



## LGPA 2017/18

Accountability Requirements

Sheema District

(Vote Code: 609)

Assessment	Compliant	%
Yes	3	50%
No	3	50%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Assessment area: Annual performance contract			
LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.	xxx	The LG submitted an Annual Performance Contract to MoFEP on July 25th, 2017, the submission was done past June 30th.	No
Assessment area: Supporting Documents for the Budget required as per the PFMA are submitted and available			
LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).	xxxxx	The LG budget submitted to MoFPED was accompanied by a procurement plan. the plan and other documents are in soft copy in OBT.	Yes
Assessment area: Reporting: submission of annual and quarterly budget performance reports			
LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)	xxxxx	The LG submitted Annual Performance Report for the previous FY on 11th /8/17 and acknowledgment receipt No 04548 from MoFPED is available (did not happen as as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)	No

<p>LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)</p>	<p>xxxxxx</p>	<p>The LG submitted the quarterly budget performance report for all the four quarters: Receipts from MoFPED seen for all quarters ie</p> <p>Q1 dated 2nd /12/2016 receipt number. 0145</p> <p>Q2 dated 16th /3/2017 receipt number 0481</p> <p>Q3 dated 18th /5/2017 receipt number 0729</p> <p>Q4 dated 11th/8/2017 receipt number 4548</p>	<p>No</p>
<p>Assessment area: Audit</p>			
<p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous financial year by April 30 (PFMA s. 11 2g). This statement includes actions against all findings where the Auditor General recommended the Accounting Officer to take action (PFMA Act 2015; Local Governments Financial and Accounting Regulations 2007; The Local Governments Act, Cap 243).</p>	<p>xxxxx</p>	<p>The Local Government submitted the Internal Auditors Generals report status for the year 2015/16 on 21st /10/2016, and it was received by the Directorate of Internal Auditor at MOFPED 12th December 2016.</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>Unqualified opinion as per Auditor General's report of 2016/17 submitted on 29th December 2017 (page225)</p>	<p>Yes</p>



## **LGPA 2017/18**

Crosscutting Performance Measures

Sheema District

(Vote Code: 609)

Score 47/100 (47%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>All new infrastructure projects in: (i) a municipality; and (ii) all Town Councils in a District are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a municipality/district has:</p> <ul style="list-style-type: none"> <li>• A functional Physical Planning Committee in place that considers new investments on time: score 2.</li> </ul>	0	<p>The LG has a physical planning committee in place appointed on 14th /11/2011 and includes; DEO, DHO, Physical planner, Dist. Engineer, DWO, DMO, DAO, Town Clerks of 3 TCs, NRO,DCDO, among others.</p> <p>However, the committee has not transacted any business on Physical Infrastructure of the district</p>
		<ul style="list-style-type: none"> <li>• All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2.</li> </ul>	0	<p>The district has no Physical Plan, thus no infrastructure investments have been approved as required by Physical Planning Law.</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

There is synchronisation of the two documents Under Roads, the AWP FY 2017/18 page 70 talks about

- Construction of Rukondo Bridge at the boarder of Shuuku TC and Bugongi TC the same is found on Page 2 BCR.

- Light grading of district roads 79 kms (Kasaana-Kashekuro rd: Kasaana rukundo rd: Kyarwra Kasaana, Kitagata rd: Migina – Kanyeganyegegye rd; Rukundo- Muzira-Karyango rd; Kishambya- Nyakamarama - Kagati rd; among others page 70 AWP. This corresponds well with outcomes of the BCR page 2

Education, Budget Conference Report highlights: Completion of 2 Classrooms in Bigona PS, Rrugarama S/C AWP page 120, and completion of 2 classrooms in Nyakasharara PS in Kigarama S/c, AWP Page 62

Completion of education office block AWP page 18. and BCR page 30

Water; Rehabilitation of Katojo-Katooma GFS in Masheruka TC, Page 130 AWP and in BCR on page17

Rehabilitation of Kambugye GFS in Muhito ward Kitagata Town Council, page130 AWP and same if found in the BCR page 17.

<ul style="list-style-type: none"> <li>• Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If different, justification has to be provided and evidence that it was approved by Council. Score 2.</li> </ul>	2	<p>The LG derives its capital investment from the Approved 5 year Development Plan for example:</p> <p>Completion of 2 Classrooms in Bigona PS, Rugarama S/C AWP page 120. , and completion of 2 classrooms in nyakasharara PS in kigarama S/c, AWP Page 120 and the same priorities are reflected in the DDP page 83</p> <p>Under water, Rehabilitation of Katojo-Katooma GFS in Masheruka TC, Page76 AWP and derived from DDP page 119</p> <p>Rehabilitation of Kambugye GFS in Muhito ward kitagata Town Council, page130 AWP and same if found in the DDP page 119</p> <p>Purchase of a double cabin Pick up for the education sector AWP page 62 and page 88 of the DDP</p> <p>Light grading of 1040kms of district roads in various sub counties ppage140 of the DDP and page 70 AWP</p> <p>Bridges construction &amp; culverts linings AWP Page 70 and DDP page 142</p>
<ul style="list-style-type: none"> <li>• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1.</li> </ul>	0	<p>LG developed project profiles, as a standalone output. The profiles seen are elaborate and follow the format. They include; background, technical description, duration, funding source, work plan, M&amp;E strategy, EIA and mitigation plan, operation and maintenance plan.</p> <p>However, the profiles were not presented to TPC for discussion.</p>

3	<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> <li>Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum 1 point.</li> </ul>	0	<p>LG compiled a statistical abstract 2016/17FY. 2017/18, With gender disaggregated data. The abstract is yet to be discussed in the TPC</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"> <li>Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2</li> </ul>	2	<p>From the Annual Budget Performance Report, the infrastructure projects implemented by the LG were derived from the AWP and budget approved; examples are captured below:</p> <ul style="list-style-type: none"> <li>Light grading of Buraro – Kyeihara-Kassana- Kagati rd (19km) AWP page 19 approved budget shs 26,000,000 page 27</li> <li>Light grading of Nyabwina- masheruka-Nyakambu Katojo-Kangore rd (18km) page 19 AWP, approved budget shs 24,00,000 page 27</li> <li>Construction of Mashanga Bridge page 19,AWP, approved budget shs 31,803,000 page 27</li> <li>Light grading of Mukono-Kyengando-rwengiri- Nyakwebudika-Migina rd (15km) page 19 AWP, approved budget shs 24,000,000</li> <li>Construction of Katojo-Katooma GFS in Masheruka page 21 AWP, approved budget 42,545,000 page 30</li> <li>Renovation of Kitagata Hospital page 15 AWP approved budget shs 300,000,000 page 17</li> </ul>



• Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. o 100%: score 4 o 80-99%: score 2 o Below 80%: 0

2

From the Annual Budget Performance Report, the infrastructure projects implemented by the LG were derived from the AWP and budget approved; examples are captured below:

