



## LGPA 2017/18

Accountability Requirements

Nakasongola District

(Vote Code: 544)

Assessment	Compliant	%
Yes	3	50%
No	3	50%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Assessment area: Annual performance contract			
LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.	xxx	<ul style="list-style-type: none"> <li>The Final Performance Contract for the FY 2017/18 was submitted to MoFPED 13th/7/2017 while the Draft had been submitted on 5/6/2017.</li> </ul>	No
Assessment area: Supporting Documents for the Budget required as per the PFMA are submitted and available			
LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).	xxxxx	<ul style="list-style-type: none"> <li>The Budget for FY 2017/18 including a Procurement plan was submitted on 5/6/2017 .</li> </ul>	Yes
Assessment area: Reporting: submission of annual and quarterly budget performance reports			
LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)	xxxxxx	<ul style="list-style-type: none"> <li>The Budget Performance Report for FY 2016/17 was submitted on 4/8/2017 which is past the due date.</li> </ul>	No
LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)	xxxxxxx	<ul style="list-style-type: none"> <li>There was evidence of submission of all the 4 quarterly reports. However the Quarter 4 report was submitted on 4/8/2017 past the due date. Quarter I report was submitted on 5/12/2016, quarter II on 9/3/2017 and quarter III on 26/5/2017.</li> </ul>	No
Assessment area: Audit			

<p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous financial year by April 30 (PFMA s. 11 2g). This statement includes actions against all findings where the Auditor General recommended the Accounting Officer to take action (PFMA Act 2015; Local Governments Financial and Accounting Regulations 2007; The Local Governments Act, Cap 243).</p>	<p>xxxxxx</p>	<p>Nakasongola provided and submitted information to the PST/ST on the of implementation of Internal Auditor General and Auditor General findings for the financial year 2016/2017 and 2015/16 respectively in one letter dated 29th March 2017 and was received by the Internal Auditor General's office on 3rd April 2017. This was before the deadline of 31st April, 2017.</p> <p>All the 8 findings in the internal audit report for the FY 2016/17 and 9 issues under the Auditor General's report of FY 2015/16 were reported on.</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>The audit opinion on the Financial statements of Nakasongola District for the FY ended June 2016 was not adverse or disclaimed. The audit opinion was, in fact, unqualified.</p>	<p>Yes</p>



## **LGPA 2017/18**

Crosscutting Performance Measures

Nakasongola District

(Vote Code: 544)

Score 63/100 (63%)

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> <p>• All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2.</p>	<p>0</p> <p>0</p>	<ul style="list-style-type: none"> <li>• Physical planning committee was constituted and was said to have met only once in quarter IV of FY 2016/17. However, no minutes were available at time of this APA to confirm this.</li> <li>• No evidence available of committee considering new investments.</li> <li>• Although the relevant sector specialists such as DHO /DHI and DE had reviewed and signed/ cleared 5 plans sampled within 28 days these plans had not been considered by the Physical Planning Committee</li> </ul> <ul style="list-style-type: none"> <li>• There was no evidence of District physical plan .</li> <li>• Out of the 3 Town Councils only Migeera TC has a running structural plan (2014-2024), while the draft plan for Nakasongola Town Council was expiring before completion due to financial constraints to meet associated consultancy fees and Kakooge TC had only commenced the process of drawing a plan.</li> <li>• Though the relevant sector specialists such as DHO /DHI and DE had reviewed and signed/ cleared 5 plans sampled within 28 days these plans had not been considered by the Physical Planning Committee</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

- Report of Budget Conference held on 18/10/2016 seen identifying some of the priority projects including:
  - construction of latrines in 'most needy' primary schools: not named in budget conference but listed on page 27 of AWP
  - provision of desks to primary schools: Nabwita, Irimba and Nayikanga PS listed on pg. 27 of AWP
  - Classroom construction: detailed on pg. 28 of AWP to cover Wabinyonyi Seed Secondary school
  - Maintenance of roads detailed on pg.31 of AWP
  - Construction of water facilities and latrines (in rural growth centres) listed on pg. 34-35 of AWP

• 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

- Construction of water facilities and latrines (in rural growth centres) listed on pg. 34-35 of AWP is derived to pg. 116 of the DDP
- Classroom and latrine construction: detailed on pg. 27-28 of AWP to cover Wabinyonyi Seed Secondary school is broadly derived from pg. 114 of the DDP under project/program area 'expansion of school infrastructure and facilities'
- Maintenance of roads detailed on pg.31 of AWP is derived from pg. 114-115 of the DDP

• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1.

1

Profiles discussed by DTPC under departmental work plans in meeting of 30/11/2016 under Min. 99/11/DTPC/2017.

Profiles for FY 2017/18 seen:

- Procurement and installation of solar fridge for vaccine storage code 544/supplies/20118 planned budget 8,317,000=
- Improvement of sanitation and aeration at the Framers training hall code 544/works/2017-18 planned budget 37,797,083=
- Fencing of Ice plant code 544/Wrks/2017-18 planned budget 8,000,000
- Acquisition of an out-board engine code 544/Supplies/2017-18 planned budget 12,500,000=
- Clean Cassava seed multiplication code 544/Supplies/2017-18 planned budget 10,000,000=
- Procurement of fruit fly trap code 544/Supplies/2017-18 planned budget 3,476,652=
- Tsetse fly control code 544/Supplies/2017-18 planned budget 3,500,000
- Renovation of 3 classroom block (Kyakadoko PS) code 05-51-231002 planned budget 23,000,000
- Construction of a one block 5-stance lined VIP code 05-51-231002 planned budget 19,590,000=
- Borehole drilling, Borehole rehabilitation, Latrine construction code 04/45/312104 planned budget 424,190,752=

