



LGPA 2017/18

Accountability Requirements

Namutumba District

(Vote Code: 574)

Assessment	Compliant	%
Yes	3	50%
No	3	50%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Assessment area: Annual performance contract			
<p>LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.</p>	xxx	<p>No, the final annual performance contract for the FY 2017/2018 was not submitted by 30th June according to the required evidence from MoFPED.</p> <p>However according to CAO'S signature, the Final Performance Contract for Namutumba DLG for the FY 2017/2018 was submitted to MoFPED on 28th June 2017 and received by the PSST MoFPED on 5th July 2017. Refer to the signature of the PSST MoFPED on Page 1 of the contract.</p> <p>According to the MoFPED however, 'Receipt for Acknowledgement of Budget Documents' SN 4059 notes date as 4th Aug 2017.</p>	No
Assessment area: Supporting Documents for the Budget required as per the PFMA are submitted and available			

<p>LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).</p>	<p>xxxxx</p>	<p>Yes, the draft Performance Contract/ Budget includes a copy of the Procurement Plan as per the 'MoFPED 'Receipt for Acknowledgement of Budget Documents'' dated 7th April 2017, SN 0531.</p> <p>This Draft Performance Contract contains all the key documents submitted as an accompaniment to the Budget.</p> <p>Refer to Annex 3 of the Draft Budget titled Namutumba LG Draft Consolidated Annual Procurement Plan for the FY 2017/2018.</p> <p>Note: The final performance contract / budget is a summarised document that does not contain any annex documents, hence this parameter has been assessed using the draft budget since it's the bigger documents which contains all budget annex documents.</p>	<p>Yes</p>
<p>Assessment area: Reporting: submission of annual and quarterly budget performance reports</p>			
<p>LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)</p>	<p>xxxxx</p>	<p>No, Namutumba DLG did not submit her annual performance report on 31st July 2017. The report was submitted on 4th August.</p> <p>The Annual performance Report for the period FY 2016/2017 was received by MoFPED on 4th Aug 2017 as per the 'Acknowledgement Receipt of Submission of Budget Documents' serial number 4511.</p>	<p>No</p>

LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)

xxxxxx

No. While the FY 2016/2017 performance report was submitted and included all the four quarters, it was not submitted by 31st July.

Refer to Quarter 1 Report submitted on 1st Dec 2016 to MoFPED as per the 'Acknowledgement Receipt of Submission of Budget Documents,' serial number 0141

Refer to Quarter 2 Report submitted on 1st Feb 2017 to MoFPED as per the Acknowledgement Receipt of Submission of Budget Documents serial number 0269.

Refer to Quarter 3 Report submitted on 15th May 2017 as per the 'Acknowledgement Receipt of Submission of Budget Documents,' number 0711

Refer to Quarter 4 Report submitted on 4th Aug 2017 to MoFPED as per the 'Acknowledgement Receipt of Submission of Budget Documents,' serial number 4511

No

Assessment area: Audit

<p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous financial year by April 30 (PFMA s. 11 2g). This statement includes actions against all findings where the Auditor General recommended the Accounting Officer to take action (PFMA Act 2015; Local Governments Financial and Accounting Regulations 2007; The Local Governments Act, Cap 243).</p>	<p>XXXXX</p>	<p>The LG provided information on the status of implementation of the Internal Auditor General's findings in a letter to the PS/ST that was received and recorded in the registration book at the Internal Auditor General's Office on 6th/03/2017.</p> <p>A report on the responses to the issues raised by the Auditor General for the year that ended June 30th 2016 was also seen (dated 22nd February 2017 Ref. No. CR/Fin/103/1) providing the responses and actions taken by the accounting officer on all the eight issues that were raised in the auditor general's report.</p>	<p>Yes</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer</p>	<p>XXXXX</p>	<p>The LG received an unqualified audit opinion. This was verified from the District audited financial statement for FY 2016/17 that was obtained at the Office of the Auditor General</p>	<p>Yes</p>



LGPA 2017/18

Crosscutting Performance Measures

Namutumba District

(Vote Code: 574)

Score 55/100 (55%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>All new infrastructure projects in: (i) a municipality; and (ii) all Town Councils in a District are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a municipality/district has:</p> <ul style="list-style-type: none"> • A functional Physical Planning Committee in place that considers new investments on time: score 2. 	0	<p>No. While the District has a functional Physical Planning Committee which was set up in 2016 when the 10 members were appointed, it is not functional.</p> <p>Refer to official letter written by the CAO on 14TH January 2016 ref CR/Per/156/1 to the 10 appointed office bearers that are legally supposed to form part of the Committee as per the Physical Planning Act 2010. The Council is supposed to meet quarterly but due to limited funds meets as and when required.</p> <p>Last year the Committee received no funding at all from LR and the committee only sat 3 times with no facilitation. Refer to minutes from the Physical Planning Committee meeting held 25th October 2016 where the committee was oriented on the Physical Planning Act 2010, the Roles of the Committee under Minute 02/NDPPC/25/10/2016, and Minute 03/NDPPC/25/10/2016 respectively.</p> <p>The district does not have a Building Plan Registration Book and there is no evidence within committee meetings reviewed that building plan applications were reviewed by the committee.</p>
		<ul style="list-style-type: none"> • All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2. 	0	<p>No, there is no evidence that all new infrastructures have approved plans or that they were built according to the approved plans.</p>

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

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

2

Yes, the AWP for the current FY were based on the outcomes of the budget conference for FY 2017/2018.

For example the summary of the sector priorities for the Education Department as shared by the CAO during his submission from the Consolidated Budget Conference paper, match the planned sector activities in the AWP for FY2017/2018. This sector focused on school hygiene and procuring a vehicle to ease inspection in primary schools as a core priority.

Refer to Page 77 of the FY2017/2018 AWP under the Education Sector Work Plan details – under Capital Purchases. 3 – 4 stance pit latrines in 3 primary schools were planned for as per the Budget Conference priorities on Page 4 of the Consolidated Budget Conference Paper.

Also Refer to Page 79 of the FY2017/2018 AWP under the Education Sector Work Plan details – under Capital Purchases. One double cabin pick up was planned for as per the Budget Conference priorities on Page 4 of the Consolidated Budget Conference Paper.

Note: The Budget Conference was held on 27 October 2016. Refer to the Minutes and the Consolidated Budget Conference paper which were presented by both the District Chairperson and the CAO on 28th October 2016.

Also refer to the conference attendance list, attached to the Budget Conference Voucher Accountability submitted to the CFOs office to validate actual conduct of the conference.

<ul style="list-style-type: none"> • Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If different, justification has to be provided and evidence that it was approved by Council. Score 2. 	2	<p>Yes, the capital investments in the Approved Annual Work Plan for FY 2017/2018 are derived from the DDP.</p> <p>For example Chapter 2 section 6 under the DDP lists localised sector priorities for Namutumba DLG which have been tagged to the National Priorities within each sector. Under page 27 for example, the priorities in the Water Sector on bullet 20 looked at the number of public latrines in RGC and public places.</p> <p>This priority investment area was planned for in the AWP FY 2017/2018 on Page 83 of the Work Plan Details for Water under Capital Purchases in the output for Construction of one public latrine in a RGC and public place.</p> <p>Secondly we can refer to Refer to page 29 for the priorities under Management, on bullet 7, which looks at the number of computers, printers and set of office furniture purchased.</p> <p>This priority investment area is planned for in the AWP FY 2017/2018 on Page 65 of the Work Plan Details for Administration under Capital Purchases in the output listed as number of computers, printers and set of office furniture purchased.</p> <p>The AWP and Budget for the FY 2017/2018 for Namutumba DLG was approved by the District Council at a council meeting held 30th May 2017 under Minute 38/cou/5/2017</p>
<ul style="list-style-type: none"> • Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1. 	1	<p>Yes, project profiles have been developed and discussed with the DTPC for all investments in the AWP for the FY 2017/2018 as per the LG Planning Guidelines.</p> <p>Refer to Minutes of the DTPC meeting held 23 February 2017 Minute 3/23/2/2017 section one, where the Departmental AWP with their respective project profiles for the FY 2017/2018 were discussed in detail.</p>

3	<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum 1 point. 	0	<p>Yes, the statistical abstract for FY 2016/2017 was developed and submitted officially to UBOS for review on 24th October 2017 as per email correspondence to paul.okello@ubos.org.</p> <p>There is no evidence to confirm whether the abstract contains gender disaggregated data since it was not available for review.</p> <p>There is evidence however that the first draft of the abstract was presented to the DTPC for review during the meeting held 24th April 2017 under Minute 25/4/2016/17 titled 'Presentation of the Statistical Abstract.</p>
4	<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2 	2	<p>Yes, sampled infrastructural projects implemented by Namutumba DLG in FY 2016/2017 seem to be derived from the Annual Work plan for FY 2016/2017.</p> <p>Refer to the FY 2016/2017 LG Quarterly Performance Report under the Cumulative Department Work plan Performance for Production and Marketing on Page 75 where the Partial construction of the slaughter slab at Ivukula Mpande market was carried out.</p> <p>A review of the AWP FY 2016/2017 Work Plan Outputs for the Production and Marketing Sector (Page 39) under the output for Livestock Health and Marketing indicates that Partial construction of the slaughter slab at Ivukula Mpande market was planned for.</p> <p>Also refer to the FY 2016/2017 LG Quarterly Performance Report under the Cumulative Department Work plan Performance for Health on Page 79 where 4 staff houses were constructed, two of which were at Nsinze HC IV.</p> <p>A review of the AWP FY 2016/2017 Work Plan Outputs for the Health Sector (Page 44) under the output for Staff Houses construction and Rehabilitation indicates that construction of 3 staff houses was planned, out of which two were to be located at Nsinze HC IV.</p>

