



## LGPA 2017/18

Accountability Requirements

Sironko District

(Vote Code: 552)

Assessment	Compliant	%
Yes	3	50%
No	3	50%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Assessment area: Annual performance contract			
LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.	xxx	<ul style="list-style-type: none"> <li>The LG submitted an annual performance contract of the FY 2017/18 as draft on 12/04/2017 but the final document was not accessed to establish timely submission.</li> </ul>	No
Assessment area: Supporting Documents for the Budget required as per the PFMA are submitted and available			
LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).	xxxxx	<ul style="list-style-type: none"> <li>The LG submitted a Budget that included a Procurement Plan for FY 2017/18.</li> </ul>	Yes
Assessment area: Reporting: submission of annual and quarterly budget performance reports			
LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)	xxxxx	LG made a late submission of the annual performance report for the FY 2016/17 on 17/08/2017.	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>	<ul style="list-style-type: none"> <li>The LG submitted all the 4 quarterly budget performance reports but made a late submission for quarter 4, see below;</li> </ul> <ol style="list-style-type: none"> <li>Quarter 1 submitted on 16/11/2016</li> <li>Quarter 2 submitted on 02/02/2017</li> <li>Quarter 3 submitted on 11/05/2017</li> <li>Quarter 4 submitted on 17/08/2017</li> </ol>	<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>xxxxxx</p>	<ul style="list-style-type: none"> <li>The LG made a submission to the Internal Auditor General on the Auditor General findings and the Internal Audit reports for the year.</li> <li>The submissions were dated 10th March 2017 and 18th April 2017 for status of implementation of Internal Audit and Auditor General's findings as per documents inspected from the Internal Auditor's Office and Internal Auditor General's office made by the Chief Internal Auditor.</li> </ul>	<p>Yes</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer</p>	<p>xxxxxx</p>	<ul style="list-style-type: none"> <li>The Audit Opinion for the LG Financial Statements is unqualified as evidenced in the Audit Report dated December 2017 released in January 2018.</li> </ul>	<p>Yes</p>



## **LGPA 2017/18**

Crosscutting Performance Measures

Sironko District

(Vote Code: 552)

Score 49/100 (49%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>All new infrastructure projects in: (i) a municipality; and (ii) all Town Councils in a District are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a municipality/district has:</p> <ul style="list-style-type: none"> <li>• A functional Physical Planning Committee in place that considers new investments on time: score 2.</li> </ul> <hr/> <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>	<p>0</p> <hr/> <p>0</p>	<p>There is no functional Physical Planning Committee in place. There is no plans register.</p> <hr/> <p>There is no single approved plan for all the new infrastructural investments and yet according to inventory at the National physical planning board there is no submission for a valid approved physical structural plan for the LG.</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

According to the budget conference report for FY 2017/18 held on 12/10/2017 and AWP FY2017/18 that was approved under MIN.04/DLC/05/2017 during a council meeting held on 29/05/2017. sampled priorities in the AWP are based on the outcomes of the budget conference, i.e.

- Construction of general ward at Buwasa HC IV. - appears in report page 2 and AWP page 9.
- Construction of 20 stances of pit latrines. - appears in report page 9 and AWP page 8.
- Rehabilitation of 127 stances. – appears in report page 3 and AWP page 2.
- Construction of 1 pit latrine in one RGC. - appears in report page 9 and AWP page 4.
- Protection of 11 springs. - appears in report page 9 and AWP page 4.
- Drilling of 3 boreholes. - appears in report page 9 and AWP page 5.
- Rehabilitation of 7 deep boreholes. - appears in report page 9 and AWP page 5.
- Extension of 4 GFS lines. - appears in report page 9 and AWP page 5.

<ul style="list-style-type: none"> <li>• Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If different, justification has to be provided and evidence that it was approved by Council. Score 2.</li> </ul>	2	<p>According to the priorities in the AWP FY2017/18, it was established that all capital investments were derived from the approved five-year development plan that was approved by council during a sitting held on 22/05/2015.</p> <p>see capital investments below;</p> <ul style="list-style-type: none"> <li>• Construction of general ward at Buwasa HC IV. - appears in DDP page 249 and AWP page 9.</li> <li>• Construction of 20 stances of pit latrines. - appears in DDP page 261 and AWP page 8.</li> <li>• Rehabilitation of 127 stances. – appears in DDP page 261 and AWP page 2.</li> <li>• Construction of 1 pit latrine in one RGC. - appears in DDP page 265 and AWP page 4.</li> <li>• Protection of 11 springs. - appears in DDP page 264 and AWP page 4.</li> <li>• Drilling of 3 boreholes. Appears in DDP page 264 and AWP page 5.</li> <li>• Rehabilitation of 7 deep boreholes. - appears in DDP page 265 and AWP page 5.</li> <li>• Extension of 4 GFS lines. - appears in DDP page 265 and AWP page 5</li> </ul>
<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>Whereas the Project profiles were developed and appear as appendix in 5 –year Development plan from page 286 – 345, there is no proof of discussion during TPC meetings for the same.</p>