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>	0	<ul style="list-style-type: none"> <li>Abstract was not seen, but was said to have been developed with support of UBOS from May 30-June 2, 2017 . However it was not available at time of APA 2018. Copy said to have been retained by UBOS.</li> </ul>
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"> <li>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</li> </ul>	2	<ul style="list-style-type: none"> <li>Construction of Irrigation system in Kasambya derived from pg .15 / Crop sub – sector of the AWP 2016/17</li> <li>Construction of valley tanks derived from pg. 15/Livestock sub-sector of the AWP 2016/17</li> <li>Renovation of fish handling facility derived from pg. 15/ Fisheries sub-sector – Agricultural supplies of the AWP 2016/17</li> <li>Establishment of honey bulking and processing centres derived from pg. 15/ Tsetse control and commercial insects farm promotion –Agricultural supplies of the AWP 2016/17.</li> <li>Roads projects were derived from pg. 31-33 of the AWP 2016/17</li> <li>Construction of public latrine in Zengebe TC derived from pg. 35 of the AWP 2016/17</li> <li>Drilling and Rehabilitation of boreholes derived from pg . 36 of the AWP 2016/17.</li> </ul>



		<ul style="list-style-type: none"> <li>• 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</li> </ul>	2	<p>Qtr 4/Annual report FY 2016/17 outlines these achievements:</p> <ul style="list-style-type: none"> <li>• 1/1 irrigation system completed in Kasambya (pg 92)</li> <li>• 15/15 exotic (fresian) bulls distributed (pg. 94)</li> <li>• Renovation of 1/1 fish handling facility completed (pg. 95)</li> <li>• 2/2 honey bulking and processing centres established (pg. 96)</li> <li>• 8/8 community access roads projects completed addressing bottlenecks (pg 128)</li> <li>• All 2.7 km of roads were routine maintained as planned (pg. 129)</li> <li>• 87km out of planned 90km of district roads periodically maintained (pg. 129)</li> <li>• 249km out of 392 km (63.5%) of district roads routine maintained</li> <li>• 1/1 public latrine in Zengebe TC completed (pg. 133)</li> <li>• 14/10 boreholes rehabilitated (pg 134)</li> <li>• 7/8 deep boreholes drilled (pg 134)</li> <li>• 3 /4 valley tanks completed (pg. 134)</li> </ul>
5	<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects and assets during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>• Sampled Projects were implemented within +/-15% of the initial budget including: <ul style="list-style-type: none"> <li>- Establishment of fish cage demonstration costed 7,993,000= out of the planned 7,900,000=</li> <li>- Procurement of improved bulls costed 50,555,000= out of the planned 50,883,662=</li> <li>- Valley tank at Kabuye village in Wabinyonyi costed the same as planned (33,773,143=)</li> </ul> </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>	2	<ul style="list-style-type: none"> <li>• Renovation of Bujabe borehole spent 4,000,000= out of the 4,000,000= planned</li> <li>• Renovation of Wabigalo borehole spent 4,000,000= out of the 4,000,000= planned</li> <li>• Renovation of Kikanjula borehole spent 4,000,000= out of the 4,000,000= planned</li> <li>• Renovation of Nakasongola Barracks borehole spent 4,000,000= out of the 4,000,000= planned</li> <li>• Renovation of Kawondwe PS borehole spent 4,000,000= out of the 4,000,000= planned</li> </ul>
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Assessment area: Human Resource Management

6	LG has substantively recruited and appraised all Heads of Departments	<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>	2	<ul style="list-style-type: none"> <li>• All recruited HoDs have been appraised during the previous FY. Evidence verified is the appraisal reports dated 31.06.2016.</li> </ul>
	Maximum 5 points on this Performance Measure.	<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 HoD have been recruited because District Engineer position has not been filled. Two adverts made (2013 &amp; 215) have failed to yield a suitable person to be recruited.</li> </ul>
7	The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.	<ul style="list-style-type: none"> <li>• Evidence that 100 percent of staff submitted for recruitment have been considered: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>• A staff list submitted during FY 16/17 exists and has been verified – submission list to DSC dated 8.12.16 and 4.4.17..</li> </ul>
	Maximum 4 points on this Performance Measure	<ul style="list-style-type: none"> <li>• Evidence that 100 percent of staff submitted for confirmation have been considered: score 1</li> </ul>	1	Confirmation note dated for Health worker was verified; A minute extract of the 528th meeting for minute number 53/2017 was recorded, signed and stamped. This confirmed that the staff submitted for confirmation was considered and concluded.
		<ul style="list-style-type: none"> <li>• Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1</li> </ul>	1	Disciplinary action was taken for some staff as per minute dated 2 / 6/ 2017. This was a case of abscondment and was considered and concluded at the DSC.

8	Staff recruited and retiring access the salary and pension payroll respectively within two months	<ul style="list-style-type: none"> <li>• Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3</li> </ul>	3	Staff recruited have accessed the salary within no later than 2 months of recruitment. Staff list verified.
	Maximum 5 points on this Performance Measure.	<ul style="list-style-type: none"> <li>• Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2</li> </ul>	0	No evidence provided. Explanation by the HR officer gives indication that retired staff have accessed their pension even after 5 months of retirement.

Assessment area: Revenue Mobilization

9	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)	<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>	4	The district LG increased its OSR by 16% from UGX 326,543,810 in the FY 2015/16 to UGX 377,599,737 in the FY 2016/17. This is more than 10%.
10	LG has collected local revenues as per budget (collection ratio)	<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>	0	The actual/budget revenue collection ratio for Nakasongola for the FY 2016/17 was 78% (UGX 326,543,810/417,063,500). This resulted in a budget variance of 22% which is higher than the recommended variance of +/- 10% by the LGPA Manual.
	Maximum 4 points on this Performance Measure.			
	Maximum 2 points on this performance measure			

11	Local revenue administration, allocation and transparency	<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	There was evidence in the financial statements for the FY 2016/17 that the local revenues amounting to UGX 245,439,,289 out of the total UGX 377,599,737 (65%) collected by the LG were remitted to Lower Local Governments through expenditure code 263104 of the accounts.
	Maximum 4 points on this performance measure	<ul style="list-style-type: none"> <li>Evidence that the LG is not using more than 20% of OSR on council activities: score 2</li> </ul>	2	The LG spent UGX 41, 091,328 in the FY 2016/17 on Council allowances and emoluments compared to UGX 326,543,810 collected in the FY 2015/16. This was 13% of OSR for the FY 2015/16 (less than 20%) as per Section 4 of the Local Governments Act.