		<ul style="list-style-type: none"> Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. o 100%: score 4 o 80-99%: score 2 o Below 80%: 0 	0	<p>No, the data indicates that the investment projects implemented in FY 2016/2017 were not completed as per the FY work plan.</p> <p>A review of the Highlights of Revenue and Expenditure for the FY 2016/2017 indicates 75.2% cumulative annual average absorption under the Domestic Development, and Donor Development grant.</p> <p>Refer to pages 5, 7, 8, 9, 11, 13, 15, 17, 19, 21, 23, 24 of the 2016/2017 Annual Performance Report.</p>
5	<p>The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects and assets during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2 	0	<p>No, investment projects in the previous FY were not completed within the approved Budget – plus or minus 15%</p> <p>A review of the Annual Performance Report for the FY 2016/2017 under the tabular Highlights of the Revenue and Expenditure of the 12 departments indicates a cumulative absorption rate of 75.2% which is a cumulative variance of 24.8% below budget for total expenditures under Domestic Development Expenditures and Donor Development Expenditures specifically.</p> <p>To review the data used to calculate the percentage of total expenditure in comparison to the approved Budget, look at the tabular highlights of the Revenue and Expenditure of the 12 departments on 5, 7, 8, 9, 11, 13, 15, 17, 19, 21, 23, 24 of the 2016/2017 Annual Performance Report.</p>

		<ul style="list-style-type: none"> Evidence that the LG has budgeted and spent at least 80% of O&M budget for infrastructure in the previous FY: score 2 	2	<p>Yes, the LG has budgeted and spent at least 80% of the O and M budget on infrastructure.</p> <p>A review of the tabular Cumulative Department Work plan Performance for the FY 2016/2017 indicates that the O and M expenditure for four sampled departmental project activities is at an average of 110.5%.</p> <p>For example refer to Page 86, under Roads and Engineering, Budget for periodic maintenance of unpaved urban roads utilized by up to 116.67%.</p> <p>Refer again to Page 86, under Roads and Engineering, Budget for routine maintenance of unpaved urban roads utilized by up to 105%.</p> <p>Refer to Page 90, under Water, Budget for Rehabilitation of Deep Boreholes drilled was utilized by up to 116%.</p> <p>Refer to Page 89, under Water, Budget for Rehabilitation of Water Points was utilized by up to 104.44%.</p>
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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"> Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2 	0	Only (6) out of the (8) HoDs were appraised for FY 2016/17 as evidenced by the annual performance reports on file. They include DEO, CFO, DCDO, DHO, Ag.District Engineer, and Ag.District production officer.
	Maximum 5 points on this Performance Measure.	<ul style="list-style-type: none"> Evidence that the LG has filled all HoDs positions substantively: score 3 	0	#4 out of (9) positions of HoDs are not substantively filled as per the approved structure. They include district engineer, DNRO, Production officer and Trade and LED officer. While the review of personnel files (appointment letters) confirmed that (5) out of (9) HoDs positions were substantively filled as per the approved structure .The filled positions include DEO, DCDO, CFO, DHO & DCAO respectively.

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

Maximum 4 points on this Performance Measure

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

2

Yes. The DSC considered all the (116) posts submitted by CAO for filling in FY 2016/17. Refer to declaration of vacancy letters (9) dated/stamped 9/12/17 and received by Secretary, DSC on 29/12/16 among others. Also refer to some of the NTB DSC minutes indicated below for evidence: • Minute extracts of the 3rd meeting of NTB DSC held on 20/1/17 under Min. NTB/DSC/24/20/01/17 dated 23/1/17 • Minute extracts of the 6th meeting of NTB DSC held on 30/3/17 under Min.NTB/DSC/38/302017 dated 13/3/17 • Minute extract of the 7th meeting of NTB DSC held on 21/6/17, dated 2/6/17 under Min.NTB/DSC/44/02/06/2017, etc. Also refer to a list of new staff recruited in FY 2016/17 (HR department) and the DSC Report for FY 2016/17 dated 10/7/17

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

1

Yes. Namutumba DSC considered all the (5) LG staff (health workers) submitted by the CAO in FY 2016/17 for confirmation as per submission list dated 9/1/17 and acknowledged by Secretary DSC on 10/1/17. Refer to the minute extracts of the 7th meeting of NTB DSC held on 2/6/17 under Min. NTB/DSC/49/02/06/2017

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

1

Yes. Namutumba DSC considered all the (17) cases of disciplinary action submitted by CAO in the letters dated 23/12/16, 3/12/16, 23/12/16, 3/4/17, 13/1/17, 17/1/17 and all were acknowledged by Secretary DSC. The cases involved abscondment from duty and lifting of interdiction. Refer to minute extracts of the 7th meeting of NTB DSC held on 2/6/17 under Min. NTB/DSC/46/02/06/2017 and minute extracts of the 1st meeting of NTB held 11/1/2017 under Min.NTB/DSC/5/11/01/17. It was also noted that information on submission for disciplinary action in the HR department and DSC do not tally. i.e. HR department had (21) cases while DSC received and acknowledged (17) cases.

8	<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3 	0	<p>No. From the review of the list of Namutumba LG staff recruited in FY 2016/17, it was found that 41 out of 112 staff recruited did not access the salary payroll within 2 months after appointment. However, it was noted that (31) staff appointed on 13/6/17 accessed the salary payroll on 4/9/2017 after 2 months of appointment because the IPPS underwent a revision upgrade in the month of July 2017 and as a result a number of functionalities on the system became unstable during the months of July and August 2017. Refer to the letter addressed to all CAOs and TCs by PS-MoPS regarding the IPPS upgrade dated 25/8/17 Also refer to IPPS numbers for some of the staff recruited in FY 2016/17 for evidence: 1005641, 1005606, 1005300, 1005393, 1010366, 1010630, 1010632, 1010346, 1005585, 1005596, 1010642, etc.</p>
		<ul style="list-style-type: none"> • Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2 	0	<p>No. From the district retirement list for FY 2016/17 and review of the retirement files, it was found that (3) out the (4) LG staff who retired in FY 2016/17 did not access the pension payroll within two months after retirement. Refer to IPPS numbers for the LG staff who retired in FY 2016/17 for evidence: 365466, 364750, 364824, and 832397.</p>
Assessment area: Revenue Mobilization				
9	<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • If increase in OSR from previous FY but one to previous FY is more than 10% : score 4 points • If the increase is from 5 -10% : score 2 point • If the increase is less than 5% : score 0 points. 	0	<ul style="list-style-type: none"> • From the review of the annual final accounts of FY 2015/16 & 2016/17, it was found out that the District increased its local revenue collections by 3% from UGX 119,873,846/= that was collected in FY 2015/16 to UGX 123,780,271/= that was collected in 2016/17 • This was below the recommended target thus the district thus the district did not score.

10	<p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10% : then 2 points. If more than +/- 10% : zero points. 	0	<p>The district had a local revenue shortfall of 70% from what they had budgeted to collect in FY 2016/17 UGX 405,986,000 to only UGX 123,780,271 that were actually able to collect.</p> <p>This huge shortfall was attributed to:</p> <p>The LG had integrated local revenue forecast of lower local governments (UGX 216,293,000) in its budget yet in the actual realization revenue of LLGs were not included</p> <p>The other reason for poor budget realization given was that one the greatest source of local revenues in the district was tender fees however the district had a budget cut of development fees for example the development component of PHC is no longer sent to LGs</p>
11	<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2 	0	<p>The only source of revenue that the District collects on behalf of LLGs is the Local Service Tax (LST)</p> <p>In FY 2016 the LG collected UGX 64,014,700/= of this, the LG remitted UGX 29,791,000/= to Lower Local Governments which is 46%</p> <p>The reason given is that there some staff who resided in Iganga District thus the LG remitted a share to Iganga</p>
		<ul style="list-style-type: none"> • Evidence that the LG is not using more than 20% of OSR on council activities: score 2 	2	<p>In 2016/17 Council spent UGX 24,240,000 on allowances of Councils and Standing committees which is 20% of the local revenues collected in the FY</p>
Assessment area: Procurement and contract management				

12

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

Maximum 4 points on this performance measure.

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

2

Yes, the LG of Namutumba had the position of Senior Procurement Officer substantively appointed on transfer within service under Min. NTB/DSC/157/19/3/2014(1) dated 10/4/2014 and signed by Wopuwa George William who was the CAO.

The Procurement Officer, was appointed on Probation on 30/4/2009 under Min.KRL/DSC/688 (b)/2009 signed by CAO F.K Rwakabuhoro. He was later confirmed under Minute No. KLR/DSC/028/2012 (i) 64 dated 11th April 2012 signed by CAO Wopuwa George William

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

1

Yes, there was evidence that 30 out of 48 which were recorded in the contract register for FY2016/17. Others had been kept in Medical stores given the termite attack and small space for PDU given the lot of documents they generate:

The 5 sampled files were;

- NAMU574/WRKS/16-17/00002 was drilling , casting and installation of 6 deep boreholes Lot 2 with TEC recommendations dated 7/12/2016 was submitted to DCC for a decision on 22/12/2016
- NAMU574/WRKS/16-17/00007 construction of a five stance lined pit latrine at Badatu Primary School had a TEC recommendation dated 28/10/2016 signed by all members submitted to DCC on 28th November 2016 using LG PP form 13.
- NAMU574/wrks/16-17/00069 Partial renovation of Namutumba HC III Maternity ward was technically evaluated and signed off on 20/3/2017 and submitted to DCC on LG PP Form 17 on 5th April 2017.
- NAMU574/wrks/16-17/00004 Completion of a staff house at Ivukula H.C III 20/3/2017 and submitted to DCC on LG PP Form 20 on 6th April 2017.
- DCC recommendation of supply of road construction materials under framework contractnFY16/17 dated 24/6/2016 was derived from TEC recommendations submitted on form 13 dated 22/6/2016.

Summarily the above samples were presented to DCC meetings of 4th January 2017 under Min.24/NDCC/04/01/2016/17 .