3	<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> <li>Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum 1 point.</li> </ul>	1	<p>Annual statistical abstract, with gender dis aggregated data was compiled and presented to the TPC on 23/10/2017 under MIN.05/DTPC/23/10/2017.</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 LG approved AWP and budget FY 2016/17 that was approved by council on 22/05/2016 under MIN.07/SDLC/05/2016, it was established that all infrastructure projects implemented by the LG in the FY 2016/17 were derived from the 2 documents For example</p> <ul style="list-style-type: none"> <li>Construction of 1 standard pit latrine at Bugitimwa HC III. - AWP page7 and budget page18</li> <li>Construction of 3 classrooms at Busamaga P/S. - AWP page 2 and budget page25</li> <li>Rehabilitation of 9 classrooms at Bugimago, Kibira and mahempe P/S'. - AWP page2 and budget page24</li> <li>Construction of 15 latrine stances in Bumadibira, Bunyafwa and Buyobo P/S'. - AWP page 4 and budget page25.</li> <li>Construction of of 1 pitlatrine in RGC of Koota trading center. - AWP page 4 and budget page34</li> <li>Protection of 11 spring wells in 7 S/Cs. - AWP page 4 and budget page34</li> <li>Drilling of 4 deep boreholes in Bukulo, Bukiise, and Bukiyi S/Cs. - AWP page 5 and budget page35</li> <li>Construction of of 3 GFS' in Bukyambi, Nalusala and Busulani S/Cs. - AWP page 5 and budget page35</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

4

The investment projects implemented in the FY2016/17 were completed as per work plan by end of FY at 100%. See completion dates below;

- Construction of 3 classrooms at Busamaga P/S. – 12/05/2017
- Rehabilitation of 9 classrooms at Bugimago, Kibira and mahempe P/S'. – 30/01/2017,09/02/17
- Construction of 15 latrine stances in Bumadibira,Bunyafwa and Buyobo P/S'. 26/09/2016
- Construction of of 1 pitlatrine in RGC of Koota trading center. – 13/06/2017.
- Protection of 11 spring wells in 7 S/Cs. – 28/09/2016,20/09/2016,24/05/2017.
- Drilling of 4 deep boreholes in Bukulo, Bukiise, and Bukiyi S/Cs. – 18/05/2017
- Construction of of 3 GFS' in Bukyambi, Nalusala and Busulani S/Cs. – 29/05/2017,23/05/2017

5	<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects and assets during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2</li> </ul>	0	<p>The investment projects in the FY 2016/17 were NOT ALL completed within the approved budget – Max. 15% plus or minus of original budget See project budget performances below;</p> <ul style="list-style-type: none"> <li>Construction of 1 standard pit latrine at Bugitimwa HC III. – 100%</li> <li>Construction of 3 classrooms at Busamaga P/S. – 100%</li> <li>Rehabilitation of 9 classrooms at Bugimago, Kibira and mahempe P/S'. 225%</li> <li>Construction of 15 latrine stances in Bumadibira, Bunyafwa and Buyobo P/S'. – 57%</li> <li>Construction of 1 pitlatrine in RGC of Koota trading center. 63.8%</li> <li>Protection of 11 spring wells in 7 S/Cs. – 31%</li> <li>Drilling of 4 deep boreholes in Bukulo, Bukiise, and Bukiyi S/Cs. – 71.2%</li> <li>Construction of 3 GFS' in Bukyambi, Nalusala and Busulani S/Cs. – 137.5%</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that the LG has budgeted and spent at least 80% of O&amp;M budget for infrastructure in the previous FY: score 2</li> </ul>	2	<p>The LG budgeted and spent at least 80% of O&amp;M budget for infrastructure under water and roads sector i.e. 116% and 100% respectively is the budget performance.</p>