Assessment area: Procurement and contract management

12	The LG has in place the capacity to manage the procurement function	<ul style="list-style-type: none"> <li>Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2</li> </ul>	0	The district has a substantive Senior Procurement Officer (CAO's letter dated 1 November 2007; DSC Min. 27 of 2007) but no Procurement officer. Currently, the SPO is supported by a Procurement Assistant.
	Maximum 4 points on this performance measure.	<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	The reports of the TEC are contained in the procurement files e.g. for contract NAKS544/WRKS/16-17/00015, TEC produced an Evaluation report recommending Alexgrace Ltd to the Contracts Committee.
		<ul style="list-style-type: none"> <li>Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1</li> </ul>	1	The Contracts Committee considered recommendation of the TEC. E.g. Contracts Committee meeting of 5 December awarded NAKS544/WRKS/16-47/00011 to Nakamuwa Construction Co. Ltd as recommended by the TEC (Contracts Committee Minute 136/CC/12/16).

13	<p>The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.</p> <p>Maximum 2 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2</li> </ul>	2	<p>Evidence shows that the Procurement and Disposal Plan for FY 2017-18 covers all infrastructure projects in the approved annual work plan e.g. completion of construction of staff house at Kakooge HCIII. A comparison of the contracts awarded against the procurement plan for FY 2016-17 indicates that procurement adhered to the work plan e.g. rehabilitation and drilling of boreholes (items 7 and 8 under works in the procurement plan) were procured as contracts NAKS544/WRKS/16-17/00003 and NAKS544/WRKS/16-17/00005, respectively.</p>
14	<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2</li> </ul>	0	<p>Review of the procurement plan for 2017/18 shows that 50% of the bid documents were prepared by August 30.</p>
		<ul style="list-style-type: none"> <li>• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2</li> </ul>	2	<p>The Register of Contracts Awarded from 1 July 2016 to 30 June 2017 was available and updated to the end of the FY. The procurement files were also complete with relevant documents such as copy of pre-qualification and solicitation documents record of bid opening and closing, evaluation reports, notice of best evaluated bidder, among others.</p>
		<ul style="list-style-type: none"> <li>• For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.</li> </ul>	2	<p>Sampled projects indicate the procurement thresholds were adhered to. E.g. Selective bidding for re-roofing of four classroom blocks at Kasozi P/S valued at UGX 24,407,655 (NAKS544/WRKS/16-17/00018) which is within the threshold and Open Bidding for the Drilling of two production wells and 10 hand pumped boreholes(NAKS544/WRKS/16-17/00005) valued at UGX 223,105,432 432 which is within the threshold for Open Bidding.</p>

15	<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2</li> </ul>	2	<p>Certificates for all works projects were available in the procurement files and issued based on technical supervision (Supervisor of Works). These including Interim Certificate of Payment or Payment Certificate (as appropriate), and Substantial Completion Certificate. E.g Completion Certificate issued on 2 June 2017 for contract NAKS544/WRKS/16-17/00013 (Fencing Lwampanga HCIII, Phase 2).</p>
		<ul style="list-style-type: none"> <li>Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2</li> </ul>	0	<p>No site board were observed on any of the sites visited e.g. construction of staff house at Kakooge HCIII.</p>
Assessment area: Financial management				
16	<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4</li> </ul>	4	<p>All the monthly reconciliations for the FY 2016/17 were part of the financial statements for the year ended 30th June 2017. The monthly reconciliation statements for the period from July to December 2017 were also duly produced and signed by the Accountant and verified by the Senior Finance Officer. The dates of approval of all the reconciliations statements ranged between 6 to 15 days.</p>
17	<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2.</li> </ul>	2	<p>From a sample of 12 transactions from health, water, education and production departments the payments were within a period of 1 months as per the contract. The range of payment period for the sampled payments was between 5 to 26 days which was within the maximum period of 30 days as per the contract or LPO..</p>

