes there was no evidence that the DHO held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level

6	<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3</p>	3	<ul style="list-style-type: none"> <li>• There was evidence (Quarterly Integrated support supervision reports) for the year 2016/2017. In all 4 quarterly report Bufumbo HC IV and Busiu HC IV were provided with support supervision</li> <li>• There is no district hospital in Mbale district</li> </ul>
		<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>	1	<ul style="list-style-type: none"> <li>• A review of all 4 quarterly Integrated support supervision reports for the year 2016/2017 conducted by the DHT revealed that an estimated 60% - 79% of health facilities were provided with support supervision during the FY 2016/17</li> <li>• Review of facility records was not possible due to time constraints</li> </ul>
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>• There was no evidence both at the district and Health Sub District (HSD) that lower level health facilities had been supervised by HSD and reports produced.</li> </ul> <ol style="list-style-type: none"> <li>1. The DHOs office did not have any copy of a support supervision report for the FY 2016/17 from the 2 HSDs (Bufumbo HC IV and Busiu HC IV)</li> <li>2. During the facility visit to Bufumbo HC IV there was only one HSD support supervision report, that was for quarter 2 of FY 2016/17</li> <li>3. At Bufumbo HC IV there was only one documented HSD meeting held on the 29th October 2016 and the corresponding minutes had no mention of support supervision.</li> </ol>

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> <ul style="list-style-type: none"> <li>• Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6</li> </ul>	<p>0</p> <p>0</p>	<ul style="list-style-type: none"> <li>• There were no HSD meeting reports at the district and at Bufumbo HC IV there were only one documented HSD meeting held on the 29th October 2016 and the corresponding minutes have no mention of support supervision reports.</li> </ul> <ul style="list-style-type: none"> <li>• The DHOs office did not have any copy of a support supervision report for the FY 2016/17 from the 2 HSDs (Bufumbo HC IV and Busiu HC IV)</li> <li>• At Bufumbo HC IV there were only one documented HSD meeting held on the 29th October 2016 and the corresponding minutes have no mention of support supervision or resulting recommendations.</li> </ul>
9	<p>The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has submitted accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports and OBT: score 10</li> </ul>	<p>10</p>	<ul style="list-style-type: none"> <li>• There are a total of 38 health facilities (both Government and NGO) on the OBT list. These are consistent with the list of facilities reporting and on the HMIS list provided from MoH</li> <li>• The HMIS list provided from MoH is yet to separate from Mbale district the list of health facilities that are now supported by the town council</li> </ul>
<p>Assessment area: Governance, oversight, transparency and accountability</p>				

10

The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council

Maximum 4 for this performance measure

- 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

The council committee responsible for health met and discussed service delivery issues for example Under MIN H&E 04/11/2016 during a committee meeting that sat on 09/11/2016, a complete progress report submitted by the DHO was discussed and adopted for further consideration in council.

- Evidence that the health sector committee has presented issues that require approval to Council: score 2

2

The health sector committee presented issues that require approval to Council,for example;

During a committee meeting that sat on 9/11/2016 under MIN.E&H.04/11/2016 the committee made the following recommendations for approval in council;

- That the committee meets all the Health workers and teachers at constituency level at the HC IVs to explain why they are not working.

- That the sector report and committee monitoring report be merged to forge a way forward

- That the composition of standing committees be reviewed as some committees have many members e.t.c.

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>	1	<ul style="list-style-type: none"> <li>• Visited 4 health facilities (Nakaloke HC III, Nankusi HC II, Bufumbo HC IV and Jewa HC III). I was only able to review Health Unit Management Committees files/counter books FOR HUMC meeting minutes at 3 of the health facilities (Nakaloke HC III, Bufumbo HC IV and Jewa HC III). These had held the 4 mandatory meetings during FY 2016/17</li> <li>• Nankusi HC II was closed by 10.30 am when I arrived there.</li> </ul> <p>This implies that 3 out of 4 health facilities (75%) had functional HUMCS</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>	0	<ul style="list-style-type: none"> <li>• There was no evidence that Mbale district had publicised all health facilities receiving PHC non-wage recurrent grants. All public notice boards at the district headquarters, DHOs office and at 3 of the health facilities visited had no posting of all health facilities receiving PHC non-wage recurrent grants</li> </ul>
Assessment area: Procurement and contract management				
13	<p>The LG Health department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>• There was no evidence (submission letters from DHO to DPU) that the DHO had submitted the 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 FY 2016/17.</li> </ul>
		<p>Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2</p>	0	<ul style="list-style-type: none"> <li>• There was No copy of Form PP5 that the health department had submitted to the PDU by the 1st Quarter of 2017/18</li> </ul>