Also DCC sitting of 1/December/2016 under Min. 19/NDCC/01/12/2016/17
And DCC sitting of 6th April 2017 in the DSC Board room under Min 37/NDCC/06/04/2016/17.

		<ul style="list-style-type: none"> • Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1 	1	<p>In the case of the Bore hole drilling which was awarded to Sumadra there was an arithmetic error which led to a change from 112,196,680 which was read out at bid opening to a new figure of 118,493,240 and Royal Techno Industries from 96,676,220 to a new figure of UGX 118,664,340/=. The TEC communicated to both the Managing Directors on 12/12/2016 who acknowledged and accepted the error on 14/12/2016.</p> <p>Again there were arithmetic errors on NAMU547/WRKS/16-17/0005</p> <p>The DCC at their sitting upheld the arithmetic revisions hence no deviations from TEC recommendations by the DCC members</p>
13	<p>The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.</p> <p>Maximum 2 points on this performance measure.</p>	<ul style="list-style-type: none"> • a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget 		<p>Yes , the LG of Namutumba had evidence that the current years Procurement and Disposal plan covered all infrastuture projects in the Annual work plan and budget. This was from the Proc plan signed by CAO Kanyarutokye Moses on 6/7/2017 submitted to PPDA, MoLG, MoFPED and Accountant General on 14th July 2017 on page 3 to 9 contained works related procurements as reflected in the AWP and budget approved under Minute 30/Cou/5/2017 for Namutumba District Council. The water Vehicle was converted to extra Boreholes however the details for the amendment in the council minute of 30th CoU/15/2017 was not captured.</p> <p>Examples :</p> <p>Under AWP for Education department on page 18 and 19 of the AWP and Budget the projects are reflected on page 3 of the Procurement Plan.</p> <p>The water /health sector projects in the procurement plan on page 3, the water and health projects are derived from page 23 and 14 of the AWP and budget respectively.</p> <p>The roads sectors activities of page 4-9 in procurement plan are derived form pages 21 and 22 of the AWP and budget.</p> <p>The Procurement plans for Previous FY signed by CAO on 28/4/2017, received in PPDA , Accountant General, MoFPED and</p>

work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2

2

MoLG on 11/5/2017, were checked and compared with the Quarterly reports as below;

Quarter 1 Report (Received on 25/10/2016 in PPDA and signed by CAO on 14/10/2016) had 13 procured services on pages 1 and 3 which appeared in the Proc Plan on pages 13 and 14 as Namu 574/Svrcls/16-17/0001 to 00018.

In quarter 1 still were 6 Procurement supplies 001 to 0006 which appeared in Proc plan on page 1 and 2

In quarter 1 report were 3 works procurements Namu574/Works/16-17/000054, 00071 and 000072 much as 72 was named 71 in quarter one report.

Quarter 3, Procurement report signed by CAO on 12/4/2017 and received in PPDA on 28/4/2017 contained 18 water and road procurement all included in the Proc Plan. However on page 10 under Namu 574/Wrks/16-17/000066 the assessor noted that the Annual Proc Plan had Nangonde T.C road and Bunangwe- Bunangwe –Iwungiro – Kisega –Iringa road for opening and shaping of roads, but in the quarterly report it was only Routine mechanised maintenance of Kisega – Izinga road (3.5km) . This could be due to limited funds and also lack of engineers involvement by LLG at planning time. This renders limited funds for the planned road kilometrage.

The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.

Maximum 6 points on this performance measure

• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2

0

Evidence from the Procurement Plan of 2017/18 as received by the Accountant general , MoLG , MoFPED and PPDA on 14/7/2017 signed by CAO Kanyarutokye Moses on 6/7/2017 had 82 investment /Infrastructure procurements pg 3-9. Basing on the bid invitation date there were only 6 bids assumed prepared before bid invitations.

The advert was placed in the Daily Monitor of June 2017 on page 31. All the open bids documents were proposed for 7th June 2017.

The Education Vehicle procurement could not kick start due to search for clearance from MoES which was received on 28/8/2017. The specifications from MOW was sent by e mail after 13/12/2017 that is when the bid was prepared and advert ran on 18/1/2018.

The water Vehicle was converted to extra Boreholes however the details for the amendment in the council minute of 30th CoU/15/2017

• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2

0

Yes, Namutumba LG had evidence of a contracts register on file for FY 16/17 as a quick reference but had not entered the amounts paid for the contracts much as there was provision for that column. It was dated 15th July 2016 with 48 procurements compiled and signed by Kinasafu Yusuf as Head PDU.

Complete procurement activity files:

30 of 48 supposedly complete action files were presented for FY 16/17. The files had all the basic procurement unit documents , appointments of contract managers but no reports by supervisors ,payment certificates nor hand over records for completion.

		<ul style="list-style-type: none"> For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2. 	2	<p>From the contract register , and Procurement reports of quarters 1,2,3, and 4 all the procurements adhered to the procurement thresholds.</p> <p>However, some frameworks are below threshold yet they were open domestic bidding . this is in a bid to manage time for process of procurement. All frameworks are handled as open bids to avoid delays via prequalification.</p> <p>There is no guideline that limits use of open bids as seen in the first quarter procurement report.</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"> 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 	0	<p>From the 30 procurement action files presented out of 48 from FY2016/17 were sampled and few mainly the open bid projects were found to have copies of appropriately certified completion certificates based on technical supervision . examples are;</p> <p>Lot 2 drilling of boreholes Engineer Officer was project manager with allocations to other staff. One supervisory report dated 30/July /2017 was on file signed by Ag.DE Babiha Harriet. A completion certificate worth 18,027,778 for Kirirema Primary school was on file. There was no interim certificate.</p> <p>In general the systems are in place but not all the required information was found on each action file.</p> <p>Construction related supervisory report was not spread specifically for each project but a one off covering all projects.</p>

		<ul style="list-style-type: none"> Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2 	0	<p>The LG of Namutumba did not have clearly labelled site boards sites visited included;</p> <p>The Nsinze HC IV 420m chain link fence and a 4 stance lined toilet with a urinal were both not labelled.</p> <p>The road of Nsinze –Naigombwe (3km) was not labelled at the time of assessment, works was still on going but the practice was to put the signboards after completion.</p> <p>The bore holes have designated nomenclatures on the slab upon completion which does not include all the score detail. However, Ag.DE said that at the launch all the information is communicated.</p> <p>The Global Partnership for Education construction at Kibenge Memorial Primary School had taken of in 2017/18 and not 2016/17 as intended. Much as the sign board was in place the contract sum was not included.</p>
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Assessment area: Financial management

16	<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4 	4	<p>From the review of the cash books, it was ascertained that the LG made monthly bank reconciliations.</p>
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17	<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<p>• 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.</p>	2	<p>From the review of the payment vouchers for payment of projects undertaken in 2016/17 it was observed that there were no outstanding bills for over two months for example:</p> <p>The contract with East African Boreholes Ltd, an invoice was raised on 03/10/2016 and payment done on 10/10/2016</p> <p>The contract to ICoN projects, an invoice was raised on 17th/05/2017 and payment done on 26th/05/2017</p> <p>The contract to Royal techno an invoice was raised on 22nd/06/17 and payment done on 30th/06/17</p> <p>Contract to Kisoboka construction for Budwapa Primary School, the invoice was raised on 2nd/06/17 and payment done on 13th/06/17</p> <p>Contract to Batuli Investment (Bubutya PS) an invoice was raised on 27th/03/17 and payment done on 13th/04/2017.</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>	<p>• Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.</p>	3	<p>The LG has a substantive District Internal auditor by the names of Ziraba Moses at a scale of U2 appointed on promotion of 6th March 2008 Minute No. Min 15/DSC/2008.</p> <p>The Internal audit department has produce and submitted all the four quarterly audit reports on the following dates:</p> <ul style="list-style-type: none"> o Q1 internal audit report on 8/12/2017 o Q2 internal audit report on 03/03/17 o Q3 internal audit report 28th/04/17 o Q4 internal audit report 11th/07/17

<ul style="list-style-type: none"> Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries: score 2. 	2	<p>A report on the status of implementation on internal audit recommendations for FY 2016/17 was seen dated 23rd October 2017. Ref No. CR/Fin/106.</p> <p>This report elaborated the; issue, District PAC recommendations, actions taken and date of Action.</p>
<ul style="list-style-type: none"> Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1 	1	<p>The internal audit department submitted copies of the internal audit reports to CAO (stamp of registry seen) and the PAC (signature of clerk to council acknowledging receipt and copies of report seen)</p> <p>These reports were discussed in PAC, minutes and reports of this was seen as evidenced as follows:</p> <p>Meeting of PAC on 20/06/2017 was convened to receive responses from internal and external audit reports as per the minutes in the report.</p> <p>Meeting of 31st/08/2017. Min 7/DAC/8/2017 reported about PAC cross examining staff for un accounted funds as per the internal audit report of Q3.</p> <p>Minutes of PAC meeting on 2nd 11, 2016. Min No: 17/DAC/11/2016 was for consideration of 4th quarter internal audit report</p> <p>Report of the LG PAC on the District Internal Auditor's report for Q2 was produced by PAC on 28th June 2018</p> <p>A report on LG PAC on the review of the 4th Quarter Internal audit report was seen signed on 22nd/11/2017.</p>

19	<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4 	0	<p>The district has in place an updated fixed assets register for Vehicle and plant including all recent acquisitions for example a water bourser that was acquired on 29th December 2017.</p> <p>A register of equipment also exists but it lacks details of specifications of the equipment</p> <p>A register of land and building exists however from the review of the register it was observed that not all buildings are included</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>The District received an unqualified audit opinion. This was verified from the District audited financial statement for FY 2016/17 that was obtained at the Office of the Auditor General</p>
Assessment area: Governance, oversight, transparency and accountability				