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"> <li>Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.</li> </ul>	3	<p>The District Internal Auditor (Mr. Odongo Nebson) was substantively appointed a Principal Internal Auditor by the District Service Commission under minute NO. 43/2013 as per appointment letter dated July 9th 2013 signed by the Chief Administrative Officer, Mr.Kasozi Sulaiman. This position is higher than a Senior Internal Auditor position as per the LGPA Manual.</p>
		<ul style="list-style-type: none"> <li>Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries: score 2.</li> </ul>	2	<p>There was evidence that the LG provided information to Council and LGPAC on the status of implementation of internal audit findings. The DIA had produced and submitted 4 quarterly reports to LGPAC and Council The various departments (education on 20th September 2017 , Health and others) had submitted their responses to LGPAC for action.</p>
		<ul style="list-style-type: none"> <li>Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1</li> </ul>	0	<p>There was evidence that internal audit reports for the FY 2016/17 were submitted to AO, LGPAC and there was evidence that LPAC reviewed them and followed them up as per the following evidence: The quarterly reports for Q1 was received by the CAO, LCV Chair, MOFED Clerk to Council and CFO on 31st October 2016. The, Q2, Q3 and Q4 were received by the same stakeholders on 31st January 2017, 28th April 2017, and 31st July 2017 respectively. However, there was no evidence that LG PAC had reviewed them.</p>
19	<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4</li> </ul>	4	<p>The LG maintains updated assets registers per department and on works and vehicles. They are well updated and are in an approved format as per the LGFARs 2007.</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>Nakasongola District LG received unqualified audit opinion on the financial statements for the FY 2016/17 as per the the Auditor General's report for the period ended 30th June 2017.</p>
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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>	0	<ul style="list-style-type: none"> <li>• 6 council meetings held on 15/8/2016, 4/11/2016, 22/12/2016 (Revenue enhancement plan Min 38/12/2016, BFP FY 2017/18 under min NDC 39/12/2016, 5 year HIV /AIDS Strategic Plan 2015/16-2019/20 under Min NDC 40/12/2016) , 31/03/2017 (Laying draft budget for 2017/18 Min. NDC 49/3/2017), 30/05/2017 (Approval of district budget 2017/18 Min NDC 57/5/2017 ), 30/6/2017 (Qtr Standing Committee reports on dept Performance Min NDC 67/6/2017)</li> <li>• Service delivery issues including standing committee reports in Meeting of 4/11/2016 Min No. NDC 28/11/2016 Discussion of qtr 4 Standing Committee reports for 2015/16</li> <li>• The LG did not have any Assessment reports for discussion by Council but LG PAC report was not discussed.</li> </ul> <p>It was noted that Council does not directly discuss TPC &amp; Monitoring reports but rather these were discussed at Standing Committee level</p>
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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	<ul style="list-style-type: none"> <li>No officer had yet been designated however evidence that complaints/ grievances had been directed to relevant officers and action taken seen. For instance written complaint from SMC of Mijeera UMEA PS dated 17/04/2017 under ref. 'Referring back Mr. Mukiibi Abubakar to your office' was directed to Internal Auditor for special investigation based on whose report DEO and CAO took action. Another complaint under ref. ' Unprecedented withdraw of Bagaya P.S borehole' dated 20/11/2017 by the head teacher, LC I and PTA chairpersons was channelled in writing by CAO to the LC III chairperson for response/action.</li> </ul>
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:</p> <ul style="list-style-type: none"> <li>The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>Only LG payroll displayed on notice board at district headquarters. Pensioner schedule was not displayed</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	<ul style="list-style-type: none"> <li>This information was not displayed on any of the notice boards at district headquarters</li> </ul>
		<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 FY 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	<ul style="list-style-type: none"> <li>Circular on Restructuring from Min. Public Service discussed under Min 94/10/DTPC /2016 in DTPC meeting of 22/11/2016 attended by some LLG staff</li> <li>Circular dated 2/11/2016 by CAO to all Town Clerks and Sun counties disseminating strategic guidelines and directives for Term 2016-2021 from H. E the President seen</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	<ul style="list-style-type: none"> <li>Evidence of barazas held in Nakitoma seen – photographs</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>	0	No minutes of meetings or notes were availed to indicate that guidance was provided to departments. Instead effort was put on supporting Lower Local Governments on gender and equity compliance.
		<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>	0	A comparison of the budget for gender mainstreaming in the previous year budget (Vote 544, section 9a) and payment vouchers PV-S17346 dated 13 April 2017; PV-S17573 and PV-S17571 both dated 26 May 2017 indicate that only 70% of previous year's budget was used.

26	<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</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	<p>There were no reports to indicate that environmental screening or EIA done for any project. The Environment Officer left the district and the position is vacant.</p>
	<p>Maximum 6 points on this performance measure</p>	<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>Environmental and social management plans are not included in the contract bid documents, These omissions were also highlighted by the Environment Officer in the Environment and Social Certification report of projects.</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>No documentation was availed to indicate proof of land ownership where projects are implemented.</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>	2	<p>Certification was available where appropriate. E.g. Certification Form NDLG/ENV/17/55302 dated 5 April 2017; NDLG/ENV/17/55303 dated 7 April 2017; NDLG/ENV/17/55304 dated 28 May 2017; NDLG/ENV/17/55305 dated 26 June 2017.</p>



## **LGPA 2017/18**

Educational Performance Measures

Nakasongola District

(Vote Code: 544)

Score 70/100 (70%)

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>According to the records all P.7 schools have minimum of 7 teachers and those with less than P.7 have a teacher per class budgeted for. This was confirmed during field visits to selected schools.</p> <p>The LG has deployed Head Teachers and minimum of 7 teachers per school for the current FY 2017/18</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>According to the staff structure document approved on 5th Oct 2017 and sent to the Ministry of Public Service, which acknowledged receipt on 12th Oct 2017 available positions have been filled with primary teachers with wage bill provision.</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>All positions of school inspectors substantively filled as per staff structure, where there is a wage bill provision . Currently the District has 1 Senior Inspector of Schools and 2 inspectors in accordance with the wage provision</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 for the current FY 2017/18 was drawn and submitted to HRM to fill positions of 70 Primary Teachers .</p>
		<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of School Inspectors: score 2</p>	2	<p>Position for 2 inspectors of schools are already filled , according to the recruitment plan submitted to the HRM.</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>School Inspectors files were produced and verified. Appraisal reports verified indicate that they were all appraised during FY 2016/7 as per appraisal reports dated 31/06/16.</li> </ul> <p>School Inspectors have all been appraised as per report dated 1.6.16 verifies.</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

3

- A sample of 14 Heads of School files out of 144 was produced and appraisal reports verified. 31/06/16 and 13 out of 14 had appraisal reports. Evidence shows that 92% of school Primary Teachers were appraised. List of sampled schools and their Head Teachers are:

- Mitanzi Primary School = Kisolo Henry

- Nakasongola CU PS = Head Teacher is Kintu Samuel (Appraised)

- Kasozi CU PS = Nankula Robinah (Appraised)

- Kyakadoko CU PS = Ssonko Richard (Appraised)

- Kapundo PS = Kitaka Simon Peter (Appraised)