- Light grading of Buraro – Kyeihara-Kassana- Kagati rd (19km) AWP page 19 approved budget shs 26,000,000 page 27 (100% completion)
- Light grading of Nyabwina- masheruka-Nyakambu Katojo-Kangore rd (18km) page 19 AWP, approved budget shs 24,00,000 page 27 (100% completion)
- Light grading of Mukono-Kyengando-rwengiri- Nyakwebudika-Migina rd (15km) page 19 AWP, approved budget shs 24,000,000 ( work in progress by Q4 report)
- Construction of Katojo-Katooma GFS in Masheruka page 21 AWP, approved budget she 42,545,000 page 30 (100% completion)
- Renovation of Kitagata Hospital page 15 AWP approved budget shs 300,000,000 page 17 (80% completion by Q4 report)

5	<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects and assets during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2</li> </ul>	2	<p>From the Annual Budget Performance Report 2016/17 investment projects some were implemented and completed within approved budget for example :</p> <p>Light grading of Mukono-Kyengando-Rwengiri- Nyakwebudika-Migina rd (15km)</p> <p>Approved budget shs 24,000,000</p> <p>Actual expend shs 38,000,000 = 16%</p> <p>Renovation of Kitagata Hospital</p> <p>Approved budget shs 300,000,000</p> <p>Actual expenditure shs 388,905,000 = 13%</p> <p>Light grading of Buraro – Kyeihara- Kassana-Kagati rd</p> <p>Approved budget shs 26,000,000</p> <p>Actual expenditure shs 20,000,000 = 0.7%</p> <p>Re-Construction of Katojo-Katooma GFS in Masheruka,</p> <p>Approved budget shs 42,545,000</p> <p>Actual expenditure shs 35,760,000 = 8.4%</p>
		<ul style="list-style-type: none"> <li>Evidence that the LG has budgeted and spent at least 80% of O&amp;M budget for infrastructure in the previous FY: score 2</li> </ul>	0	<p>Expenditure on O&amp;M for infrastructure was not availed</p>

Assessment area: Human Resource Management

6	<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2</li> </ul>	0	<p>No performance agreements and reports for all HODs on file. (CR/D/10330, CR/D/10502, CR/D/10468, CR/D/10299, CR/D/10478, CR/D/10316, CR/D/10469, CR/D/10381, CR/D/10330, CR/D/10301)</p> <p>From the HR unit, the agreements and reports were taken to the former CAO for signing.</p>
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		<ul style="list-style-type: none"> <li>• Evidence that the LG has filled all HoDs positions substantively: score 3</li> </ul>	0	<p>The staff establishment 2017/2018 recommends for 11 HOD positions. Only 04 were substantively filled</p> <ul style="list-style-type: none"> <li>- The Chief Finance Officer appointed under Min No 103/2003(i) 1 of the DSC (CR/D/10502)</li> <li>- The District Planner appointed under Min No. 17/2011 a(5)) of DSC (CR/D/0299)</li> <li>- The District Education Officer appointed on transfer of service under Min. No. 84/2013(I)) of the DSC (CR/D/10478)</li> <li>- The District Community Development Officer appointed under Min No. 68/2014(a) of the DSC(CR/D/10316)</li> </ul>
7	<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• Evidence that 100 percent of staff submitted for recruitment have been considered: score 2</li> </ul>	2	<p>79 vacant positions were declared to the DSC in the FY 2016/2017(DSC-CR/D/156) -Letter dated March 10, 2017. All these positions were considered during the FY 2016/2017(Extracted Minutes of DCS meeting held from 22- 26 May 2017) Ref: DSC/156/5/1</p>
		<ul style="list-style-type: none"> <li>• Evidence that 100 percent of staff submitted for confirmation have been considered: score 1</li> </ul>	1	<p>The CAO recommended 16 Staff for confirmation in the FY 2016/2017. 15 in a letter dated March 03, 2017(CR/D/159/3) and 01 in a letter dated May 19, 2017(CR/D/156)</p> <p>All the 16 staff were confirmed(Extracted Min of the DSC meeting held from 22-23 June 2017)</p>
		<ul style="list-style-type: none"> <li>• Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1</li> </ul>	1	<p>No cases were submitted to the DSC for disciplinary action in the FY 2016/17.</p>

8	<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3</li> </ul>	0	<p>100% staff recruited in the FY 2016/2017 did not access salary payroll within two months after appointment.</p> <p>79 staff were recruited in the FY 2016/2017, with appointment effective June 02, 2016. (Extracted Minutes of DCS meeting held from 22- 26 May 2017) (Ref: DSC/156/5/1)</p> <p>According to the salary payroll for June, August, September, October and November 2017, 04 staff accessed the payroll in June 2017, 20 in August 2017, 51 in September 2017, 03 in October 2017 and 01 in November 2017</p>
		<ul style="list-style-type: none"> <li>• Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2</li> </ul>	0	<p>10 staff were retired in FY 2016/2017. Only 02 were able to access the pension payroll not later than two month after retirement(Pension payroll May 2017)</p>

Assessment area: Revenue Mobilization

9	<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• If increase in OSR from previous FY but one to previous FY is more than 10% : score 4 points</li> <li>• If the increase is from 5 - 10% : score 2 point</li> <li>• If the increase is less than 5% : score 0 points.</li> </ul>	0	<ul style="list-style-type: none"> <li>• The OSR Revenue for 2016/17 was Uganda Shillings 356,607,219 and the previous year 2015/16 was Shs 409,008,044, this is a reduction of Ugx 54,400,822 which is 13.3% as per Annual Financial statements (Page 20). The Revenue decreased from the previous year by more than 13%. (Page 20 Annual Financial Accounts 2016/17).</li> </ul>
10	<p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10% : then 2 points. If more than +/- 10% : zero points.</li> </ul>	0	<ul style="list-style-type: none"> <li>• The Budgeted Revised Revenue was Ugx 475,032,452 and the Actual collection as per Annual Financial statements of 2016/17 (Page 26) was 356,607,219 is a 75% performance and translates to 25% shortage which is more than 10% realisation and negative variance of Ugx 118,428,233. (Page 26 Annual Financial Accounts 2016/17).</li> </ul>

Local revenue administration, allocation and transparency

Maximum 4 points on this performance measure

• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2

2

• The LG is Categorised by LGA 85 (2) “ In rural areas, revenue shall be collected by the Sub county councils and a sub county council shall retain 65%, or any other higher percentage as the district council may approve , of the revenue collected by it and pass the remaining percentage over to the district.”

• Local Revenue as per Annual Financial Statements (Page 20,26 & 46) was Ugx 356,607,219 Less Property, Education Levy & Hospital Private Wing (7,781,500 +59,848,000 + 153,854,452) = 135,123,267 i.e. 100% and 65% = 87,830,123 was retained by the Sub Counties and 35% = 47,293,144 was retained by the District.

• Sec 85(4) “ A district council may, with the concurrence of a sub county, collect revenue on behalf of the sub county council but shall remit 65 percent of the revenue so collected to the relevant sub county.”