Assessment area: Human Resource Management

6	<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>Only the Head of Community Based Services had a performance appraisal for FY 2016/207.</li> </ul>
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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	<ul style="list-style-type: none"> <li>• Some positions of HoD were not substantively occupied during FY 2016/2017 including those of: Natural Resources Management, Works, Production &amp; Marketing, and Health.</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>	0	<ul style="list-style-type: none"> <li>• Declarations/submissions for recruitment dated 15th December 2016 to the DSC of 42 vacancies were never completed even to-date due to transparency concerns. .</li> </ul>
		<ul style="list-style-type: none"> <li>• Evidence that 100 percent of staff submitted for confirmation have been considered: score 1</li> </ul>	1	<ul style="list-style-type: none"> <li>• Minute extracts of the 107th, 112th, 115th DSC meetings indicate considerations were made for submissions for staff confirmations during FY 2016/2017.</li> </ul>
		<ul style="list-style-type: none"> <li>• Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1</li> </ul>	1	<ul style="list-style-type: none"> <li>• Minute extracts of the 110th, 111th, and 112th DSC meetings, show cases submitted for disciplinary handling were duly considered</li> </ul>
8	<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3</li> </ul>	0	<ul style="list-style-type: none"> <li>• There are several cases of staff during FY 2016/2017 who accessed the payroll after more than two (2) months of assuming duty for example Waburoko Rogers, Nandira Nathan, Musiimenta Molly and others.</li> </ul>
		<ul style="list-style-type: none"> <li>• Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>• There are cases of staff who retired during FY 2016/2017 who did not access the pensions payroll within 2 months of retirement and even some others up to-date for example: Nerima Rose, Masiga Wetaka, Giduno Jackson, Gimanga Michael Mark, Muhoya Idah and others.</li> </ul>
Assessment area: Revenue Mobilization				

9	<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• If increase in OSR from previous FY but one to previous FY is more than 10% : score 4 points</li> <li>• If the increase is from 5 -10% : score 2 point</li> <li>• If the increase is less than 5% : score 0 points.</li> </ul>	0	<ul style="list-style-type: none"> <li>• Local Revenue (OSR) reduced from UGX. 314, 238, 131 in 2015/2016 to UGX. 264, 262,188 in 2016/2017. The percentage decrease was about 16%.</li> <li>• The source of information is the Audited Financial Statements for 2015/2016 &amp; 2016/2017, Auditor General's Reports for 2015/2016..</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 Local Revenue ratio for actual against budgeted in 2016/2017 is 52.3% derived from UGX. 264, 262, 188 actual from the UGX 505, 000,000 budgeted in the year.</li> <li>• The source of information was the Audited Financial Statements for 2016/2017.</li> </ul>
11	<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>• The LG made Local Service Tax (LST) collections during the Financial Year 2016/2017. Information sourced from the Financial Statements for 2016/2017 and Bank Statements of the General Funds Account for 2016/2017</li> <li>• However, there was no evidence that it remitted the Mandatory LLG share of the LST collected.</li> </ul>
		<ul style="list-style-type: none"> <li>• Evidence that the LG is not using more than 20% of OSR on council activities: score 2</li> </ul>	2	<ul style="list-style-type: none"> <li>• During the FY 2016/2017, the LG spent UGX. 24, 400,000 on council activities. The expenditure was within the Limit of the 20% (UGX. 62, 847, 626) of 2015/2016 actual Local Revenue collection of UGX. 314, 238, 131.</li> <li>• Therefore the LG spent within the 20% Limit.</li> </ul>

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>Sironko DLG has a substantive Senior Procurement Officer appointed under the Minute No.4/112/2008 on 25th/2/2008</li> <li>The LG also has a Procurement Officer substantively appointed by the District Service Commission under Minute No. DSC/101/05dd on 2nd/11/2015</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1</li> </ul>	1	<ul style="list-style-type: none"> <li>Min/Siro/552/005/011/CC/FY2016/17 shows the Contracts committee meeting held on 24th/02/2017, receiving the TEC report for consideration</li> <li>Min/Siro/552/005/006/CC/FY2016/17 also shows the contracts committee meeting receiving a report from the TEC for consideration</li> </ul>

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

1

(a) Under Min/Siro/552/005/006/CC/FY2016/17, In a meeting held on 21st Nov. 2016, the contracts committee approved recommendations made by the TEC and approved the award of the following contracts to various bidders;

(i) Construction of three classroom block at Busamaga p/s in Buyobo s/c awarded to M/s Buluganya International Limited

(ii) Completion of 2 classroom block at Bugimagu p/s in Zesui sub county awarded to M/s Dokasi General Contractors Limited

(iii) Drilling of four deep boreholes in the district awarded to M/s Icon Projects Limited

(b) In a contracts committee meeting held on 23rd November 2017, under Minute No Siro/552/009/003/CC/FY/2017-2018, the contracts committee received an evaluation report and differed with some of the recommendations made for the award of contracts by the giving justification. These included;

(i) Construction of General Ward at Buwasa HC IV, which differed because the Best evaluated bidder quoted more than the budgeted cost. The contracts committee recommended for a re-advertisement of the procurement.

(ii) Construction of a five stance pit latrine at Bungwanyi p/s, referred to Evaluation Committee for re-evaluation because the reasons given for choosing the best evaluated bidder were not satisfactorily.