21	<p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p>	<p>Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2</p>	2	<p>Yes. The council meets and discusses service delivery issues including the DTPC reports, performance, and monitoring reports.</p> <p>For example in the minutes for the DTPC meeting held 23rd February 2017 under Minute 3/23/2/2017 where the Chairperson Budget Desk presented: Departmental Annual Action Plans and Project Profiles for FY 2017/2018; Annual Capacity Building Plans for FY 2017/2018, and LRE plans.</p> <p>The outcomes of those discussions were summarised by the Planner and presented to the District Council in a meeting held 27th March 2017 under Minute 24/Cou/3/2017 where key DLG documents like the Departmental Annual Action Plans and Project Profiles for FY 2017/2018; Annual Capacity Building Plans for FY 2017/2018, and LRE plans where submitted to the Council for review and discussion.</p> <p>The 2016/2017 LG PAC report was submitted to the District Chairperson on 17th April 2017. Refer to the Namutumba DLG PAC delivery book that was opened 15th June 2013 where the PAC report was signed for by Ms Sooma Alice the Secretary to the DLG Chairperson.</p>
22	<p>The LG has responded to the feedback/complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<p>• Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 2.</p>	2	<p>Yes, the district has a designated person who has been formally assigned to respond to grievances, feedback from the citizens on the budget website.</p> <p>Refer to the Official Letter from the office of the CAO dated 24th January 2018 Ref number CR/156 written to the office of the District Information Officer assigning them that role.</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> <p>• Evidence that the procurement plan and awarded contracts and amounts are published: score 1</p> <p>• 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.</p>	<p>2</p> <p>1</p> <p>0</p>	<p>Yes, the LG Payroll and Pensioner Notice boards were posted on the HR notice board.</p> <p>The Procurement and Contracts notice board had the necessary awarded contracts and amounts displayed on the Finance notice board.</p> <p>No, there is no physical evidence submitted to show that the district performance results and budget implications are shared and published since this is the first year the LG assessment was done.</p> <p>The Budget desk team and DIO noted that while the district had a registered URL www.namutumba.go.ug, the website was in its formative stages but would be set up and updated with all the relevant information as soon as possible.</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>	<p>• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1</p>	<p>1</p>	<p>Yes, the hard copies submitted by the ministries for example on LG planning or DDEG are disseminated to LLGs.</p> <p>For example the District planner issued and oriented LLGs and key Education staff on the Guidelines for the Distribution of the Discretionary Development Equalisation Grant for the FY 2016/2017 in Sept 2017.</p> <p>For example refer to the approved Requisition submitted to the CAO for the aforementioned activity dated 12 Sept 2017. The voucher also contains signed Registration form attached to the Confirmation of receipt schedule for 6 District staff and 68 LLG staff from both admin and Education sector which were signed by officers from 8th Sept 2016 – 14th Sept 2016.</p>

		<ul style="list-style-type: none"> • Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc..) with the public to provide feed-back on status of activity implementation: score 1. 	1	<p>Yes, there is evidence that the LG conducted discussions with the public to provide feedback on the status of activities implemented during the last FY. These efforts have been predominantly undertaken through radio and community sensitization meetings.</p> <p>Refer to report dated 31st May 2017 which was developed and submitted to the Office of the CAO for the community meeting held on malaria control in the DLG. At this meeting, the District Information Officer disseminated the District Malaria Control Sustainability Plan. Other community engagement meetings held include 4 trade sensitisation meetings held by the Department of Production and Marketing.</p> <p>Refer to page 78 of the Cumulative Department Work plan Performance for the FY 2016/17 under output on Trade Development and Promotion Services.</p>
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Assessment area: Social and environmental safeguards

25	<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2. 	2	<p>Yes, Namayumba DLG has a gender Focal Person who rendered guidance to 21 sector head on 10/3/2017. And submitted to registry on 10/3/2017.</p> <p>The importance of gender mainstreaming was discussed as well as key issues noted including lack of gender mainstreaming literature and budgeting manuals for the new officers. It was prepared by Nandase Esther , the GFP and Senior Probation and Welfare Officer.</p> <p>The letter of assignment of duties for GFP was dated 19th October 2017 by CAO Kanyarokye Moses</p>
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• Evidence that gender focal point has planned activities for current FY to strengthen women's roles and that more than 90% of previous year's budget for gender activities has been implemented: score 2.

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The GFP in Namutumba LG had a Uganda Women Entrepreneurship programme final budget and work plan signed by CAO Muhuta Akintore on 14th September 2016, CFO Basalirwa George and Nandase Esther as the SPSWO/EWEP Focal Person. It included training of women groups in IGAs and sensitisations.

There was a progress report in which Works was noted to have recruited at least 30% women for the road gangs and construction of pit latrines for both boys and girls in Bawazir, Kirerema and Kisiro Primary schools amongst others. It was dated 27/6/2017 as prepared by the Senior Probation Officer.

During FY 16/17 under community development the total budget was 415,319,000 .

Releases were (UWEP -170,000,271; YLP – 246,569,496; FAL ,Labour, Community services and Gender mainstreaming received 10,538,576 for qtr 1, 2 and 3 each and 10, 117.333 in qtr 4.

Total budget realisati giving 73.51 %

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

Maximum 6 points on this performance measure

- Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 2

2

Yes, there are some staff and weak system to manage the environment. As in, Physical Planner who is Ag Environment Officer, while the SEO is on study leave, Forestry Officer. The assessor notes 8 vacant positions under the department of Natural Resources. The Ag. Environment officer, in Namutumba had 11 environment impact questionnaire including for ;

- Staff house at Ivukula HCIII not dated
- Renovation of Maternity Ward at Namutumba HCIII not dated
- Construction of 2-stance pit latrines at Kasozi Pr.Sch, Nangonde s/c headquarters and Kiranga HCII but all are not dated
- Partial ceiling construction at Magala HC III also not signed

Under works there was evidence of Routine Mechanical Maintenance of Bubago – Bukonde road (4km), Mpulina mosque – Nawambete- Ivukula road (.....) and Buwidi – Mulama road (.... km) all not dated

There was also opening and shaping of Nangode TC roads and Bunyagire –Iwungiro-Kisega Iringa road all not signed and mitigations attached.

There was a report on environment screening of district capital development projects dated 24th Jan 2017 by Samanya Paul (Physical Planner and Ag. Environment Officer. It was received in registry on 15/8/2017

For 2017/18 the Officer had a request for screening paid under cheque No. 0000676 from LGMSD

The Environment Officer who was handling a plan and budget left for study leave and he was not involved. The planner had provisions under travel inland for mitigation measures and screening was planned for water, education and road sectors

<ul style="list-style-type: none"> Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1 	1	<p>Yes there was evidence that environmental and social management plans in the contract bid documents;</p> <p>Evidence was on page 3 of 4 FY 16/17 BoQs for a 2 Stance Pt Latrine at Kiranga HC II.</p> <p>Roads sector under road fund included tree planting</p> <p>SFG under education; page 3 of 4 under Finishing , F provides for environmental mitigation measures</p>
<ul style="list-style-type: none"> Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1 	0	<p>At the district head quarters there is a title upon which the Plant clinic is being constructed. It was a Freehold Title Block 22 Izirangobi Plot 34 BUSIKI. 87.4Hectares.</p> <p>Schools : Only one school Namutumba Upper Primary school with a title though no on going project and it is in the names of CoU St Michael. No effort were exhibited to acquire titles</p> <p>Health centres: No tilte was available for any HC facility much as there are on going projects at Nsinze HC IV</p> <p>Bore holes: One letter of agreement was available dated 20/12/2017 for DWD;51909 located on Nabituluntu Village in Nawaikona Sub county. This was funded by KIBO group an NGO. The district was not in the practice of having land agreements for Bore hole and deep wells. Kaggwa Abbey DWO was to avail them on 25/1/18 but he failed to trace any..</p>

		<ul style="list-style-type: none"> • Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2 	2	<p>The Officer had 5 Environmental and Social Mitigation Certificates forms</p> <ul style="list-style-type: none"> • one for 6 Borehole sitting, installation and drilling by Icon Projects dated 17/5/2017 for Senior Env. Officer at 1,500,000/= • mechanical maintenance of Mazuba-Ivukulu-Bogodo road under force on Account dated 23/6/2017 • Routine mechanical maintenance of kalamira –Kagulu- Izimba road dated 30/6/2017 • Routine mechanical maintenance of Nabinyonyi- Namutumba road dated 30/3/2017 • On 11/5/2017 the officer had a certificate for Drilling, casting, and installation of 6 deep wells NAMU 574/wrks/16-17/0003 <p>The Physical Planner was proposed to act as Environment Officer in a handover report dated 17/10/2017 by Dauda Ikaaba as he left for study leave</p>
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LGPA 2017/18

Educational Performance Measures

Namutumba District

(Vote Code: 574)

Score 33/100 (33%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Human Resource Management				
1	<p>The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4 	4	<p>There is evidence that the LG education department budgeted for teachers with a wage bill of 7,680,531,531 for 1,253 Teachers in 109 schools with in FY 2017/2018 as submitted to MoFPED on 20/01/2017.</p> <p>This clearly caters for a head Teacher and a minimum of 7 Teachers per school.</p>
		<ul style="list-style-type: none"> Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4 	0	<ul style="list-style-type: none"> - There are 95 Substantive Head Teachers with a gap of 14 Head Teachers. There are 1229 Teachers in place and with a total staff gap of 24 Teachers inclusive of Head Teachers. - Advert in place to recruit 6 Teachers as of 24/10/2017. Job advert No. 1/ 2017 on page 36 of the Daily Monitor. - However given the existing Gap of 24 staff inclusive of Head Teachers, there was no effort to initiate recruitment process and only 6 positions were advertised without clear Justifications