• Annual financial statements (Page 46) shows that Ugx 53,164,491 shared at 65% which is Ugx 34,556,919 was shareable and received by Eleven LLG, LLG as detailed below:

- Kigarama Sub County :2,500,000
- Masheruka Sub County :2,500,000
- Kyangenyi Sub County :2,500,000
- Rugarama Sub County :2,500,000
- Kitagata Sub County :2,500,000
- Kasaana Sub County :2,201,919
- Shuuku TC :4,000,000
- Masheruka TC :4,000,000
- Kakindo TC :3,854,000
- Kitagata TC :4,000,000
- Bugongi TC :4,000,000
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		<ul style="list-style-type: none"> <li>Evidence that the LG is not using more than 20% of OSR on council activities: score 2</li> </ul>	2	<p>The Local Revenue for FY 2015/16 was 409,008,044 less Property Rates 2,746,387, Education Levies 38,159,310 &amp; Private Wing Hospital fees 24,553,970 = 343, 548, 377.</p> <p>20% of 343,548,377 is Ugx 68,709,675.</p> <p>Statutory Expenses of 381,429,714 includes Government Grants Salary 141,056,854</p> <p>Salaries Political &amp; Excom 121,095,760</p> <p>PAC 7,039,000</p> <p>Land Management 2,480,000</p> <p>DS Commission 31,913,000</p> <p>Contracts Committee 11,604,000</p> <p>Total 315,188,614</p> <p>Therefore Local Revenue component of statutory Bodies expenditure is 381,429,714 minus 315,188,614 = 66,240,100.</p> <p>20% was 68,709,675 and the LG spent only 66,240,100 which is 19% hence within the allowable range.</p>
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Assessment area: Procurement and contract management

12	<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>The position of Senior Procurement Officer (SPO) was substantially filled as shown in the appointment letter dated 1st June 2015 under District Service Commission (DCS) Min No: 60/2015 (a) (2) signed by signed by CAO with copies to the District Internal Auditor, Secretary to DCS and District Production Officer.</li> <li>The position of Procurement Officer (PO) was substantially filled as shown in the appointment letter dated 14th April 2011 under District Service Commission (DCS) Min No: 24/2011 (1) signed and stamped by CAO on 21st April 2011.</li> </ul>
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• Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1

1

There was evidence that TEC produced and submitted reports to the Contracts Committee (CC) in FY 2016/17. For example;

- Completion of 2 classroom block at Murali P/S in Rugarama S/C (*Proc Ref No: Shee 609/WRKS/2016-2017/00009*) was submitted on 3rd March 2017 signed by the Chairperson & 2 members of TEC. TEC recommended Semoca Agencies Ltd at a bid price of UGX25, 293,300.
- Renovation of Hospital staff house and construction of 3 VIP latrine at Kitagata Hospital (*Proc Ref No: Shee 609/WRKS2016-2017/00004*) was submitted to CC on 18th February 2017 recommending Viro Technical Services Ltd.
- Construction of a water born toilet with 4 stance and a urinal at the Shema District Headquarters (*Proc Ref No: Shee 609/WRKS/2016-2017/000015*)-first Phase was submitted to Contracts Committee on 15th May 2017 signed by all members of TEC.
- Rehabilitation of a Pipeline from Mushongi Reservoir tank to Mushanju & Kaju in Kigarama S/C (*Proc Ref No: Shee 609/WRKS/2016-2017/000013*) was submitted to Contracts Committee on 31st January 2017 signed by all members of TEC. It recommended Semoca Agencies Ltd at a cost of UGX 52,909,076.

		<ul style="list-style-type: none"> <li>• Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1</li> </ul>	1	<p>There was evidence, in the procurement files and minutes of Contracts Committee (CC), that the recommendations from TEC were considered. For example,</p> <ul style="list-style-type: none"> <li>• MIN No: 324/CC/2016-2017 dated 3rd March 2017 indicated approval of recommendation from TEC to award contract to M/S Semoca Agencies Ltd to Complete a 2 classroom block at Murali P/S in Rugarama S/C (<i>Proc Ref No: Shee 609/WRKS/2016-2017/00009</i>) at a bid price of UGX25, 293,300.</li> <li>• MIN 323/CC/2016-2017 indicated approval of recommendation from TEC to award contract to M/S Viro Technical Services Ltd to renovate the Hospital staff house and construct a 3 VIP latrine at Kitagata Hospital (<i>Proc Ref No: Shee 609/WRKS2016-2017/00004</i>).</li> <li>• MIN 360/CC/2016-2017 dated 16th May 2017 approved the recommendation of TEC to award contract to Semoca Agencies Ltd to construct a waterborne toilet with 4 stance and a urinal at the Shema District Headquarters (<i>Proc Ref No: Shee 609/WRKS/2016-2017/000015</i>)-Phase I at a cost of UGX 32,877,160.</li> <li>• MIN 342/CC/2016-2017 dated 28th March 2017 approved the TEC recommendation to award the contract to Semoca Agencies Ltd at a cost of UGX 49,905,504 to rehabilitate a Pipeline from Mushongi Reservoir tank to Mushanju &amp; Kaju in Kigarama S/C (<i>Proc Ref No: Shee 609/WRKS/2016-2017/000013</i>) signed by all members of CC.</li> </ul>
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</p>			<p>The Procurement and Disposal Plan (PDP) for the current FY 2017/18 covered all infrastructure projects in the approved AWP and Budget for FY 2017/18. For example;</p> <ul style="list-style-type: none"> <li>• Serial Number (S/N) 2: Construction of a 2-stance VIP latrine was in the PDP 2017/2018 and also on page 165 of the approved AWP 2017/2018.</li> <li>• Serial Number (S/N) 8: Light grading of Kasana-Katonga-Kashekuro-Ibangi road was included in the PDP and also in the AWP for FY 2017/2018 specifically on pages 70, 125,</li> </ul>



<p>measure.</p>	<ul style="list-style-type: none"> <li>• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2</li> </ul>	<p>2</p>	<p>and 151</p> <ul style="list-style-type: none"> <li>• Serial Number (S/N) 14: Rehabilitation of Kambugye Gravity Flow Scheme in Kitagata S/C was in the PDP 2017/2018 and also in the approved AWP 2017/2018.</li> <li>• Serial Number (S/N) 12: Rehabilitation of Rainwater harvesting tank (RWHT) at Mabare HCII was in the PDP 2017/2018 and also in the approved AWP 2017/2018.</li> <li>• Serial Number (S/N) 13: Reconstruction of Katooyo source in Masheruka S/C was in the PDP 2017/2018 and also in the approved AWP 2017/2018.</li> <li>• Serial Number (S/N) 11: Construction of 2 stance public VIP latrine in rural growth centre (RGCs) was in the PDP 2017/2018 and also in the approved AWP 2017/2018.</li> </ul> <p>In addition, the Sheema district also adhered to the procurement plan) for FY 2016/17. For example, the following projects were in the PDP 2016/17 and AWP for 2016/17.</p> <ul style="list-style-type: none"> <li>• Serial Number (S/N) 09: Construction of a 2 classroom block at Murali P/S in Rugarama S/C (<i>Proc Ref No: Shee 609/WRKS/2016-2017/00009</i>) was in PDP &amp; AWP.</li> <li>• Serial Number (S/N) 07: Renovation of the Hospital staff house and construct a 3 VIP latrine at Kitagata Hospital (<i>Proc Ref No: Shee 609/WRKS2016-2017/00004</i>) was in PDP &amp; also seen on page 63 of the approved AWP.</li> <li>• Serial Number (S/N) 09: Construction of a waterborne toilet with 4 stance and a urinal at the Shema District Headquarters (<i>Proc Ref No: Shee 609/WRKS/2016-2017/000015</i>)- Phase I was in PDP &amp; also seen on page 67-68 of AWP.</li> <li>• Serial Number (S/N) 07: Rehabilitation of a Pipeline from Mnshongi Reservoir tank to Mushanju &amp; Kaju in Kigarama S/C (<i>Proc Ref No: Shee 609/WRKS/2016-2017/000013</i>) was in the PDP &amp; also seen on pages 178 of the AWP.</li> </ul>
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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

? ? Out of a total of 65 infrastructure projects which required bid documents in the PDP for FY 2017/18, only 2 bid documents (1.54%) were prepared by 30th August 2017. This was attributed to the delay to submit requisitions using the LGPP Form (1) to the PDU by Heads of user departments (HoDs) and from Sub Counties. It was also attributed to the delay in a availability of funds.