- Kazwama SDA = Ndagire Joyce (Appraised)

- Kasambya PS = Kajumba Emmanuel (Not appraisal report)

- Bamugolode PS = Munno Godfrey (Appraised)

- Bujabe PS = Kiyumba Frederick (Appraised)

- Kalalu PS = Ssekagya Charles (Appraised)

- Webbale PS = Nanyango Christine (Appraised)

- Kyakadoko PS = (Appraised)

- Kyamuk

- Kapundo Pimary S = (Appraised)

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>1</p> <p>2</p>	<p>Guidelines, policies, circulars issued by the national level in the FY 2016/17 were promptly communicated to the schools through duly signed letters from the office of the DEO. Eg:</p> <p>- Schools and Other Institutions Calendar for 2017 dated 18th Nov. 2016</p> <p>The DEO held meetings with the primary school head teachers to explain and sensitise on guidelines, circulars and policies issued by the national level. Minutes of such meetings are available although most of them are handwritten, eg Minutes of meeting held on 25th Nov. 2016.</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>8</p>	<p>There is written evidence that over 80% public primary schools have been inspected, evidenced by inspection reports and inventory submitted to the regional representative to forward to DES. Schools have copies of these inspection reports although there is no evidence that the reports have been received by DES. Private primary schools are scheduled for inspection in the last quarter of the current FY 2017/18.</p>



8	LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations	<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>	4	Letters on disciplinary issues such as absenteeism, misconduct, neglect of duty, and admonition for corrective action have been issued from time to time to errant head teachers and teachers, based on inspection reports during the FY 2016/17. Eg Circular I/2017, dated 28 June 2017 is one such evidence.
	Maximum 10 for this performance measure	<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	Although school inspection reports and minutes of SMC meetings are available, there was no evidence that the reports were received by either the MoES or DES.
		<ul style="list-style-type: none"> <li>Evidence that the inspection recommendations are followed-up: score 4</li> </ul>	4	Letters from the DEO based on the inspection reports are available, which attest to the fact that there is follow up on inspection recommendations
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"> <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>	5	EMIS reports were obtained from the MoES and examined as well as performance contract for the current FY 2017/18; lists of schools submitted were also checked for consistency. All the documents indicated that the Education Dept has been consistent with both EMIS reports and OBT.
	Maximum 10 for this performance measure	<ul style="list-style-type: none"> <li>Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> <li>Enrolment data for all schools which is consistent with EMIS report and OBT: score 5</li> </ul> </li> </ul>	5	Enrolment data for all schools is available and consistent with EMIS report and OBT.
Assessment area: Governance, oversight, transparency and accountability				

10	<p>The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<p>• Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc...during the previous FY: score 2</p>	0	<ul style="list-style-type: none"> <li>• Evidence that Social Services Standing Committee (handles Health, Education &amp; sports and Community based services) had discussed on 10/10/2016 under Min 04/10/2016 departmental reports issues on High school drop up, schools that needed to be coded( Ninga PS in Kalungi SC and Busone PS in Nabiswera SC), need to establish special education needs schools was in place.</li> <li>• However evidence of discussion of performance assessment results and LG PAC was not seen.</li> </ul>
		<p>• Evidence that the education sector committee has presented issues that requires approval to Council: score 2</p>	2	<ul style="list-style-type: none"> <li>• Evidence (report) that Social Services Standing Committee presented issues to Council discussed on 10/10/2016 under Min NDC 28/11/2016 was seen covering issues on High school drop up, schools that needed to be coded (Ninga PS in Kalungi SC and Busone PS in Nabiswera SC) and the need to establish special education needs schools.</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>	0	<ul style="list-style-type: none"> <li>• Out of a total of 331 schools (both government aided and private) only 133 (all government aided) had SMCs in place and had held meetings at least once. • The following were sampled: - Namiika C/U PS: 1 set of minutes for 26/10/2017. Discussed teachers approval of work plan and budget 2017/18, UPE release Qtr I 2017/18 term II - Nakayonza P.S: 1 set of Minutes for 16/06/2017. Discussed proposed budget 2017/18 - Kisaalizi PS: 1 set of minutes for 18/07/2016. Discussed disciplinary action on a teacher - Kazwama SDA PS: 1 set of minutes for 11/8/2017 considered budget, Exams term II 2017 - Bamusuuta PS: 1 set of minutes for 2/8/2017 considered Head teacher's report which included draft budget</li> </ul>

12	<p>The LG has publicised all schools receiving non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3</li> </ul>	0	No evidence available on this performance measure.
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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	Procurement request document for FY 2016/17 and the revised procurement plan (annual work plan) for FY 2017/18 are available and submitted on time in accordance with procedural requirements, ie by 30th April.
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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	The education department certified and recommended payments for suppliers on timely basis during the FY 2016/17. A sample of 12 payment vouchers and contracts which were examined and compare with the payment register indicated that the payments period ranged between 6 days and 18 days. This was within the recommended maximum payment period of 30 days indicated in the contracts.
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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	<ul style="list-style-type: none"> <li>Acknowledgement of actual date of submission lacking but evidence of sign off on the relevant section in the reports seen for:</li> </ul> <p>Qtr I: 23/11/2016</p> <p>Qtr III: 24/05/2017</p> <p>Qtr IV: 02/08/2017</p> <p>However Qtr II was not signed off by the DEO and Qtr 4 sign off was past the due date</p>
16	<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</li> <li>If sector has no audit query score 4</li> <li>If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points</li> <li>If all queries are not responded to score 0</li> </ul>	2	<p>There was evidence that the education sector provided the status of implementation of the two audit findings for the FY 2016/17 in a response letter dated 16th September 2017 which received by the Clerk to Council on 17th September 2017. The two audit findings in the audit report were 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"> <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>	0	<p>No evidence of consultation with the gender focal person and dissemination of guidelines on how girls and boys should handle issues of hygiene, reproductive health, life skills, etc</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>Minutes of meetings to explain gender guidelines on sanitation for girls and PWDs in primary schools available. However, the minutes indicate limited depth of the discussions.</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	All the SMCs adhere to the guideline on gender composition, evidenced by the records/lists of SMCs in the DEO's office and confirmed from the 4 schools visited.
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>	0	No evidence available on this performance measure, though several schools are said to be performing well. Schools visited also did not reveal much about their involvement in addressing environmental issues. Apparently inter-departmental consultation between the Education Dept and Environment seems quite weak.