2	<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0 	3	<p>The Wage bill for Teachers caters for 1,253 Teachers as per Performance Contract. There are 1229 Teachers in place and with a staff gap of 24 Teachers.</p> <p>This translates into 98.08% staffing rate in Namutumba District</p>
3	<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6 	6	<p>-There are 2 inspectors as per the Staff structure for FY 2016/2017. However currently one was on interdiction</p> <p>- Their Minute No's. as per the appointments as inspectors are</p> <ol style="list-style-type: none"> KLR/DSC/758 IV (b)/2009 NTB/DSC/41/2012 (d)
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>	0	<p>There was no evidence that the LG education department had or submitted a recruitment plan to HRM. There were staff recruitment lists but could not tally with the gaps at the department</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>All inspectors were in place as per the staff structure</p> <p>and fully appointed. There Minute Numbers of appointment are</p> <p>Their Minute No's. as per the appointments are</p> <ol style="list-style-type: none"> KLR/DSC/758 IV (b)/2009 NTB/DSC/41/2012 (d)

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>Evidence that the LG Education department appraised school inspectors during the previous FY</p> <ul style="list-style-type: none"> • 100% school inspectors: score 3 	0	<p>The review of personnel files confirmed that Namutumba District has (2) substantively appointed Inspectors of schools. However there was no evidence to show that the (2) inspectors of schools were appraised for FY 2016/17. The performance appraisal reports on file are for FY 2012/13 (Kalisengawa Fred) and FY 2014/15 (Batana Damalie) respectively.</p>
	<p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department appraised head teachers during the previous FY.</p> <ul style="list-style-type: none"> • 90% - 100%: score 3 • 70% - 89%: score 2 • Below 70%: score 0 	0	<p>Only 7.4% (7) out of the (95) primary head teachers who filled the Public Service performance agreement forms for calendar year 2016 were appraised and the annual performance reports for the calendar 2016 were on file. The annual performance reports were signed by the DEO on January 6-24, 2017. It was reported and noted that (1) out of the (9) sub counties (Nangode S/C) had submitted the performance reports for the (7) head teachers by the time of the assessment (January 24-25, 2018).</p>

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>	<ul style="list-style-type: none"> • Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1 	0	<p>There is evidence of communication of some of the guidelines as per Meeting minutes held at the District Council Main Hall on 31/05/2017 where they discussed NIRA registration of pupils, They were signed by the Chairperson & Secretary of the Head Teachers Association.</p> <p>Minutes of a meeting held on 12/7/2017 at Basoga Nsadhu Memorial Tech Institute where they discussed the implementation of a tool from DES about Teacher effective supervision. Minutes were signed by Secretary & Chairperson.</p> <p>However, these were not all the policies issued by the national level.</p>
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		<ul style="list-style-type: none"> Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level, including on school feeding: score 2 	0	There are some Minutes in place showing meeting discussing many issues, however there were no minutes clearly showing a discussion on school feeding or even a policy document or guideline issued by the Education department at the LG to guide schools on the school feeding policy.
7	<p>The LG Education Department has effectively inspected all private and public primary schools</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that all private and public primary schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> 100% - score 12 90 to 99% - score 10 80 to 89% - score 8 70 to 79% - score 6 60 to 69% - score 3 50 to 59% score 1 Below 50% score 0. 	0	<p>There was no evidence of presence of Quarterly Inspection reports by the time of Assessment at the department and there was no list of inspected schools.</p> <p>DIS who was responsible for Inspection was on interdiction so reports could not be accessed and the department claims he never shared the reports with the department.</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"> 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 	0	<p>Departmental minutes were not in place reflecting discussion about inspection reports.</p> <p>School inspection reports were not in place.</p>
		<ul style="list-style-type: none"> Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2 	0	There is no evidence showing submission of Inspection reports to DES in MoES

		<ul style="list-style-type: none"> Evidence that the inspection recommendations are followed-up: score 4 	4	<p>Yes, there was evidence of follow up of recommendations from the Inspection reports as per CAO's letter to the Schools on 27th March 2017. Sample schools followed up include God's Mercy Magada, Genesis P/S Nsinze and Sharp Kids Ivukula.</p> <p>Follow up included issues as issued in the inspection feedback form included those of School Licensing, availability of curriculum books, Sanitation facilities, SMC's, Trained Teachers.</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"> Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5 	5	<p>List of Schools in EMIS report tally with the OBT.</p> <p>Sampled schools are</p> <ol style="list-style-type: none"> Nsoola P/S Kasozi P/S Day Light P/S Soul City P/S
		<p>Evidence that the LG has submitted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and OBT: score 5</p>	0	<p>Enrolment data was not Consistent for all schools.</p> <p>Sampled Enrolment in schools</p> <ol style="list-style-type: none"> Luzinga P/S had 616 pupils, 616 while on EMIS it is 632 Bulange Tefte P/S had 1097 while EMIS 1097 <p>Since the sampled schools reflect a 50% consistency then the data is not accurate.</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"> Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc...during the previous FY: score 2 	2	<p>Yes, there is evidence that the Standing Committee on Social Services met and discussed Education service delivery issues like inspection, sector performance and planned priorities.</p> <p>For example the committee met on 10th March 2017 and discussed issues presented by the DEO in a departmental report as evidenced by deliberations on Minute 5/SS/03/2017 in the third presentation.</p> <p>The issues focused on the status of staff in the department, performance of sector grants, and supervision. Refer to Education and Sports Department Report for quarter II (Oct – December 2016) dated 7th March 2017.</p> <p>The Chairperson of the Standing Committee for Social Services Committee presented a report from the committee meeting to the fuller District Council in a meeting held 27th March 2017. Refer to Minute 23/Cou/2017 where the report was received and discussed.</p>
		<ul style="list-style-type: none"> Evidence that the education sector committee has presented issues that requires approval to Council: score 2 	2	<p>Yes. The sector committee presented issues that require approval from council.</p> <p>Refer to District Council meeting held 27th March 2017, Minute 23/Cou/2017, where the Chairperson of the Standing Committee for Social Services presented a report to the fuller District Council for discussion.</p> <p>The report included among others issues for approval on recruitment of key staff within the department. This submission was extracted out of a committee meeting held on 10th March 2017.</p> <p>Refer to Minute 5/SS/03/2017 in the third presentation where the DEO submitted a departmental report noting key staffing gaps in the sector.</p>

11	<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0</p>	0	<p>17 schools out of 109 government aided schools have been seen to have SMC lists and minutes in place. There are no SMC Lists and minutes in place for all the 78 private schools in Namutumba District. All schools in total are 187. Therefore 17/187 gives = 9.09%</p>
12	<p>The LG has publicised all schools receiving non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<p>• Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3</p>	0	<p>There was no evidence of publicising schools receiving non-wage recurrent grants on the noticeboard and they were not even available on file</p>
Assessment area: Procurement and contract management				
13	<p>The LG Education department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<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	<p>SAWP was not in place, procurement requests seen but could not reflect submission date to PDU.</p>

14	<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points 	3	<p>For all the contracts for the project implemented in 2016/17 in the department it was observed that the DEO timely recommended suppliers for payment before elapse of the prescribed payment dates in the contracts (all contracts were to be paid within 30days after presentation of the invoices) for example:</p> <p>The contract for Namunhanha construction for constructions at Nawansagwa PS an invoice was presented on 27th/03/2017 and DEO approved on 12th/4/2017</p> <p>Contract to Naluweire Construction for Bawazwi PS an invoice was raised on 30th/01/17 and the department approved on 10th/02/17</p> <p>Contract to Prospa Engineering services an invoice was raised on 7th/03/2017 and DEO approved on 9th/03/2017</p>
Assessment area: Financial management and reporting				
15	<p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by mid-July for consolidation: score 4 	0	<p>No, there is no evidence that the Department of Education submitted annual performance reports for all four quarters to the planner by Mid - July for consolidation</p>

16	<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points o If all queries are not responded to score 0 	2	<p>From the review of the audit reports a number of queries were raised including:</p> <p>Unauthorized expenditure of 45,407,015 this query was dropped since the DEO provided acceptable explanation and the error was corrected</p> <p>Failure to account for 4,829,000 the accountabilities were filled and presented to the committee in a letter dated 19th/06/2017</p> <p>Payment of ghost teachers; teachers head count was undertaken and ghosts removed from the payroll</p>
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Assessment area: Social and environmental safeguards

17	<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc...: Score 2 	0	<p>There has not been any minutes or any report to prove dissemination of guidelines on how Senior Women/Men teachers are to provide guidance to girls and boys to handle hygiene, reproductive health, and life skills</p>
		<ul style="list-style-type: none"> Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2 	0	<p>There is no explained guidelines on how to manage sanitation for girls and PWDs in primary schools in place as issued or explained/sensitized.</p>
		<ul style="list-style-type: none"> Evidence that the School Management Committee meet the guideline on gender composition: score 1 	0	<p>Sampled School Lists revealed that not all the SMC's in place don't meet the guidelines on Gender Composition of at-least 2 women on the foundation body of the SMC.</p> <ol style="list-style-type: none"> Namutumba Modern Muslim P/S - Non Compliant Nsoola P/S - Non Complinat Namutumba P/S - Compliant

18	<p>LG Education department has ensured that guidelines on environmental management are disseminated</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none">• Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 3:	0	<p>There is no evidence in place to show that the department had issued guidelines on environmental management</p>
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LGPA 2017/18

Health Performance Measures

Namutumba District

(Vote Code: 574)

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</p> <ul style="list-style-type: none"> • More than 80% filled: score 6 points, • 60 – 80% - score 3 • Less than 60% filled: score 0 	0	<p>Namutumba District didn't fill the structure as planned because there was a shortfall of 46,186,858/= Ugsh. And there was a letter on file date 13th Sept 2017 from the public service deferring recruitment until the funds are available</p>
2	<p>The LG Health department has submitted a comprehensive recruitment plan to the HRM department</p> <p>Maximum 4 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers:</p> <p>score 4</p>	4	<p>There was a recruitment plan on file with the DHOs office and same recruitment plan was found with HR. The communication was dated 6th May 2016.</p>
3	<p>The LG Health department has ensured that performance appraisal for health facility in charge is conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the health facility in-charge have been appraised during the previous FY:</p> <ul style="list-style-type: none"> o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0 	8	<p>Namutumba district has one HC IV namely Nsinze. The in-charge (Dr.Serunjoji) was substantively appointed by CAO on 22/8/17. He was appraised for FY 2016/17 on 18/7/17 as evidenced by existence on file the annual performance appraisal report, signed and stamped by ACAO on 10/8/17</p>