- The PDP for current FY 2017/18 also indicated projects which did not require bid documents because they are procured under the Force Account (e.g funded by URF) and implemented by district staff using DLG road equipment and road gangs. Also micro-projects (supplies) did not require Bid documents procured using the framework constructs.

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

2

The Contracts Register for FY 2016/17 was updated with completed procurement activity files for FY 2016/17. For example,

- Serial Number (S/N) 05: Construction of a 2 classroom block at Murali P/S in Rugarama S/C (*Proc Ref No: Shee 609/WRKS/2016-2017/00009*).
- Serial Number (S/N) 05: Construction of a 2 classroom block at Kihara P/S in Rugarama S/C (*Proc Ref No: Shee 609/WRKS/2016-2017/00009*).
- Serial Number (S/N) 7: Renovation of the Hospital staff house and construct a 3 VIP latrine at Kitagata Hospital (*Proc Ref No: Shee 609/WRKS2016-2017/00004*).
- Serial Number (S/N) 08: Rehabilitation of a Pipeline from Mnshongi Reservoir tank to Mushanju & Kaju in Kigarama S/C (*Proc Ref No: Shee 609/WRKS/2016-2017/000013*)

		<ul style="list-style-type: none"> <li>For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.</li> </ul>	2	<p>There was evidence that Sheema district adhered to procurement thresholds as shown in the Contracts Register and Procurement files [i.e. LGPP form (1)] and PDP. For example, the value of all projects and the procurement methods used were within the thresholds recommended by PPDA in the LGPP Regulations 2006. A sample of 7 projects below was considered and it showed that all bids below UGX 50,000,000 were procured using selective bidding while those worthy at least UGX 50,000, 000, open domestic bidding (ODB) was used. Framework contract was used on project under the Force Account.</p>
15	<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2</li> </ul>	0	<p><u>Not All works</u> projects implemented in FY 2016/17 were appropriately certified (i.e. with completion certificates are on the procurement file) for all projects based on technical supervision. However, for some projects, the completion certificates were signed by the District Engineer and CAO. The certificates were attached to payment requests submitted to Finance Department as indicated in the Vouchers, progress report, and requisition by the contractor, and BoQs that were attached. For example, projects included:</p> <p>i. Rehabilitation of a Pipeline from Mushongi Reservoir tank to Mushanju &amp; Kaju in Kigarama S/C (<i>Proc Ref No: Shee 609/WRKS/2016-2017/000013</i>) was completed but no evidence of a completion certificate signed by the Engineer &amp; CAO.</p>
		<ul style="list-style-type: none"> <li>Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2</li> </ul>	0	<p>Not all the works projects for FY 2017/18 were labelled (Site Boards) indicating the name of the project, the contractor; source of funding and actual contract value. All site boards for projects visited did not show the actual contract value.</p>
Assessment area: Financial management				

16	<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4</li> </ul>	4	<p>All the 23 Bank Accounts in Stanbic had been reconciled up to date (July to December 2017).</p>
17	<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2.</li> </ul>	2	<ul style="list-style-type: none"> <li>From Payments register for 2016/17, and from the sample made on payments, Education Sector: The sample of payments worth 51,969,635 for Classroom construction (Nyakatoma, Kyeihara &amp; Murare PS) were paid on time in a period not exceeding 2 days from the time the requisition was made.</li> <li>Water Sector: Payments worth 54,470,119 sampled from the following projects (Shallow wells &amp; Kamahembe Works), the payments were made within two days of requisition.</li> </ul>
18	<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.</li> </ul>	0	<p>The LG doesn't have a substantial Principal Internal Auditor. He was appointed Ag. Principal Auditor on 01/7/2016 though he is Confirmed in Service in 2001 and appointed On 15/11/2015 as Senior Accountant by Sheema DSC.</p>
		<ul style="list-style-type: none"> <li>Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries: score 2.</li> </ul>	0	<p>There's no evidence to show action taken.</p>

		<ul style="list-style-type: none"> <li>Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1</li> </ul>	1	<p>The reports were submitted to the Chairman on the following dates Quarter 1. 28/10/2016, Quarter 2. 24/2/2017, Qtr.3 28/4/2017 and Qtr. 4. 30/09/2017. They were copied to Auditor General, LGPAC, MOLG, RDC &amp; MOFPED</p> <p>Members of PAC were appointed in December 2017 and have not started work hence no reports made.</p>
19	<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4</li> </ul>	0	<ul style="list-style-type: none"> <li>The Asset register is not updated. It's difficult to establish the balances on Page 38 of the Financial Statements for the period ended 30th June 2017 from the Asset Register. The LG is on Cash Accounting and it's difficult to verify the Assets bought during the year worth 1,028,819,053 plus Cumulative Value as of 30th June 2017 of Shs 3,522,306,000.</li> </ul>
20	<p>The LG has obtained an unqualified or qualified Audit opinion</p> <p>Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY:</p> <ul style="list-style-type: none"> <li>unqualified audit opinion: score 4</li> <li>Qualified: score 2</li> <li>Adverse/disclaimer: score 0</li> </ul>	4	<p>Unqualified Opinion for the FY 2016/17. (Page 225 Auditor General Report on 29th December 2017)</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>Council is functional and discusses service delivery issues; for example:</p> <p>Council meeting held on 18/11/16, Minute ; MIN:/COU/60//2016(b): presentation and discussion of Executive Committee business</p> <ul style="list-style-type: none"> <li>• Min:61/COU/2016 Council sat and approved the district Service Committee members</li> <li>• Min 63/COU/2016 Appointment of working committees</li> </ul> <p>Another meeting in the FY, held on 27/3/2017</p> <p>Min: 72/COU/2017 Approvals</p> <p>(a) Approval of supplementary budget estimates for Youth Livelihoods Project (YLP)</p> <ul style="list-style-type: none"> <li>• . (b) approval of district integrated annual work plan for FY 2017/18</li> <li>• (c) Laying of the budget estimates for FY 2017/18</li> </ul>
22	<p>The LG has responded to the feedback/complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 2.</li> </ul>	0	<p>The CAO has not appointed any staff of the District to coordinate response to feedback (grievance/complaints) from citizens and responded to feedback and complaints.</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>	2	<p>The LG has a big and protected public notice board and has published information on it :ie LG payroll, pensioner payment schedule; November, and Dec. 2017</p>
		<ul style="list-style-type: none"> <li>• Evidence that the procurement plan and awarded contracts and amounts are published: score 1</li> </ul>	1	<p>The LG procurement plan and awarded contracts and amounts are published on the noticeboard</p>