14	<p>The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time:</li> <li>• 100% - score 8</li> <li>• 70-99% – score 4</li> <li>• Below 70% - score 0</li> </ul>	8	<ul style="list-style-type: none"> <li>• There was evidence from the NMS (a fully signed 2016/17 Procurement Plan by the DHO) that all health facilities on the list in the performance contract submitted medicines and health supplies procurement plans</li> <li>• From the district I was also able to review files of receipts for the period 2016/17 from NMS</li> </ul>
15	<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 2 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points</li> </ul>	2	<ul style="list-style-type: none"> <li>• There was evidence that the Vote Controller certified and initiated payments on time. This was evidenced from the funds requisition forms examined for the year 2016/2017 with a time ranging from one to four days in the department. Among the payments for service providers examined were those for Fuel payments during the Financial year 2016/2017</li> </ul>
Assessment area: Financial management and reporting				
16	<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4</li> </ul>	0	<p>There was no acknowledgement for receipt of the health sector annual performance report for FY 2016/17 in the planning unit and therefore could not establish timely submission of the same.</p>

17	<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0</p>	0	<ul style="list-style-type: none"> <li>• There were three Audit Queries for the department which were on unaccounted for funds, poor contracts management because there were no updated contract registers maintained, lack of supporting documents for fuel supplied to the department in the third quarter..</li> <li>• There were no formal submissions to the Internal Audit on the status of the implementation of all the Audit findings in the department.</li> </ul>
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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>	2	<ul style="list-style-type: none"> <li>• From the office of the DHO, I was given a file of list of Health Unit Management Committee (HUMC) members of all health facilities. From a review sample of 10 health facilities HUMC list I was able to establish that all met the gender composition as per guidelines (i.e. more than two females on the HUMC).</li> </ul>
		<ul style="list-style-type: none"> <li>• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>• Visited 4 health facilities (Nakaloke HC III, Nankusi HC II, Bufumbo HC IV and Jewa HC III). I was only able to find toilets facilities separated for men and women only in Bufumbo HC IV.</li> <li>• Toilet facilities in Nakaloke HC III, Nankusi HC II and Jewa HC III had no separate toilet facilities for men and women. Discussions with the health facility in-charge revealed that the 2 toilets are instead used as “staff” and “patients”</li> </ul>

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>	<p>0</p> <ul style="list-style-type: none"> <li>• Visited 4 health facilities (Nakaloke HC III, Nankusi HC II, Bufumbo HC IV and Jewa HC III). I only found guidelines on the segregation of medical waste at Bufumbo HC IV – These were pinned on to the wall in the labour ward.</li> <li>• In all 3 facilities I did not find guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal</li> <li>• Nankusi HC II was closed by 10.30 am when I arrived there</li> </ul>
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## **LGPA 2017/18**

Water & Environment Performance Measures

Mbale District

(Vote Code: 536)

Score 13/100 (13%)

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>	0	<p>The District did not target sub counties with safe water coverage below the district as evidenced in approved annual work plan for financial year 2017/18 dated 12th July 2017. District coverage is at 62.19%. In Budwale s/c the safe water coverage is at 93% which is way above the district's and yet they planned for phase 3 of Budwale GFS construction. Two sub counties which are below district safe water coverage were not considered at all and these are Bufumbo/Bubyangu (water coverage is at 39.81%) and Namanyonyi at 59.02%.</p>