4	<p>The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4 	0	<p>Because of the shortfall in PHC the health sector didn't recruit and therefore no deployment done.</p>
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Assessment area: Monitoring and Supervision

5	<p>The DHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the DHO has communicated all 		<p>There was evidence, the DHO office communicated all policies, guidelines and circulars to health facilities. One policy document Consolidated Guidelines for Prevention and Treatment of HIV in Uganda Dec 2016 was found at both DHOs office and facilities visited in addition the Health Sector Quality Improvement Framework and Strategic Plan 2015/16-2019/20 and National HIV Testing Services Policy and Implementation Guidelines 2016 was also found in two of the facilities visited.</p> <p>The following policies and guidelines were found at the DHOs office: Essential medicines and Health Supplies List for Uganda 2016, National HIV Testing Services Policy and Implementation Guidelines 2016, Consolidated Guidelines for Prevention and Treatment of HIV in Uganda Dec 2016, <i>Health Sector Quality Improvement Framework and Strategic Plan 2015/16-2019/20</i>, National Quantification Report for Public Health Facilities in Uganda April 2017.</p> <p>With regard to circulars on 27th November 2017 there was communication regarding the MPDSR orientation and strengthening committees, on 15th Sept 2016 there was communication on District Level Micro Planning Exercise in preparation of Universal coverage for LLINS, on 6th July 2017 there was communication on the Roll Out of MOH HFQAP. On 1st June 2017 there was communication on Introduction of MOH Support Supervision Team, on the 13th Jan 2017 the was communication on Reporting on Amoxicillin 250g dispersible tablets, on 16th January 2017 the was communication on</p>
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<p>guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3</p>	<p>3</p>	<p>Efficient Use of Resources provided by the Health Development Partner on 29th May there was communication USAID/Uganda Baseline Assessment for Malaria Action Program for Districts on 31st Jan 2017 there was communication Participation of District in Upcoming Essential Medicines and Health Supplies Push and Pull Pilot on 10th Aug 2016 there was communication on Piloting the District assessment Tool for Anaemia</p> <p>At the facilities the following policies and circulars were found:</p> <p>Magada HCIV: National HIV Testing Services Policy and Implementation Guidelines 2016, Consolidated Guidelines for Prevention and Treatment of HIV in Uganda Dec 2016. No circulars from DHO were found.</p> <p>Namutumba HCIII: Consolidated Guidelines for Prevention and Treatment of HIV in Uganda Dec 2016, Health Sector Quality Improvement Framework and Strategic Plan 2015/16-2019/20 and no circulars on file</p> <p>Bukonte HCII: No policies and circulars were found at the facility.</p> <p>Nsinze HCIV: Consolidated Guidelines for Prevention and Treatment of HIV in Uganda Dec 2016, but no circulars on file</p> <p>Nakisiogi HCIII: Health Sector Quality Improvement Framework and Strategic Plan 2015/16-2019/20, National HIV Testing Services Policy and Implementation Guidelines 2016, and one circular for Mentorship/Supervision for increased uptake of Viral Load Testing.</p>
<p>• 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</p>	<p>0</p>	<p>There was no evidence the DHO disseminated guidelines, policies and circulars to facility in charges. There were three CMEs where the DHO held meetings facility staff to disseminate “change on new guidelines for planning and budgeting”. However, the content of this dissemination focused on quality improvement. There was one bullet in the report related to the said dissemination “” health workers were reminded on planning, budgeting and quality improvement in health care””.</p>

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

Maximum 6 points for this performance measure

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

0

There was no evidence, Nsinze HCIV was supervised by DHT mainly because information at DHOs office not consistent with information at facility.

According to the supervision files at the DHOs office Nsinze HCIV was supervised in March and June 2017 and Sept 2016. But at the facility, data from two supervision books, supervision happened on 20th Sept, 15th Nov and 6th Dec 2016 and in 2017 on 6th Feb and 11th Nov.

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

0

There was no evidence, the DHT supervised the lower facilities, because information found at DHOs office was not consistent with information found at the facilities.

At the DHOs office there was file for support supervision. The first report was for integrated support supervision period of the supervision not identified and DHT team of four conducted the supervision. The second supervision report was conducted between 1st and 8th June 2017. The following facilities were supervised: Nsinze HCIV, Bulange HCII, Magada HCIII, Kagulu HCII, Buyoboya HCII and Kikalu HCII. In this report both positive and negative findings were identified, but no action plan developed but not specific to the facility. The action plan was general, and it would be a challenge to follow up on the specific challenges identified in each facility. On 27th to 31st Mar 2017 a five DHT member team supervised Nsinze HCIV, Magada HCIII, Bulange HCIII, Ivukula HCIII, Nabisoigi HCIII, Namutumba HCIII, Kiranga HCII and Kikalu HCII. Like the previous report there were no facility specific action plans only a general action plan for all facilities.

On 5th -9th Dec 2016 an integrated supervision was conducted for Mulama, Buyoboya, Bugobi, Kikalu and Kisowozi. This particular report was confusing, there was follow up report (most likely for previous report) and two sections on positive findings but different findings.

On 2nd Sept -3rd October 2016 another integrated supervision was conducted and there was no list of facilities supervised. The report had a follow up report, no reference information for the action plan, and findings of the supervision missing.

			<p>The last report on file was dated 20th Sept 2016, but duration for the activity not identified. Health facilities supervised were Nsinze HCIV, Magada, Bulange, Ivukula, Nabisoigi and Namutumba HCII. A six DHT team supervised and there were both negative and positive findings for each facility, but action plan was general. All above supervision reports were not signed.</p> <p>To verify the above information the following facilities were visited: Namutumba HCIII, Nsinze HCIV, Magada HCIII, Bukonte HCII, Nabisoiga HCIII. At Magada HCIII there were DHT supervisions on the 25th Aug, 8th Sept, 18th Nov of 2016. Namutumba HCIII was supervised on 19th Aug, 8th Sept, 9th Sept and 17th Nov all of 2016. Bukonte HCII was supervised on 6th Sept, 9th Sept and 5th Nov of 2016, Nsinze HCIV was supervised on 20th Sept, 15th Nov, 6th Dec of 2016 and 6th Feb 2017, Nabisoigi HCIII ON 20th Sept, 15th Nov, 1st Dec of 2016 and 11th Jan 2017.</p>
7	<p>The Health Sub-district(s) have effectively provided support supervision to lower level health units</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that health facilities have been supervised by HSD and reports produced: • If 100% supervised score 6 points • 80 - 99% of the health facilities: score 4 • 60 - 79% of the health facilities: score 2 • Less than 60% of the health facilities: score 0</p>	<p>0</p> <p>There was no evidence of HSD supervision because there were no reports available either at the DHOs office or at HSD. However, at the facilities in the supervision log books this information was found: Namutumba HCIII had HSD supervision on 6th Oct 2016, 10th April and 7th June of 2017. Magada HCIII was supervised on 4th Oct and 10th Dec of 2016, Bukonte HCII was supervised on 5th Nov 2016, Nabisoiga HCIII on 14th Oct 2016.</p>

8	<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4 	0	With no reports for HSD supervision there was no evidence of discussions and action plans development.
		<ul style="list-style-type: none"> • Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6 	0	No evidence since no reports were available
9	<p>The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> o List of health facilities which are consistent with both HMIS reports and OBT: score 10 	10	There was evidence the list of facilities in HMIS and OBT are consistent and accurate. Both the HMIS and the OBT were reviewed.

Assessment area: Governance, oversight, transparency and accountability

10	<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2 	2	<p>Yes, there is evidence that the Standing Committee on Social Services met and discussed Health service delivery issues like inspection and sector performance.</p> <p>For example the committee met on 10th March 2017 and discussed issues presented by the DHO in a departmental report as evidenced by deliberations on Minute 5/SS/03/2017 in the second presentation.</p> <p>The issues focused on the status of staff in the department, ownership of health centre facilities, as well as performance of sector grants. Refer to Health Department Report dated 9th March 2017 which was developed by the DHO for presentation to the committee.</p> <p>The Chairperson of the Standing Committee for Social Services Committee presented a report from the committee meeting to the fuller District Council in a meeting held 27th March 2017. Refer to Minute 23/Cou/2017 where the report was received and discussed.</p>
		<ul style="list-style-type: none"> Evidence that the health sector committee has presented issues that require approval to Council: score 2 	2	<p>Yes. The sector committee presented issues that require approval from council.</p> <p>Refer to District Council meeting held 27th March 2017, Minute 23/Cou/2017, where the Chairperson of the Standing Committee for Social Services presented a report to the fuller District Council for discussion. The report included among others issues ownership and redistribution of Health Centres in the DLG.</p> <p>This submission was extracted out of a committee meeting held on 10th March 2017. Refer to Minute 5/SS/03/2017 in the second presentation where the DHO submitted a report noting ownership and location of existing HCs. The council discussed priority set up of new HC in the newly created constituency.</p>
11	<p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 5 points</p>			<p>There was no functional HUMCs in the district. Information found at the DHOs office was inconsistent with information at facilities, in addition there was more information at the DHOs office and less at facilities and yet in ideal situation there would be more information at facility, because HUMC meetings take place at facilities and minutes may be shared with DHO.</p> <p>In addition none of the facilities visited had the</p>

Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):

- If 100% of randomly sampled facilities: score 5
- If 80-99% : score 3
- If 70-79%: : score 1
- If less than 70%: score 0

0

mandatory four meetings, because the minutes were not signed both at DHOs office and at facility. Below are the findings:

At the DHOs office there was a HUMC file and there were minutes of meetings held by a few facilities in the district. On 8th Sept 2016 there was a meeting in Ivukula HCIII this meeting focused on the handover of in charges. The attendance list of this meeting seemed to have both staff and HUMC members, therefore it was difficult to establish the composition of the HUMCs for Ivukula HCIII in that meeting. On 13th Oct 2016 there was another meeting, and in attendance were three females and four males, but no budget issues were discussed. This means two meetings were held in the same quarter. In the 29th Dec 2016 and 3rd July 2017 meetings no budget or resource issues were discussed. There were also minutes for Kiranga HCII for the first, second, third and fourth quarter of 2016/17 all minutes were one pager and not signed. On 23rd Sept 2016 and 11th Jan 2017 there were HUMC meetings for Lwatama HCII, and no discussion on budget was held. In the meeting of 22nd Mar 2017 there was a mention of PHC money received but the amount not mentioned, while on 27th June 2017 there was a mention of the development of the workplan and budget. For Nabisoigi HCIII there was a meeting on 24th Mar 2017, 10th Sep 2016, 29th Nov 2016 and 21st June 2017. All minutes except one were signed off by the secretary and only one by both secretary and chairperson. For all meetings there was no discussion on budget or resource issues. For Buyoboya HCII there were meetings held on 25th Mar 2017, 14th Nov 2016 and 8th June 2016 and one of the minutes were signed. Bukonte HCII there were minutes for 20th Nov and 21st Sept of 2016, 24th May and 28th Mar of 2017 the composition was two female and one male and there was no discussion on the budget and resources in the minutes. For Irimbi HCII there were minutes for 5th April and 9th June of 2017, 10 July and 13th Dec of 2016. Two of these minutes were not signed and for all meetings budget and resources were not discussed. The composition of the HUMCs could not be established because attendance list only one name for the member was written.

At the facilities, Magada there was only minutes for one meeting on 1st Aug 2016, at Namutumba HCIII there were minutes for 1st Oct, 21st Dec of 2016 and for 23rd Mar 2017. Only in one meeting was there a mention of resources in particular PHC and minutes not signed. At

				Bukonte HCII and Nsinze HCIV the HUMC files were not available. Nakisoigi HCIII a file was available but information was inconsistent with that at DHOs office.
12	The LG has publicised all health facilities receiving PHC non-wage recurrent grants Maximum 3 for this performance measure	<ul style="list-style-type: none"> Evidence that the LG has publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards: score 3 	0	No evidence of LG publicising all health facilities PHC non-wage recurrent grants at the DHOs office notice board. At facilities visited no facility had PHC non-wage funds publicised on notice board.

Assessment area: Procurement and contract management

13	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 Maximum 4 for this performance measure	<ul style="list-style-type: none"> Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2 	0	The following investment were planned for 2017/18. Completion of fencing of Nsinze HCIV, construction of the four-stance latrine at Nsinze HCIV and construction of a four-stance latrine at Ivukula HCIII. But all investments were managed by DDEG and not the health sector.
		Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2	0	There was no evidence the health department submitted procurement request form PP5.

14	<p>The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time: • 100% - score 8 • 70-99% – score 4 • Below 70% - score 0 	8	<p>This activity was coordinated by the centre and at the DHOs office there were procurement plans for Nsinze HCIV and all HCIII and HCII. The procurement plans were dated 19th Jan 2017 and attendance list attached.</p>
15	<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 2 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points 	2	<p>There were no projects undertaken in the health department in 2016/17 the reason given was that PHC projects are now handled under District Discretionary Equalization Grant.</p>
Assessment area: Financial management and reporting				
16	<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4 	0	<p>No, there is no evidence that the Department of Health submitted annual performance reports for all four quarters to the planner by Mid - July for consolidation</p>

17	<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0</p>	0	<p>From the review of the audit reports it was observed that the department had a number of queries including:</p> <p>Understaffing in health units especially Nakyere HC II</p> <p>Health units were operating without a work plan, vouchers, minutes of health management committee and poor filing of accountability documents</p> <p>Absenteeism of officers at Nsinze HC IV</p> <p>Although there was some action taken to address some of these queries for example transferring officers to allow close supervision, not all queries were addressed.</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>	<p>• Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2</p>	2	<p>There was evidence of HUMCs meeting the gender composition requirement. Kiranga HCII had a composition of two females to three, Ivukula HCII had three females and four males, Lutwama HCII had three females and three males, Nabisoigi HCIII had two female and one male, Buyoboya HCII had two female and one male, and Nsinze HCIV had three females and eight males.</p>
		<p>• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2</p>	0	<p>There was no evidence, the guidelines for sanitation in health facilities were issued. At the DHOs office there was no evidence in communication file and at facilities there were no circulars from the DHO regarding the guidelines.</p>

19	<p>The LG Health department has issued guidelines on medical waste management</p> <p>Maximum 2 points</p>	<ul style="list-style-type: none">• Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal : score 2 points.	0	<p>There was no evidence, the guidelines for medical waste management including those for construction of facilities for medical waste disposal were issued. At the DHOs office there was no evidence in communication file and at facilities there were no circulars from the DHO regarding the guidelines.</p>
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LGPA 2017/18

Water & Environment Performance Measures

Namutumba District

(Vote Code: 574)

Score 77/100 (77%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: score 10 	10	<p>Yes, the LG Water department has targeted the less safe coverage Sub-counties. The District safe water coverage average is 71% based on Target water coverage by 30/06/2018. The only Sub-county with safe water coverage below the District average coverage (Bulange with 51%) has been targeted to receive 4 out of 18 new Boreholes (Hand Pump) and 19 out of 45 old boreholes rehabilitated within in the current FY 2017/18 as indicated in the Annual Workplan and budget for FY 2017/18 received and stamped by DWD on 11/08/2017; Submitted Annual Work Plan for FY 2017/18 to the Permanent Secretary MoWE by CAO on 11/08/2017.</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"> Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15 	15	<p>The LG water Department implemented budgeted water projects in targeted sub-county of Bulange which had a safe water coverage of 49% which was far below the District average of 69% in the FY 2016/17 was allocated 4 new deep boreholes. The sub-counties of Magada/Mazuba and Ivukula/Nangonde had safe water coverages equivalent to the District average by then and were also targeted with 4 and 3 boreholes, all with funding from the DWSCG. The LG water Department budgeted for 18 new Deep Borehole Drilling (Hand pumps) as per Approved and stamped budget for Rural Water supply and sanitation (Bulange – 4 new BHs and 7 rehabilitated BHs, Ivukula/Nangonde – 3 new BHs with another funded by Kibo Group and 4 rehabilitated BHs, Mazuba/Magada – 4 new BHs and 11 rehabilitated BHs). Evidenced from the performance Contract Form B for Q4 FY 2016/17; Submitted and stamped Annual Progress Reports for FY 2016/17; AWP for FY 2016/17; Borehole siting, pumping test and log sheets during FY 2016/17. List of Contracts entered into and financed under the DWSCG for the FY 2016/17. Fourth Quarterly Department Workplan performance report for the FY 2016/17; and the procurement requisition forms filled in for drilling, test pumping and casting for the FY 2016/17.</p>
Assessment area: Monitoring and Supervision				
3				

The LG Water department carries out monthly monitoring and supervision of project investments in the sector

Maximum 15 points for this performance measure

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

15

There is evidence of monitoring each WSS facilities annually as evidenced from:

(a) the list of rehabilitated boreholes during FY2016/17 with indication of parts replaced;

(b) Performance contract Form B Q3 FY 2016/17 submitted 12/05/2017, Q4 FY 2016/17 submitted 02/08/2017,

(c) Quarter 1 water and sanitation Quarterly Progress report (DWSCG) submitted to Permanent Secretary MoWE and received by DWD on 24/10/2016,

(d) Quarter 2 water and sanitation Quarterly Progress report (DWSCG) submitted to Permanent Secretary MoWE and received by DWD on 06/01/2017,

(e) Quarter 3 water and sanitation Quarterly Progress report (DWSCG) submitted to CAO on 03/04/2017; Approved Annual Work Plan submitted to the Permanent secretary MoWE on 11/08/2017;

(f) List of 45 Non-Functional Boreholes targeted to be rehabilitated this FY 2017/18;

(g) Water Quality Reports for samples collected from each water point source completed in FYs 2016/17 and 2017/18;

(h) Project monitoring reports for the months of June 2017 received at Namutumba DLG Central Registry on 03/07/2017; for the months of May 2017 received at Namutumba DLG Central Registry on 06/06/2017; for the months of April 2017 received at Namutumba DLG Central Registry on 05/05/2017; for the months of March 2017 received at Namutumba DLG Central Registry on 07/04/2017; for the months of February 2017 received at Namutumba DLG Central Registry on 10/03/2017; for the months of January 2017 received at Namutumba DLG Central Registry on 07/02/2017; for the months of December 2016 received at Namutumba DLG Central Registry on 06/01/2017; for the months of November 2016 received at Namutumba DLG Central Registry on 05/12/2016; for the months of October 2016 received at Namutumba DLG Central Registry on 10/11/2016; for the months of September 2016 received at Namutumba DLG Central Registry on 06/10/2016; for the months of August 2016 received at Namutumba DLG Central Registry on 09/09/2016; for the months of July 2016 received at Namutumba DLG Central Registry on 04/08/2016 etc.

Overall, the supervision and monitoring reports of each project matches with the plans.