		<ul style="list-style-type: none"> <li>Evidence that the LG performance assessment results and implications, are published e.g. on the budget website for the previous year (from budget requirements): score 1.</li> </ul>	0	“N/A. The Central Government did not conduct the Annual Performance Assessment for LGs in 2016/17”.
24	<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1</li> </ul>	1	<p>There was evidence that the district has communicated and explained guidelines, circulars and policies issued by the national level to LLGs through letters, monthly meetings and distribution lists signed by recipients was available in planning unit and health dept. Policies and guidelines included ;</p> <ul style="list-style-type: none"> <li>LG Planning and budgeting guidelines</li> <li>Approaches to Health Care Waste Management</li> <li>Budget and implementing guidelines</li> <li>Budget call Circular</li> <li>Nutrition planning guidelines</li> <li>Guidelines on School feeding and Nutrition intervention program</li> <li>Monitoring and supervision Tool (MoGLSD)</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc..) with the public to provide feed-back on status of activity implementation: score 1.</li> </ul>	0	No evidence seen that that district in the previous FY conducted discussions (e.g.fora, barazas, radio programmes etc..) with the public to provide feed-back on status of activity implementation.
Assessment area: Social and environmental safeguards				

The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles

Maximum 4 points on this performance measure.

• Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2.

2

There was evidence that the GFP provided guidance and support to sector departments on how to mainstream gender into their activities within FY FY2016/17. For example,

(i) SCDO is the focal person for works on mobilization of communities and formation of infrastructure management committees (IMCs) and training IMCs about their roles and how to mainstream gender by the contractor for CAIP-3 project. SCDO worked with CDOs. For example, there was evidence of reports dated 5th November 2016 and 18th November 2016 and an Internal memo dated 12th December 2017.

(ii) CBS supported the Water sector by training Water User Committees (WUCs) on 15th February 2016 at Kyangyeni S/C for the Muzira Gravity Flow Scheme. A total of 79 participants were attended the session.

(iii) In FY 2016/17, CBS prepared quarterly workplans & submitted them to TPC for discussion and approval. For example, activity included conducting community based rehabilitation with key stakeholders.

(iv) CBS presented guidelines for addressing gender & equity issues in the Budget process to TPC on 18th October 2016. Topics included; agriculture, health, education, trade & industry, energy, natural resources & environment, development, ICT, Water, land & housing, public sector management , JLOS, and security.

(v) CBS developed an Annual Workplan for FY 2016/17 and FY 2017/18 and FY 2018/19 from quarterly action plans are generated.

(vi) CBS working closely with other departments developed the Nutrition Action Plan, on 18th April 2017, for cascading and implementing the National Integrated Early Childhood Development Policy (MoGLSD 2006) in which all sector departments e.g Health, Education, and CBS were involved in the development of the a Nutrition Action – Participant's Handbook –November 2016 during the workshop. It was developed from the District Nutritional Action plan (2016/17-2019/20). DCDO is the District Nutritional Focal person.



		<ul style="list-style-type: none"> <li>• Evidence that gender focal point has planned activities for current FY to strengthen women's roles and that more than 90% of previous year's budget for gender activities has been implemented: score 2.</li> </ul>	0	<p>There was evidence that gender focal person planned activities to strengthen women roles in FY 2017/18 as shown in the approved AWP &amp; Budget for FY 2017/18, and the quarterly Gender action plans i.e Quarter 1 (July-September 2017), Quarter 2 (October – December 2017). In FY 2017/18, CBS planned to monitor women Income generating activities (IGAs) through facilitating Women Councils to monitor Lower Local Governments (LLGs), among other activities.</p> <p>However, out of the total UGX 186,354,942 cumulative expenditure on gender activities excluding wage in FY 2016/17, only UGX 64,185,085 was spent on gender activities as per the final approved AWP &amp; budget for FY 2016/17 and also as indicated in the final accounts. Hence representing 34.33 percent (inclusive of non-wage) for CBS department. This percentage was less than 90 percent.</p>
26	<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>			<p>Environment screening &amp; ESIA (where applicable) <u>was not</u> conducted or budgeted for mainly on the following infrastructure projects prior to commencement of the implementation:</p> <ol style="list-style-type: none"> <li>i. Completion of 2 classroom block at Murali P/S in Rugarama S/C (<i>Proc Ref No: Shee 609/WRKS/2016-2017/00009</i>).</li> <li>ii. Renovation of Hospital staff Josue &amp; Construction of 3 VIP latrine at Kitagata Hospital (<i>Proc Ref No: Shee 609/WRKS/2016-2017/00004</i>).</li> <li>iii. Construction of a water born toilet with 4 stance and a urinal at the Shema District Headquarters (<i>Proc Ref No: Shee 609/WRKS/2016-2017/000015</i>)-first Phase.</li> </ol> <p>The above infrastructure projects did not undergo screening prior to implementation yet screening is a mandatory requirement to inform the development of Bid Documents/BoQs.</p> <p>In addition, there was no screening report(s) by the Senior Environmental Officer (SEO) or Environment officer prior to the actual commencement of most infrastructure project except the private projects (Report on Grammar Junior School dated 12th June</p>

• 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

0

2017 & Nkwo Filling Station dated 25th January 2017) which were not under the jurisdiction of the DLG.

For a few, screened and certified projects, it was done at the end mainly to authorise payment of contractors but without having environment mitigation measures included in the Bid Documents/BoQs. For example, the BoQs for the Construction of Muhito Bridge in Muhito parish in Katuba village did not include Environment mitigation measures but it was completed, a certificate of Environment restoration was issued dated 30th April 2017 signed by the SEO and stamped by CAO. It was under the Force Account.

However, the following projects were screened and their reports were seen on file;

i. Rehabilitation of a Pipeline from Mushongi Reservoir tank to Mushanju & Kaju in Kigarama S/C (*Proc Ref No: Shee 609/WRKS/2016-2017/000013*) screened report dated 1st June 2016 signed and stamped by the SEO. Project was completed but not certified yet by the SEO.

Other projects which were not implemented by the district were also screened by the SEO, for example,

(i Environment Assessment/Inspection Report on Grammar Junior School dated 12th June 2017. Certificate on Environment Compliance [ENV/554/2] was on file.

(ii Environment Compliance Monitoring & Inspection Report on Nkwo Filling Station. The report was dated 25th January 2017 [ENV/554/1] signed by the SEO was on file.

(iii) A report on inspection of development projects in the district to ascertain environment & social issues dated 14th April 2014 was on file.