## **LGPA 2017/18**

Health Performance Measures

Nakasongola District

(Vote Code: 544)

Score 58/100 (58%)

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>- The recruitment had just concluded and new staff was awaiting deployment. All was done within the Wage Bill budgetary allocations. It was noted that staffing in some units was beyond the approved structures/establishments although within the approved budgetary provisions. This is because some Health units like the HCIV has a laboratory hub which call for more staff who are not on the structures.</li> <li>- The approved wage bill for 2016/17 was 2,565,441,000/= and 104,381,000/= (3%) was not spent due to staff deaths, transfer of services to elsewhere and abscondment. These staff were deleted from the pay roll and one health worker was dismissed because of duo employment. The variance in payment was therefore beyond their control.</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>• There was a shortlist and invitation for oral interviews for health workers dated Sept. 27, 2017</li> <li>• Interviews for recruitment already done and appointments completed, pending deployment</li> <li>• There was also a declaration of vacant positions for filing in 2017/2018 FY</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>	8	<p>Evidence for appraisal for the only two In-charges of HF 4 were verified. The evidence looked at and verified shows that both in-charges of health centers were appraised during the FY 2016/17. They are dated 28/11/2017 with minute 56/2017.</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>	<p>• 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</p>	4	<p>- The deployment list tallied with OBT outputs. The variances were due to local transfers.</p> <p>- Of interest to the Assessor was the fact that the DHO managed to catch a health worker who was dually employed in Nakasongola as well as in Namutumba district. This Health worker was dismissed with disgrace from both Nakasongola and Namutumba districts service.</p>
Assessment area: Monitoring and Supervision				



5

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

3

The following guidelines were observed by the Assessor at the DHO's Office with evidence of dissemination:

1. Health Sector Quality improvement framework and Strategic plan 2015/16 - 2019/20
2. NTLP Recording and Reporting Manual for collection, management, analysis and use of TB data
3. Health Unit Outpatient monthly report (HMIS 105)
4. National HIV testing Services policy and implementation guidelines, Uganda 4th Edition
5. Viral load Monitoring – Obulamu
6. Nakasongola district HIV and AIDS strategic plan 2015/16 - 2019/20
7. Nakasongola district HIV and AIDS Bulletin – July-Sept 2016
8. Barriers and coping strategies with the uptake of NCH/ANC – linked services in a selected health facility catchment area in Uganda. Findings of a qualitative rapid Assessment – (Pamphlet)
9. Consolidated Guidelines for prevention and treatment of HIV in Uganda – December 2016
10. Services standards and Service delivery standards for the health Sector – July 2016

In addition, there was a list with names and signatures of health facility in-charges who had picked the guidelines.

		<ul style="list-style-type: none"> <li>Evidence that the DHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3</li> </ul>	0	There was no evidence that any meetings were held with a specific objective of disseminating guidelines.
6	The LG Health Department has effectively provided support supervision to district health services	Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3	0	Although there were quarterly reports, there were no evidence that the HCIV in the district was supervised every quarter.
	Maximum 6 points for this performance measure	Evidence that DHT has supervised lower level health facilities within the previous FY: <ul style="list-style-type: none"> <li>If 100% supervised: score 3 points</li> <li>80 - 99% of the health facilities: score 2</li> <li>60 - 79% of the health facilities: score 1</li> <li>Less than 60% of the health facilities: score 0</li> </ul>	0	Only about 50% of the facilities were supervised every quarter
7	The Health Sub-district(s) have effectively provided support supervision to lower level health units	Evidence that health facilities have been supervised by HSD and reports produced: <ul style="list-style-type: none"> <li>If 100% supervised score 6 points</li> <li>80 - 99% of the health facilities: score 4</li> <li>60 - 79% of the health facilities: score 2</li> <li>Less than 60% of the health facilities: score 0</li> </ul>	0	- Supervision covered about half of the facilities
8	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	<ul style="list-style-type: none"> <li>Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4</li> </ul>	0	There was no available evidence to indicate that reports were being discussed and used to make recommendation
	Maximum 10 points for this performance measure	<ul style="list-style-type: none"> <li>Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6</li> </ul>	0	There were no evidence that there were any follow-ups on any of the recommendations

9	<p>The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has submitted accurate/consistent data regarding:               <ul style="list-style-type: none"> <li>List of health facilities which are consistent with both HMIS reports and OBT: score 10</li> </ul> </li> </ul>	10	<ul style="list-style-type: none"> <li>The HMIS of MOH was consistent with the health units reflected in the LGP Quarterly Performance reports</li> </ul>
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Assessment area: Governance, oversight, transparency and accountability

10	<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>Under Min 04/10/2016 Committee discussed departmental reports, issues on insufficiency of housing for health staff, transport facilitation to health sector.</li> <li>However evidence of discussion of performance assessment results and LG PAC reports was not seen</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that the health sector committee has presented issues that require approval to Council: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>Social Services Standing Committee presented to council on 4th/11/2016 under Min NDC 28/11/2016 issues on insufficiency of housing for health staff and transport facilitation to health sector</li> </ul>
11	<p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 5 points</p>	<p>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> <li>If 100% of randomly sampled facilities: score 5</li> <li>If 80-99% : score 3</li> <li>If 70-79%: : score 1</li> <li>If less than 70%: score 0</li> </ul>	0	<ul style="list-style-type: none"> <li>The committees were in place but NOT according to guidelines. For example, the HCIV committee has No sub-county representation. The HUMCs are not facilitated to function.</li> </ul>