2	<p>The LG Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15</li> </ul>	0	<p>The District did not implement in sub counties with safe water coverage below the district as evidenced in approved annual work plan for financial year 2016/17 dated 14th July 2016.</p> <p>The District safe water coverage is at 62.19% according to the district annual report for fy 2016/17 dated 12th July 2017 and at 66.58% according to annual plan fy 2016/17. Yet the district implemented in a sub county which has safe water coverage way above the district's and did not construct any water source in subcounties with coverage below the district.</p> <p>An example is Budwale subcounty with safe water coverage at 99% as indicated in the plan and 93.07% as indicated in the annual report 2016/17. The district provided 18 tapstands to this subcounty under Phase two of Budwale GFS.</p> <p>Two sub counties which are below district safe water coverage Bufumbo/Bubyangu (water coverage is at 39.81%) and Nakaloke is at 32.74% were not targeted.</p>
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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>	0	<p>There were no monitoring plans in place for the project investments.</p> <p>Specific monthly monitoring and supervision reports for project investments in the sector were not available.</p> <p>Although some reports were presented but they were for cases where communities would report to the district.</p>
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4	<p>The LG Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <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	<p>For the current financial year no lists of water facilities submitted yet. Drilling not yet done. Rehabilitation is on going. GFS construction the contracting process not yet finalised.</p> <p>However, information in the district (as per 1st quarter report and the annual plan 2017/18 )on administrative units specifically subcounties does not match that at MWE MIS. District units are combined and names not consistent e.g. Wanale/Budwale , Bufumbo/Bubyangu , Busoba Nyondo, among others. The safe water coverage differs from MIS from MWE and District for the different sub counties.</p>
Assessment area: Procurement and contract management				
5	<p>The LG Water department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4</p>	4	<p>All requisitions from the District Water Office cover all the planned investments. These were prepared by the DWO on 28th July 2017 and approval for funding by CAO was made on 8th August 2017. This was on time.</p>

<p>The DWO has appointed Contract Manager and has effectively managed the WSS contracts</p>	<ul style="list-style-type: none"> <li>• If the DWO prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2</li> </ul>	0	<p>No evidence of letter appointing a Project Manager for any contract.. No contract management plan in place. Monthly field visits are done but not against a plan. No site meetings held with contractor as evidenced by lack of site meeting minutes.</p>
<p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• If water and sanitation facilities constructed as per design(s): score 2</li> </ul>	0	<p>No work has been completed as yet. Works have just started.</p> <p>Rehab of 16 bhs in various s/c Ref MBAL536/WRKS/17-18/00011 by M/S Biramin Technical Services Ltd. Box 95 Mbale ongoing to Start 4th December 2017 end 4th January 2018. But works on going Value of the work is UGX 17,953,700/=</p> <p>Construction of 2 Stance Lined Pit Latrines with Urinals in Lwaboba and Namwani RGCs is ongoing. The Contractor M/S Kabwangasi General Traders Lts. P.O Box 1414, Mbale Contract Ref: MBAL 536/WRKS/17-18/00009 . Visited one at Namwani RGC completion date 2nd March 2018. Value is UGX 16,082,094/=. They were two stance but locked</p> <p>One contract Ref: MBAL 536/WRKS/17-18/00010 for siting, drilling, casting and installation of 19 boreholes was signed but contractor M/S klr (u) Ltd , P.OBOX 32370, Kampala has not yet reported to work.</p> <p>Rehabilitation of Mooni GFSFy 2017/2018 Ref MBAL.536/WRKS/17-18/00012 By M/S Buyobo General Traders Ltd. Box 97 Mbale. Visited some rehabilitation: Value of work is UGX 19,776,800/=. Works still ongoing.</p> <p>The contract for Third phase of Budwale GFS has not been signed because the contractor is yet to submit Performance Bond</p>



		<ul style="list-style-type: none"> <li>• If contractor handed over all completed WSS facilities: score 2</li> </ul>	0	For the current financial year no works have been completed as yet as detailed above. So no handover as yet.
		<ul style="list-style-type: none"> <li>• If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2</li> </ul>	0	For the current financial year no works have been completed as yet as detailed above.
7	<ul style="list-style-type: none"> <li>• Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	3	<ul style="list-style-type: none"> <li>• There was evidence in the payments requisitioned examined that the Vote Controller (DWO) certified and initiated payments on time (ranging between one day and ten days). The source of this information were the payment vouchers examined.</li> </ul>
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	There was no acknowledgement of receipt for the water sector annual performance report for FY 2016/17 in the planning unit to ascertain timeliness in submission of the same.