4	<p>The LG Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data for the current FY: o List of water facility which are consistent in both sector MIS reports and OBT: score 10 	10	<p>Yes, the LG has submitted accurate/consistent data for the FY 2017/18. The list of water facilities submitted for the FY 2017/18 (construction of 1 public VIP Latrine at a RGC; 18 Deep Borehole drilling (Hand pump); 45 Borehole rehabilitations; and 72 Water quality testing for old sources in the sector MIS, the Performance contract reports and in the OBT are accurate and consistent. The numbers of facilities tally well with those filled in the procurement requisition forms.</p>
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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>The DPU had a file that contained the submitted list of all investment items from the DWO in the approved sector AWP and Budget on time. The DWO submitted a Water Department Annual Procurement Plan for FY 2017/18 to the CAO; Procurement requisition (LG PP Form 1) filled by the DWO and submitted to the PDU for all investment; Acknowledgement receipts for submission of planning and budget documents by the DWO to the PDU, dated 14/10/2016 for OBT Quarterly Reports FY (Q1 FY 2016/17); dated 03/01/2017 for OBT Quarterly Reports FY (Q2 FY 2016/17); dated 03/04/2017 for OBT Quarterly Reports FY (Q3 FY 2016/17); and dated 02/08/2017 for OBT Quarterly Reports FY (Q4 FY 2016/17).</p>
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The DWO has appointed Contract Manager and has effectively managed the WSS contracts

Maximum 8 points for this performance measure

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

2

The DWO was appointed as the Contract Manager by the CAO in a letter dated 08/02/2017 and there are Contract Management Files with clear contract management plans at the District Water Office. There is evidence of monthly monitoring of WSS facilities as seen from the Monitoring and assessment report for Quarter 1 FY 2016/17, received at Namutumba DLG Central Registry on 06/10/2016; the Monitoring and assessment report for Quarter 2 FY 2016/17, received at Namutumba DLG Central Registry on 10/01/2017; the Monitoring and assessment report for Quarter 3 FY 2016/17, received at Namutumba DLG Central Registry on 05/04/2017; and the Monitoring and assessment report for Quarter 4 FY 2016/17, received at Namutumba DLG Central Registry on 26/06/2017. Progress report for drilling, casting and installation of 9 deep wells for FY 2016/17 under Lot 2, dated 11/12/2017; Progress report for drilling, casting and installation of 9 deep wells for FY 2017/18 under Lot 1, dated 17/12/2017; Progress report for drilling, casting and installation of 9 deep wells for FY 2017/18 under Lot 2, dated 27/12/2017. The following Project monitoring reports for the months of July 2016 to June 2017, all filed with Namutumba DLG Central Registry are evidence of monthly monitoring.

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

2

Water and Sanitation facilities were constructed as per the designs. Five Hand pump Deep Boreholes (Mawungwe DWD53519; Bukasa B DWD61445; Nakabale - Isita DWD53519; Kasuuleta B DWD61446; and Kategere DWD61447) were sampled and visited. The facilities were found to have been constructed as per designs and were all functioning well. The committee members of each facility were asked the numbers of pipes installed and households served, and these numbers were tallying well with the depth of installations as indicated in the Borehole drilling, pump testing and log sheet and information in the contract management files/records with the DWO.

		<ul style="list-style-type: none"> • If contractor handed over all completed WSS facilities: score 2 	2	<p>Yes, contractors handed over all completed WSS facilities as seen in the written evidences of facility completion and payment in the Contract management file/records; Certificate of practical completion dated 30/12/2017; payment certificates dated 28/04/2017 and 27/06/2018; Commissioning report for water facilities (17 boreholes) drilled in FY 2016/17; Installation/record cards given and stamped by the LC 1 Chairperson of the beneficiary community.</p>
		<ul style="list-style-type: none"> • If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2 	2	<p>Yes, the DWO appropriately certified all WSS projects and prepared and filed completion reports with examples of Certificate of practical completion dated 30/12/2017; interim certificate of completion dated 29/06/2017; payment certificates dated 28/04/2017 and 27/06/2018; Contract management plans dated 06/02/2017 and 10/05/2017 in the contract management files/record for the various contracts; Completion report for hydrogeological survey, drilling, test pumping and installation of 6 deep wells under Lot 1 in Namutumba District FY 2016/17.</p>
7	<ul style="list-style-type: none"> • Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 	<ul style="list-style-type: none"> • Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 	3	<p>From the review of the projects undertaken by the water department, it was observed that DWO approves payments on time (before the elapse of the 30 day invoice payment date prescribed in the contract) for example:</p> <p>Maa technologies ltd presented an invoice on 03/10/2016 and it was approved on 10th/10/2016</p> <p>Royal Techno ltd submitted an invoice on 21st/06/2017 and it was approved on 30th/06/2016</p> <p>Sumadhura presented an invoice on 21st/06/2017 and it was approved on 30th/06/2017.</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"> • 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 	0	<p>No, there is no evidence that the Department of Water submitted annual performance reports for all four quarters to the planner by Mid - July for consolidation</p>
9	<p>LG Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 5 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0 	0	<ul style="list-style-type: none"> • From the review of the audit reports, two issues were raised that were supposed to be addressed by the department that is to say: <ul style="list-style-type: none"> o Lack of performance reports for projects supervised in 2016/17. CAO wrote to the officer to desist from such practices on 19th/10/2017. The team did not see the response from the DWO in terms of a performance report presented o Uncollected revenue of UGX 4,500,000 that was supposed to be collected from the water user committees as co-funding for borehole construction. This query was dropped and the officer cautioned to comply with government procedures. o Inequitable distribution of boreholes in the district this query had not been addressed by the time of the assessment o DWO had not accounted for UGX 1,611,000 and CAO wrote to him on 21/12/16 but the assessment has not ascertained the officer's response
<p>Assessment area: Governance, oversight, transparency and accountability</p>				

10	<p>The LG committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3 	3	<p>Yes, there is evidence that the Standing Committee on Works met and discussed Water service delivery issues like inspection and sector performance.</p> <p>For example the committee met on 19th May 2017 and discussed issues presented by the DWO as evidenced by deliberations on Minute 14/work/5/2017 where the budget, investment projects for the sector were discussed.</p> <p>The Chairperson of the Standing Committee for Works Committee presented a report from the committee meeting to the fuller District Council in a meeting held 27th March 2017. Refer to Minute 23/Cou/2017 where the report was received and discussed.</p>
		<ul style="list-style-type: none"> Evidence that the water sector committee has presented issues that require approval to Council: score 3 	3	<p>Yes. The sector committee presented issues that require approval from council.</p> <p>Refer to District Council meeting held 27th March 2017, Minute 23/Cou/2017, where the Chairperson of the Standing Committee for Works presented a report to the fuller District Council for discussion.</p> <p>The report included among others issues the budgetary allocations and the priority sector investment areas. This submission was extracted out of a committee meeting held on 19th May 2017.</p> <p>Refer to Minute 14/work/5/2017 where the budget, investment projects for the sector were discussed by the DWO. The council discussed and agreed on the allocations and priority areas.</p>

11	<p>The LG Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> • The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2 • All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2 • Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2 	<p>0</p> <p>2</p> <p>0</p>	<p>There were no such information on the district notice boards (at the DPU and the CAO). The Water Department did not have a notice board. There were no minutes found to indicate that the AWP, budget and Water Development releases and expenditures were advocated for in meetings. The AWP, budget and Water Development releases and expenditures are however available in files and records with the DWO.</p> <p>From a sample of WSS projects checked, it was found that all WSS projects were clearly labelled on the platform concrete casting indicating the name of the source (Village), the DWD Number, the date of construction, and the source of funding (DWSCG).</p> <p>No such information was displayed on the District Notice boards.</p>
12	<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1 	<p>1</p>	<p>Yes, the communities make applications for water sources and each application found in a file with the DWO, clearly spelt out that in case of the offer, community contributions (of UGX 200,000 in case of Deep borehole; or UGX 45,000 in case of a spring well or a GFS tap stand; UGX 100,000 in cases of Shallow well or rehabilitation of a borehole or shallow well; or UGX 50,000 to 100,000 in case of a spring protection) have to be made within 3 months. During the visits to the sampled facilities it was confirmed that for every community that received a facility, they actually made community contribution, set up WSC within 2 weeks from the village feedback meeting and fulfilled all other requirements.</p>

		<ul style="list-style-type: none"> • Number of water supply facilities with WSCs that are functioning evidenced by collection of O&M funds and carrying out preventive maintenance and minor repairs, for the current FY: score 2 	2	For each of the five water supply facilities visited, the WSCs were found to be well constituted of 7 to 9 members and were active (i.e. conducting regular meetings and collecting UGX1000 to UGX2000 per household per month for carrying out O&M, preventive maintenance and minor repairs).
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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"> • Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2 	0	Even though environmental screening were followed for the new and old boreholes and Public Latrines in RGCs in selected Sub-counties in Namutumba District for the FY 2016/17 and FY 2017/18; and the screening results were included in the BOQs to be used by the contractors in drilling, test pumping, construction and casting, and rehabilitation as well as in supervision and monitoring by the consultant/Supervisor, there was no EIA Reports at all available for the WSS projects.
		<ul style="list-style-type: none"> • Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1 	0	No evidence was adduced or seen to this effect since no serious environmental incidences were ever considered.
		<ul style="list-style-type: none"> • Evidence that construction and supervision contracts have clause on environmental protection: score 1 	1	There were Environmental screening guidelines for drilling/rehabilitation of Boreholes and Public Latrines in RGCs in selected Sub-counties in Namutumba District for the FY 2016/17 and 2017/18 as seen in the contract agreements and supervision consultancy reports.

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"> • If at least 50% WSCs are women as per the sector critical requirements: score 3 	0	<p>The facilities sampled and visited did not meet the sector critical requirements of women on the WSCs to be at least 50%. For the facilities visited, the composition of women on the WSCs of Mawungwe DWD53519 was 0/3; Bukasa B DWD61445 was 1/9; Nakabale - Isita DWD53519 was 3/7; Kasuuleta B DWD61446 was 2/7; and Kategere DWD61447 was 2/7.</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"> • If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3 	0	<p>The sanitation facility visited has no ramp for facility access by PWDs even though there are separate stances for PWDs. There is no labelling to show the gender sides.</p>