12	<p>The LG has publicised all health facilities receiving PHC non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards: score 3</li> </ul>	3	<p>- List of PHC fund allocations to facilities was available on notice board</p>
Assessment area: Procurement and contract management				
13	<p>The LG Health department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2</li> </ul>	2	<p>- The procurement requests done were only for tyres for the ambulance of the HCIV</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>- There was evidence of form PP5 submitted during the first quarter</p>
14	<p>The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time:</li> <li>• 100% - score 8</li> <li>• 70-99% – score 4</li> <li>• Below 70% - score 0</li> </ul>	8	<p>- HCII and HC III get basic kits from NMS with quantification meetings jointly done with all stakeholders every year</p> <p>- HCIV does the plans every two months. The procurement plan is developed by the HCIV which sends an electronic copy to the DHO. I have seen the electronic requests on the DHOs computer and signed copies at the HCIV and signed plans at the HC IV</p>

15	<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 2 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points</li> </ul>	2	<p>- The LG health department certified and recommended payments for suppliers on time. A sample of 12 payment vouchers and contracts examined and compared with the payment register indicated that the payment period from funds requisition time to final payments ranged from 8 days to 15 days</p>
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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	<ul style="list-style-type: none"> <li>Acknowledgement of actual date of submission lacking but evidence of sign off on the relevant section in the reports seen for:</li> </ul> <p>Qtr I: 23/11/2016</p> <p>Qtr III: 24/05/2017</p> <p>Qtr IV: 02/08/2017</p> <p>However Qtr II was not signed off by the DHO and Qtr 4 sign off was past the due date</p>
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17	<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0</p>	2	<p>The LG health department responded to the 2 audit findings in 2 letters dated 20th September and 21st September 2017 signed by the DHO and received by the Clerk to LGPAC. All the five audit findings in the two quarterly audit reports were response to.</p>
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Assessment area: Social and environmental safeguards

18	<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> <li>• Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2</li> </ul>	2	<p>- There was evidence of gender considerations. Each committee had at least one female member.</p>
		<ul style="list-style-type: none"> <li>• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>• There was evidence of separation of facilities for men and women but there was no evidence of issuance of guidelines</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>	0	<p>- Guidelines were not seen in all facilities especially those for construction of facilities for medical waste disposal</p>



## **LGPA 2017/18**

Water & Environment Performance Measures

Nakasongola District

(Vote Code: 544)

Score 62/100 (62%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: score 10</li> </ul>	10	<ul style="list-style-type: none"> <li>Nakasongola has safe water coverage of 76%, comprised of 8 sub counties and 3 Town councils. Out of the 11, only three are below the district safe water coverage that is Lwabiyata at 28%, Lwampanga 46% and Wabinyonyi 63%.</li> <li>Lwampanga was planned for in the current financial to have one deep borehole in Muwumani IDP village and its already drilled.</li> <li>Wabinyonyi was planned to have two deep boreholes in Katugo and Kalyakoti villages. Two production wells have been drilled by Ministry of Water and Environment out side District budget.</li> <li>Lwabiyata was planned for to have a solar piped system in Kikooge and the production well is already drilled.</li> </ul>
2	<p>The LG Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15</li> </ul>	15	<ul style="list-style-type: none"> <li>The district had planned to drill one deep borehole in Lwampanga Sub county, Kiyanja and it was done { DWD 56309}</li> <li>Two deep boreholes were planned for Wabinyonyi Sub county one in Kirembo village and another in Macumu village .</li> <li>In Lwabiyata one production borehole was drilled in Kakooge village.</li> </ul>
Assessment area: Monitoring and Supervision				



3	<p>The LG Water department carries out monthly monitoring and supervision of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the LG Water department has monitored each of WSS facilities at least annually. • If more than 95% of the WSS facilities monitored: score 15 • 80 - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60 - 69% monitored: score 5 • 50 - 59%: score 3 • Less than 50% of WSS facilities monitored - score 0</p>	5	<p>24 water projects were done in the Fy 16/17 and these are 11 new deep boreholes, 2 Production boreholes , 11 borehole rehabilitations and one public latrine. Monitoring reports were available at DWOs office and they matched with the plans.</p> <ul style="list-style-type: none"> <li>• They supervised two production boreholes in Kikooge and Bamugolode villages drilled by Aquatech Ltd</li> <li>• 10 Deep boreholes were also drilled by Aquatech • One Public Latrine at Muwumani village, Lwampanga Sub county</li> <li>• 11 deep Bore holes which were rehabilitated by the Hand Pump Mechanics.</li> </ul> <p>Therefore 60% water and sanitation facilities were monitored.</p>
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>	<p>• 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</p>	0	<ul style="list-style-type: none"> <li>• DWO submitted only end of Quarter one performance report for FY 2017/18 to MoWE • No MIS data has been submitted for the current FY to MoWE since drilling was still undergoing.</li> <li>• OBT was submitted but with data of previous financial year 2016/17.</li> </ul>
Assessment area: Procurement and contract management				