9	<p>LG Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 5 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0</li> </ul>	0	<ul style="list-style-type: none"> <li>The department had four (4) queries on accountability, contract management, delays in the certification of the work</li> <li>The District Water Officer was queried for lack of supporting documents for activities in the department such as Inspection reports and receipts for Fuel in the department.</li> <li>There were no formal submissions to the Internal Audit on the status of the implementation of all the Audit findings in the department.</li> </ul>
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Assessment area: Governance, oversight, transparency and accountability

10	<p>The LG committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3</li> </ul>	3	<p>There is evidence that the council committee responsible for water met and discussed service delivery issues for example Under MIN.WPN.22/07/17 during a committee meeting that sat on 18/05/2017, a water sector progress report submitted by the DWO was discussed and adopted for further consideration in council.</p>
		<ul style="list-style-type: none"> <li>Evidence that the water sector committee has presented issues that require approval to Council: score 3</li> </ul>	3	<p>The water sector committee presented issues that require approval to Council,for example;</p> <p>During a committee meeting that sat on 04/11/2016 under MIN.WPN.05/11/16, the committee made the following recommendations for approval in council;</p> <ul style="list-style-type: none"> <li>The community should pay user fees to use for minor repairs.</li> <li>That the politicians be involved in sensitizing communities to pay user fees.</li> </ul>

11	The LG Water department has shared information widely to the public to enhance transparency	<ul style="list-style-type: none"> <li>The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2</li> </ul>	0	The AWP, budget and the Water Development grant releases and expenditures were not displayed on the district notice boards as per the PPDA Act.
	Maximum 6 points for this performance measure	<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	<p>The visited facilities were not labelled. These included:</p> <ol style="list-style-type: none"> <li>A rehabilitated tap stand at Mooni Primary School .</li> <li>Namwani RGC Pit latrine in Bukhonde s/c</li> </ol>
		<ul style="list-style-type: none"> <li>Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2</li> </ul>	0	Whereas the LG notice boards at the PDU bore information in relation to procurement activities i.e. Invitation to bids and Evaluation results for procurements in other sectors, at the time of assessment there was no display of Information on water sector tenders and contract awards on the district notice boards
12	Participation of communities in WSS programmes	<ul style="list-style-type: none"> <li>If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1</li> </ul>	0	Only one community , of Manyoni lower village applied for facility and paid for it on 7th March 2016. For the other planned water facilities no application letters seen and no cccc made. The District during exit meeting attended by the District Chairperson and Heads of Departments and Chaired by CAO also acknowledged that community Contribution towards Capital Cost is a challenge in the district.
	Maximum 3 points for this performance measure	<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	For the sampled water sources visited, works are not yet complete. There were no functional WSC.
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>0</p>	<p>No screening was done for any project. No EIA done for projects even for the planned Gravity Flow Scheme of Budwala which has been implemented in phases. Hence no reports available.</p> <p>District Environment Office not involved in the works.</p> <p>Since no EIAs carried out on any project so nothing to follow up.</p> <p>The contracts sampled did not have a clause on Environment protection.</p> <p>Sampled contracts included:</p> <ul style="list-style-type: none"> <li>Ref: MBAL 536/WRKS/17-18/00010 for siting, drilling, casting and installation of 19 boreholes by M/S klr (u) Ltd , P.OBOX 32370, Kampala.</li> <li>Ref. MBAL.536/WRKS/17-18/00012 Rehabilitation of Mooni GFS By M/S Buyobo General Traders Ltd. Box 97 Mbale. Visited some rehabilitation: 19,776,800</li> <li>Ref: MBAL 536/WRKS/16-17/00010 for construction of Budwale GFS (Phase II) by M/S BALI Technical Services ltd Box24756 Kampala. Contract valued at UGX 356,003,404/=</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>	<p>The sample of water facilities visited were rehabilitated and did not have WSC in place as yet. The software reports for the 1st quarter and draft report for second quarter did not have information on WSC with 50% representation.</p>

15	<p>Gender- and special-needs sensitive sanitation facilities in public places/RGCs.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3</li> </ul>	0	<p>For construction of Pit latrines one site out of the planned two was visited at Namwani RGC in Bukhonde subcounty. Completion date of contract is 2nd March 2018. Value of the contract is UGX16,082,094/=. The Latrine is a two stance Latrine. At the time of visit it was locked. For this particular one there was no provision for PWDs because it was not in the plan</p>
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