<ul style="list-style-type: none"> <li>• Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1</li> </ul>	0	<p>Sheema District did not integrated environmental and social management plans in the contract bid documents/BoQs. For example:</p> <p>i. Bid documents/BoQs for the Completion of 2 classroom block at Murali P/S in Rugarama S/C (<i>Proc Ref No: Shee 609/WRKS/2016-2017/00009</i>) did have environment mitigation measures.</p> <p>ii. Bid document/BoQs for the Renovation of Hospital staff Josue &amp; Construction of 3 VIP latrine at Kitagata Hospital (<i>Proc Ref No: Shee 609/WRKS/2016-2017/00004</i>) did not provide for environmental mitigation measures.</p>
<ul style="list-style-type: none"> <li>• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1</li> </ul>	0	<p><u>Not ALL</u> completed infrastructure projects was on Government owned land that was titled. For example, all Government does not own any primary school in Sheema district but just supports/aides primary Schools some of which are under the religious Bureaux, for example, Completion of 2 classroom block at Murali P/S in Rugarama S/C (<i>Proc Ref No: Shee 609/WRKS/2016-2017/00009</i>).</p> <p>However, the construction of a Water born toilet at the Sheema District Headquarters – Phase I was on public land titled. In addition, construction of Muhito bridge was on public land (i.e. road owned by the Government) which did not require any acquisition of land or displacement of people and property.</p>

		<ul style="list-style-type: none"> <li>• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2</li> </ul>	0	<p><u>Not All</u> completed projects have Environmental and Social Mitigation Certification Form completed and signed by the Senior Environmental Officer (SEO) or Environment Officer. For example,</p> <p>i. Completion of 2 classroom block at Murali P/S in Rugarama S/C (<i>Proc Ref No: Shee 609/WRKS/2016-2017/00009</i>) was not certified by the SEO/District Environment Officer.</p> <p>ii. Renovation of Hospital staff Josue &amp; Construction of 3 VIP latrine at Kitagata Hospital (<i>Proc Ref No: Shee 609/WRKS/2016-2017/00004</i>) was not certified by the SEO/District Environment Officer.</p>
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## **LGPA 2017/18**

Educational Performance Measures

Sheema District

(Vote Code: 609)

Score 69/100 (69%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Human Resource Management				
1	<p>The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4</li> </ul> <ul style="list-style-type: none"> <li>Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4</li> </ul>	4	<p>The LG has budgeted for a Head teacher and a minimum of 7 teachers per school according to Performance contract SD/CR/6/165 of 6/4/2017 Page 22. The budgeted amount is Shs 5,180,861,000.</p> <p>The LG has deployed a Head teacher and a teacher in the 85 primary schools as per Staff lists and letter CD/D/104/1 dated 27/7/2017 to the PS Local Government</p> <p>For example the staff list of Nyakasharara according to a monthly return dated 8/12/2017 shows the primary school has a Head teacher and 9 teachers with a total pupil population of 173 pupils (83M, 90F)</p> <p>In the sample of schools visited, Bunura P.S has 1 Head teacher, 11 teachers for 487 pupils (229 M 258 F), Masheruka has 1 Head teacher 18 teachers for 848 pupils (416M 432F), Nyakambu has 1 Head teacher 9 teachers for 615 pupils (268M 375F), and Rweibaare has 1 Head teacher 12 teachers for 449 pupils</p>
2	<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0</li> </ul>	3	<p>LG has substantially recruited all primary school teachers within the wage bill provision.</p> <p>The approved structure in the LG Performance Contract indicates 778 teachers. Filled posts are 734 according to the staff registers</p> <p>This represents a 94.3% filling of the structure for primary teachers with a wage bill provision. The LG has advertised for 9 teachers (2 - U4 and 7 –U7)</p>

3	<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6</li> </ul>	6	<p>The approved structure provides for 2 inspectors. 2 Inspectors are deployed by the LG namely; Lois Tumisiime Kanyesigye File No. CR/D/10413 and Ssemu Muzaffaru CR/D/10666</p>
4	<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of Primary Teachers: score 2</p>	2	<p>From the recruitment Plan for FY 2017/18, and according to EDUC/305/1 dated 12/12/2016, 22 Head teachers and 17 teachers were included.</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>The positions of Inspectors were not needed and therefore not included in the recruitment plan as they were already filled.</p>
5	<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department appraised school inspectors during the previous FY • 100% school inspectors: score 3</p>	3	<p>The LG had 2 Inspector of schools in the FY 2016/2017. Both were appraised by July 2017 (CR/D/10413 and CR/D/10666)</p>
		<p>Evidence that the LG Education department appraised head teachers during the previous FY. • 90% - 100%: score 3 • 70% - 89%: score 2 • Below 70%: score 0</p>	2	<p>The LG had a total of 82 primary school head teachers in the FY 2016/2017. A 10% sample (8 primary school head teachers was taken). Only 4 head teacher had complete appraisals (both a performance agreement and a performance report. The rest were either missing a performance agreement or a report. CR/D/E/1376, CR/D/E/1191, CR/D/E/238, CR/D/E/65, CR/D/E/53, CR/D/E/1251, CR/D/E/903 and CR/D/E/8157</p>

Assessment area: Monitoring and Inspection

<p>6</p>	<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1</li> </ul>	<p>1</p>	<p>Guidelines, policies, circulars issued by the national level in the previous FY e.g Teacher Support Supervision letter dated 30/6/2017, Education Service Commission Regulations, Closure of unlicensed or unregistered schools, and Guidelines on school feeding and nutrition intervention programme were communicated as follows; CAO's letter of 21/11/2017 on closure of unlicensed and unregistered private schools, and meeting held on 23/11/2017 Min 15/17 indicates the circular was issued to Head teachers and Directors of private schools. Other guidelines, policies and regulations were circulated in the Head teachers' meetings of 5/10/2016, 8/4/2017 (at Sheema district headquarters), and 17/10/2017.</p>
		<ul style="list-style-type: none"> <li>• Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level, including on school feeding: score 2</li> </ul>	<p>2</p>	<p>Meetings for Head teachers where the guidelines are explained and teachers sensitised took place on 5/10/2016, 8/4/2017, and 17/10/2017 (83 Head teachers in attendance as per attendance sheet seen). Circular on closure of schools DES/50/14 dated 22/9/2017 was issued to Head teachers and Directors of unregistered schools in a meeting held on 23/11/2017 Min 15/17. Head teachers of private schools were met on 5/12/2017</p>





		<ul style="list-style-type: none"> <li>Evidence that the inspection recommendations are followed-up: score 4</li> </ul>	4	The recommendations have been followed-up and used for corrective action. For example action was taken on arrogant teachers and mentorships organised for Head teachers of Shuuku P.S, and Kirundo P.S. Updating of expired SMCs for Kasharazi and Kakinda primary schools still ongoing, while addressing by SMCs of teacher absenteeism is receiving attention and improvements noted.
9	<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5</li> </ul>	0	LG has not submitted accurate / consistent data with EMIS data obtained from MoES. LG shows 113 (including 3 COP schools) while EMIS data shows 115 primary schools
		<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	LG has not submitted enrollment data for all schools consistent with EMIS report and OBT. Letter CD/D/104/1 to PS Local Government indicates a total enrollment of 32,547 (16,216M 16331F) while EMIS data shows a total enrollment of 31,115 (15,243M 15,872F)