5	<p>The LG Water department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4</p>	0	<ul style="list-style-type: none"> <li>Procurement requests were submitted on 10th May 2017 for drilling 10 deep boreholes but it was beyond the deadline.</li> </ul>
6	<p>The DWO has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <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>	2	<p>DWO designed a contract management plan and conducted monthly site visits as planned since site visit reports were on file.</p>
		<ul style="list-style-type: none"> <li>If water and sanitation facilities constructed as per design(s): score 2</li> </ul>	2	<p>Water facilities visited are Namaasa Deep borehole, Macuumu Deep borehole, Muwunami deep borehole, Kiyanja deep borehole and Muwunami public latrine. They were constructed as per design</p>
		<ul style="list-style-type: none"> <li>If contractor handed over all completed WSS facilities: score 2</li> </ul>	2	<p>Completed WSS facilities (two production boreholes and 10 deep boreholes ) were handed over to the district by the contractor (Hitesh Usadadiya) the hand over reports were on file.</p>
		<ul style="list-style-type: none"> <li>If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2</li> </ul>	2	<p>All the water and sanitation projects( 2 production wells, 10 dep boreholes) constructed and completed by Galaxy Agro tech (u) ltd were certified by the DWO</p>

7	<ul style="list-style-type: none"> <li>Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	<ul style="list-style-type: none"> <li>Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	3	<p>The DWO department certified and recommended payments to suppliers on time. A sample of 12 payment vouchers and contracts which were examined and compared with a payment register for the FY 2016/17 indicated that the payment period ranged from 5 days to 18 days. This was below the maximum recommended period as per the contracts.</p>
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	<ul style="list-style-type: none"> <li>Acknowledgement of actual date of submission lacking but evidence of sign off on the relevant section in the reports seen for:</li> </ul> <p>Qtr I: 23/11/2016</p> <p>Qtr III: 24/05/2017</p> <p>Qtr IV: 02/08/2017</p> <p>However Qtr II was not signed off by the DWO and Qtr 4 sign off was past the due date</p>
9	<p>LG Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</li> <li>If sector has no audit query score 5</li> <li>If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3</li> <li>If queries are not responded to score 0</li> </ul>	5	<p>The department had no audit queries.</p>
Assessment area: Governance, oversight, transparency and accountability				

10	<p>The LG committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <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 (DWSSC) etc. during the previous FY: score 3</li> </ul>	0	<ul style="list-style-type: none"> <li>Discussed on 12/10/2016 under Min 8/10/2016 issues including Supervision reports, performance/ OBT reports and other issues that need to be forwarded to Council such as need to address water shortage in Nakasongola TC, Loss of funds through drilling of dry wells, poor sanitation.</li> <li>However evidence of discussion of LG PAC reports and DWSSC reports was not availed for review. Said not to have been considered in FY 2016/2017.</li> <li>*Monitoring reports: only DEC conducted monitoring last FY under PAF due to low OSR but their reports were not discussed by the Standing Committees</li> </ul>
		<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	<ul style="list-style-type: none"> <li>Committee presented to Council for discussion on 4/11/2016 under Min NDC 28/11/2016 issues on need to address water shortage in Nakasongola TC, Loss of funds through drilling of dry wells, and need to address low sanitation coverage in the Nakasongola TC and district.</li> </ul>
11	<p>The LG Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <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>	2	<ul style="list-style-type: none"> <li>Information on budget, water grant development grant releases and expenditures were displayed on the district notice boards.</li> <li>Conducted 4 advocacy meetings in 4 subcounties this FY 17/18</li> </ul>

		<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>	2	<ul style="list-style-type: none"> <li>All the WSS visited were well labelled that is:  Namaasa village Deep Bore hole DWD 56304,  Date of construction 23/05/17.  Macuumu village borehole DWD 56303, DOC 22/05/17  Muwunami Deep borehole DWD 56309 DOC 05/06/17  Kiyanja Deep bore hole DWD 56308 DOC 07/06/17  Muwunami Public latrine</li> </ul>
		<ul style="list-style-type: none"> <li>Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>Information on tenders and contract awards were displayed on the district notice board.</li> </ul>
12	Participation of communities in WSS programmes  Maximum 3 points for this performance measure	<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	<ul style="list-style-type: none"> <li>DWO had no community applications for the water sources planned this FY.</li> <li>DWO didn't have land agreements for the water projects planned for the current FY</li> <li>Out of 10 deep bore holes planned only 5 villages had paid Capital Maintenance.</li> <li>Out of 13 deep boreholes to be rehabilitated only 7 villages had paid Capital contribution.</li> </ul>
		<ul style="list-style-type: none"> <li>Number of water supply facilities with WSCs that are functioning evidenced by collection of O&amp;M funds and carrying out preventive maintenance and minor repairs, for the current FY: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>There was no evidence of O&amp;M collections on file and water sources visited.</li> </ul>
Assessment area: Social and environmental safeguards				

13	<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2</li> </ul>	0	Environmental screening was not done
		<ul style="list-style-type: none"> <li>• Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1</li> </ul>	0	<ul style="list-style-type: none"> <li>• There were no evident reports with DWO.</li> </ul>
		<ul style="list-style-type: none"> <li>• Evidence that construction and supervision contracts have clause on environmental protection: score 1</li> </ul>	1	<ul style="list-style-type: none"> <li>• KLR contractor to provide tree seedlings to communities as indicated in the BOQ FY 17/18</li> <li>• AQUATEK Contractor for 10 deep boreholes in the FY 16/17 to put a public wire fence with { Enkoni} in the catchment area.</li> <li>• KLR Contractor FY 17/18 for 10 deep bore holes in the contract agreement indicated about the environmental protection site that: Care must be taken in the handling and storage of all drilling fluids, oils, greases and fuel on site to avoid any environmental degradation. The Contractor shall dispose off any toxic materials, drilling fluid and other additives, cuttings and discharged water in a manner approved by the supervisor so as not to create damage to public and private property and shall adhere to the set of environmental guidelines for drilling and test pumping operations issued to him by the employer.</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>	3	<ul style="list-style-type: none"> <li>• WSCs are 50% are women as per the sector critical requirements as evidenced from reports on file.</li> </ul>

15	<p>Gender- and special-needs sensitive sanitation facilities in public places/RGCs.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"><li>• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3</li></ul>	3	<p>Muwunami public latrine has adequate access , seperate stances for men and Women and a ramp for PWDs .</p>
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