Assessment area: Governance, oversight, transparency and accountability

10	<p>The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc...during the previous FY: score 2</li> </ul>	2	<p>Progress report by DEO was presented in Q4 2016/17 on 20/9/2017 and service delivery issues, including inspections were discussed.</p> <p>The sector implementation plan for the Department was approved under Min 12/COU/2016 of meeting held 11/2/2016 .</p>
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		<ul style="list-style-type: none"> <li>Evidence that the education sector committee has presented issues that requires approval to Council: score 2</li> </ul>	2	<p>Education sector committee presented on 18/11/2016 request for approval of procurement of vehicle for Department – Min 80/COU/207.</p> <p>Supplementary budgets for 4 Primary schools were also presented for approval under Min 18/12/2017 for the following primary schools; Kashanjure, Rwanama, Ruhigana, and Rwentobo</p>
11	<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0</p>	5	<p>All primary schools have functional SMCs. Head teachers have submitted reports to SMCs from the 5 randomly selected schools as follows; Nyakanyinya on 21/4/2016 under Min 3/2016b</p> <p>Bunura on 5/12/2016 under Min 20/2016c, Rwaburara on 4/12/2016 under Min II/2016,, Murari on 20/6/2016 under Min 4c /2016 and Muzira on 20/4/2016 under Min 3c/2016</p> <p>The visited schools had held the 3 mandatory meetings as follows; Rweibare on 12/10/2016, 17/3/2017, and 4/7/2017 and in cases the Head teaches report was presented. In Bunura school the meetings were held on 29/2/2016, 21/4/2016, 4/8/2016, and 5/12/2016. In Masheruka Modern P.S SMC meetings were held on 4/3/2016, 10/10/2016, 15/3/2017, 26/3/2017 and Head teachers report presented at each of these meetings, while in Nyakambu P.S 2017 meetings were held on 21/2, 16/6, and 4/10. For 2016, the SMC meetings were held on 11/3, 24/6, and 12/10 and Head teachers reports were presented</p>

12	<p>The LG has publicised all schools receiving non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3</li> </ul>	0	<p>There was no evidence on the district notice boards that the LG had publicised all schools receiving non-wage recurrent grants</p> <p>In the visited schools, at Rweibare P.S non-wage recurrent grants for 2017 were displayed on the glass window at the Head teachers office. At Bunura they were posted in the general office before the Head teachers office. At Masheruka Modern the non-wage recurrent grants were displayed in a glass window at the Head teachers office as well as in the general office, while at Nyakambu P.S the non-wage recurrent grants were posted in the general office.</p>
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Assessment area: Procurement and contract management

13	<p>The LG Education department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30: score 4</li> </ul>	0	<p>Not all investment items approved in the sector annual work plan and budget were submitted on time by April 30th 2017. The procurement request for a double cabin motor vehicle was submitted on 29/9/2017 after the 30/4/2017 deadline although the rest had been submitted within the deadline, namely, completion of classroom blocks in different schools (19/1/2017), and construction of facilities in 4 USTSEP schools (21/11/2016).</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"> <li>• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	3	<ul style="list-style-type: none"> <li>• From the Contract samples, all the Classroom Contracts have a duration of three months (e.g. Start date 20/03/2016 to End date 20/6/2016) and payment requests and certificates of (Nyakatoma, Kyeihara &amp; Murare PS) payments worth 51,969,635 Ugx in respect to these schools, It was established payments were made on time. Not exceeding two days period from the day the payment of request was made.</li> </ul>

Assessment area: Financial management and reporting

15	<p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by mid-July for consolidation: score 4</li> </ul>	0	<p>The annual performance report for the previous year was submitted to the Planner after mid-July for consolidation on 11/8/2017</p>
16	<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</li> <li>If sector has no audit query score 4</li> <li>If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points</li> <li>If all queries are not responded to score 0</li> </ul>	0	<ul style="list-style-type: none"> <li>The Sector had 27 queries during the financial year and there was no evidence that they had been responded too at the time of Assessment.</li> </ul>

Assessment area: Social and environmental safeguards

17	<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc...: Score 2</li> </ul>	2	<p>The Gender in Education Policy (2016) was received in November 2017 and disseminated in Head teachers meeting of December 2017</p>
		<ul style="list-style-type: none"> <li>Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2</li> </ul>	2	<p>Sanitation guidelines were issued and explained in Head teachers meeting of 31/5/2017. 73 Head teachers were in attendance.</p>

		<ul style="list-style-type: none"> <li>• Evidence that the School Management Committee meet the guideline on gender composition: score 1</li> </ul>	1	<p>In visited schools the guideline of 2 of the members from the Foundation body on the SMC being females has been met. In Rweibare P.S, the following members on the SMC come from the representatives of the Foundation body – Enid Asiimwe and Oliver Kajura. In Bunura P.S, the following members on the SMC come from the representatives of the Foundation body – Mauda Mwebaze and Jane Mulira. In Masheruka Modern P.S, the following members on the SMC come from the representatives of the Foundation body – Jovia Muhanguzi and Roseette Kamukama, while in Nyakambu P.S, the following members on the SMC come from the representatives of the Foundation body – Scovia Nuwagaba and Florence Butesi</p>
18	<p>LG Education department has ensured that guidelines on environmental management are disseminated</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 3:</li> </ul>	3	<p>Environment guidelines were issued and explained in Head teachers meeting of 31/5/2017. 73 Head teachers were in attendance.</p>



## **LGPA 2017/18**

Health Performance Measures

Sheema District

(Vote Code: 609)

Score 38/100 (38%)

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> <p>• More than 80% filled: score 6 points, • 60 – 80% - score 3 • Less than 60% filled: score 0</p>	3	<ul style="list-style-type: none"> <li>• The approved structure has a total of 363 staff</li> <li>• The wage bill provides for 252 staff</li> <li>• Filled positions are 234</li> <li>• Filled percentage is 64.5% compared to the approved structure</li> </ul>
2	<p>The LG Health department has submitted a comprehensive recruitment plan to the HRM department</p> <p>Maximum 4 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers: score 4</p>	4	<ul style="list-style-type: none"> <li>• As part of the performance contract a recruitment plan for FY2017/2018 was submitted under reference CD/354/1 in DHO file listing 18 positions as provided in the wage bill</li> </ul>



3	<p>The LG Health department has ensured that performance appraisal for health facility in charge is conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the health facility in-charge have been appraised during the previous FY:  o 100%: score 8  o 70 – 99%: score 4  o Below 70%: score 0</p>	<p>4</p> <p>The LG had 1 District hospital, 1 HC IV and 3 HCIIIs in the FY 2016/2017</p> <p>All the HC III In-charges completed performance appraisals signed by the CAO(CR/D/10602, CR /D/10599 and CR/D/10592</p> <p>The HC IV In-charge completed a performance appraisal signed by CAO on 30th June 2017(CR/D/10649)</p> <p>No performance agreement and report was on file for the Medical Superintendent(District Hospital) CR/D/Med/1008</p>
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4	<p>The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4</li> </ul>	0	<ul style="list-style-type: none"> <li>The staff list from DHO office does not tally with the staff lists at the health facility</li> <li>1 Shuuku HCIV DHO-33 HC-33</li> <li>2 Kitagata Jospital DHO-114 HC-112</li> <li>3 Bugongi HCIII DHO-18 HC-14</li> <li>4 Kyangyenyi HCIII DHO-17 HC-15</li> <li>5 Kigarama HCIII DHO-17 HC-13</li> </ul> <p>There were less health workers at the facility as per the staff lists provided on site</p>
Assessment area: Monitoring and Supervision				

5

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

Maximum 6 for this performance measure

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

3

• The DHO has communicated guidelines and polices to lower level health centres. From the sampled health centres, the following documents were found

• At Shuuku HCIV there was MED/358/3 dated 18.10.16 from DHO about addressing gaps in the health sector, Clinical guidelines 2016, Disease surveillance guidelines 2012, Client Charter 2015

• At Bugongi HCIII there was Immunization practice guidelines 2017, HMIS Manual 2014, HIV Guidelines 2016

• At Kitagata Hospital there was ADM/178/90 dated 30.08.17 about child days from the P.S health, ADM/105/309/05 dated 2.10.17 about Isoniazid syrup from the director general

• 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

3

• A report under reference MED/116/1 dated 8th November 2016 cites an in charge meeting held on 6th November 2016 under MIN 3/16 where they discussed the test and treat policy.

6

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

- Supervision is not quarterly as required. The following random reports were reviewed
  - MED/116/1 dated 8th May 2017
  - MED/116/1 dated 8th February 2017
  - MED/358/3 dated 6th March 2017
  - MED/213/5 dated 3rd July 2017
- It was noted that two reports had the same reference number.

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

- Supervision is not quarterly as required. The following random reports were reviewed
  - MED/116/1 dated 8th May 2017
  - MED/116/1 dated 8th February 2017
  - MED/358/3 dated 6th March 2017
  - MED/213/5 dated 3rd July 2017
- It was noted that two reports had the same reference number.

7	<p>The Health Sub-district(s) have effectively provided support supervision to lower level health units</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that health facilities have been supervised by HSD and reports produced: • If 100% supervised score 6 points • 80 - 99% of the health facilities: score 4 • 60 - 79% of the health facilities: score 2 • Less than 60% of the health facilities: score 0</p>	0	<ul style="list-style-type: none"> <li>• Shuuku HCIV HSD has only been able to supervise lower level units 3 times as opposed to 4 times as per the reports reviewed below</li> <li>• Q1 dated 7th – 16th September 2016</li> <li>• Q2 not done</li> <li>• Q3 dated 13th – 27th April 2017</li> <li>• Q4 dated 18th – 14th June 2017</li> </ul>
8	<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4</li> </ul>	0	<ul style="list-style-type: none"> <li>• Monitoring reports are not discussed in any of the minutes reviewed</li> </ul>

		<ul style="list-style-type: none"> <li>• Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6</li> </ul>	6	<ul style="list-style-type: none"> <li>• In the supervision log book at sampled Health facilities the following follow up and action was documented</li> <li>• At Kigarama HCIII: On 16/11/17 page 276017 the DHO noted that the weighing scales need repair. On 15/11/17 page 276016 (flipside) HCIV supervision team recommended checking of the BP machine to ensure accurate readings</li> <li>• At Kyangyenyi HCIII: On 16/11/17 on page 278217 team recommended the preparation of a staff attendance report. On 3/05/17 page 278218 it was recommended to use the dispensary logbook. On 24/07/17 on page 278217 the action was to update the VIMCD</li> </ul>
9	<p>The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has submitted accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports and OBT: score 10</li> </ul>	0	<ul style="list-style-type: none"> <li>• HMIS has 37 facilities and OBT has 18 facilities.</li> </ul>
Assessment area: Governance, oversight, transparency and accountability				

10	<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2</li> </ul> <ul style="list-style-type: none"> <li>Evidence that the health sector committee has presented issues that require approval to Council: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>Council meeting held on 27th March 2017, approved the Annual Work Plan including the health sector plan for 2017/2018 under minute 72/COU/2017 (b)</li> <li>Under minute 6 (b) in the council meeting held on 4th November 2016 the standing committee on health and education presented the health secretaries report for presentation to council on 18th November 2016</li> </ul>
11	<p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 5 points</p>	<p>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> <li>If 100% of randomly sampled facilities: score 5</li> <li>If 80-99% : score 3</li> <li>If 70-79%: : score 1</li> <li>If less than 70%: score 0</li> </ul>	0	<ul style="list-style-type: none"> <li>Only 40% of sampled health facilities had held at least 4 meetings</li> <li>Shuuku HCIV – 4 meetings</li> <li>Bugongi HCIII – 3 meetings</li> <li>Kitagata Hospital – 3 board meetings</li> <li>Kyangyenyi HCIII – 6 meetings</li> <li>Kigarama HCIII – 3 meetings</li> </ul>

12	<p>The LG has publicised all health facilities receiving PHC non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards: score 3</li> </ul>	3	<ul style="list-style-type: none"> <li>All 5 of the 5 sampled facilities had PHC grant release notices pinned up on notice boards at the facility</li> </ul>
Assessment area: Procurement and contract management				
13	<p>The LG Health department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2</li> </ul> <p>Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2</p>	0	<ul style="list-style-type: none"> <li>No specific project procurement requests could be traced through a procurement plan dated 15th September 2017 under reference MED/117/1 was submitted to PDU</li> <li>No form PP1 as used by LG from health sector could be traced</li> </ul>
14	<p>The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time: <ul style="list-style-type: none"> <li>100% - score 8</li> <li>70-99% – score 4</li> <li>Below 70% - score 0</li> </ul> </li> </ul>	8	<ul style="list-style-type: none"> <li>The HCIV directly deals with NMS through the online system and had receipts of the medicines from NMS dated 7/06/17, 18/08/17, 4/10/17, 20/11/17</li> <li>All the 4 sampled facilities had current NMS delivery notes in the stores files . Through the PUSH methods they submitted all their requests to NMS through the DHO</li> </ul>



15	<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 2 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points</li> </ul>	0	<p>No development funds for the last two financial years and hence no payments made to the suppliers. Funds available for Wage and Non-Wage recurrent expenditure.</p>
Assessment area: Financial management and reporting				
16	<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4</li> </ul>	0	<p>Annual performance report was submitted on 11th August 2017 beyond the mid July deadline</p> <p>Q1 - 2/12/16</p> <p>Q2 - 16/3/17</p> <p>Q3 - 18/5/17</p> <p>Q4 - 11/08/17</p>
17	<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0</p>	0	<ul style="list-style-type: none"> <li>• The Sector had 23 queries and there was no evidence that they had been responded too at the time of Assessment.</li> </ul>
Assessment area: Social and environmental safeguards				

18	<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> <li>• Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>• 1 out of 5 sampled units does not meet the 30% composition of females</li> <li>• Shuuku HCIV – 8 male, 0 female</li> <li>• Bugongi HCIII – 3 male, 4 female</li> <li>• Kitagata Hospital – 5 male, 4 female</li> <li>• Kyangyenyi HCIII – 4 male, 4 female</li> <li>• Kigarama HCIII – 7 male, 3 female•</li> </ul>
		<ul style="list-style-type: none"> <li>• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>• No guidelines could be traced at each of the 5 sampled health facilities</li> </ul>
19	<p>The LG Health department has issued guidelines on medical waste management</p> <p>Maximum 2 points</p>	<ul style="list-style-type: none"> <li>• Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal : score 2 points.</li> </ul>	0	<ul style="list-style-type: none"> <li>• No guidelines could be traced at each of the 5 sampled health facilities</li> </ul>