(iii) Protection of various water springs referred to Evaluation Committee for re-evaluation because the reasons given for choosing the best evaluated bidder were not satisfactorily.

13	<p>The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.</p> <p>Maximum 2 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2</li> </ul>	0	<p>(a) The Procurement and Disposal plan for the FY2017/18 covered all the infrastructural projects in the Sironko district annual work plan for the FY 2017/18. Infrastructural Projects covered in the water sector are on page 31 – 33, for health sector page 16 – 18 and for Education page 19 – 25 in the district annual work plan.</p> <p>(b) In the FY 2016/17, the LG didn't make all the procurement as planned in the procurement and disposal plan for the FY 2016/17. For example, the following Infrastructural projects weren't conducted;</p> <p>(i) Installation of solar system at the DHO's office</p> <p>(ii) Construction of 5 stance latrine at Bungwanyi p/s</p> <p>(iii) Construction of 5 stance latrine at Buzelobi p/s</p> <p>(iv) Construction of a twin teachers house at Zebugubusi p/s</p> <p>(v) Construction of 4 classrooms, office and store at Bungwanyi p/s</p>
14	<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2</li> <li>For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2</li> </ul>	0	<p>All the Bid documents for the FY2017/18 were prepared on 29th/09/2017. This was due to the laxity in the PDU, according to Sr. Procurement officer.</p> <ul style="list-style-type: none"> <li>The LG has an updated contracts register for the FY2016/17. It shows the project name, the contractor, and the contract value, the date of award, commencement and completion dates.</li> <li>The procurement activity files were incomplete with project supervision reports, Commissioning reports, completion certificates, and interim certificates missing.</li> </ul>

		<ul style="list-style-type: none"> <li>For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.</li> </ul>	2	<p>The LG adhered with the procurement threshold with conducting procurements above Ugx. 50m under open national bidding and advertised in the Monitor News Paper. These included;</p> <p>(i) Construction of two new GFS in Bukyambi, Busulani, Buteza and Nalusala (contract value = Ugx. 98,128,000)</p> <p>(ii) Borehole drilling and Rehabilitation (contract value = Ugx. 151,000,000)</p> <p>For procurements that were below Ugx. 50m were conducted under selective bidding process and invitations for bids were sent to pre-qualified bidders. Such procurements included;</p> <p>(i) Construction of 5 stance pit latrine at Bugiboni p/s (contract value = Ugx. 22,325,000)</p> <p>(ii) Construction of 5 stance pit latrine at Bugobbiro p/s (contract value = Ugx. 21,000,000)</p> <p>(iii) Construction of a placenta pit at Budadiri HC IV (contract value = Ugx. 5,000,000)</p> <p>(iv) Construction of 1 blocks 5 stance drainable latrines at Bugitmbwa HC III (contract value = Ugx. 21,000,000)</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>All the completed works projects for the FY2016/17 had no completion certificates. There were a few interim certificates made purposely for processing payments, including an Interim Certificate for the Construction of 3 classroom block at Busamaga p/s. Most of the projects are still under defects liability period and hence the completion certificates are yet to be processed.</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>All the on-going works projects that were visited for the FY2017/18 had no site boards. The contractors sounded unaware that they were had to install a site board. These included;</p> <p>(i) Construction of 5 stance latrine at Buzelobi p/s</p> <p>(ii) Construction of 5 stance latrine at Bumirisa p/s</p> <p>(iii) Construction of 5 stance latrine at Bungwanyi p/s</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"> <li>Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4</li> </ul>	4	<ul style="list-style-type: none"> <li>The LG makes timely monthly Bank reconciliations using the IFMS Navision system as evidenced by view and prints. up to the 31st January 2018..</li> </ul>
17	<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2.</li> </ul>	2	<ul style="list-style-type: none"> <li>The LG made timely payments to Suppliers during the Financial Year 2016/2017 as evidenced from payments documents (vouchers, requisitions, invoices) evidenced from the Accounts of Health, Education, Works, Statutory Bodies, Finance examined. The payments time ranged from one to Forty days.</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>	3	<ul style="list-style-type: none"> <li>The LG has a Substantive Principal Internal Auditor duly appointed under a DSC Minute Number DSC/105/10dd/31/05/2016</li> <li>The Internal Audit produced all the quarterly Internal Audit reports for 2016/2017 dated the 15th December 2016 , 15th January 2017, 15th March 2017 and 16th August 2017 for First, Second, Third and Fourth Quarters respectively.</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries: score 2.</li> </ul>	2	<ul style="list-style-type: none"> <li>The LG provided information to the Council and LGPAC on the status of the implementation of the Audit findings evidenced through the submissions by the Internal Auditor to LGPAC as per the above dates of submissions.</li> </ul>
		<ul style="list-style-type: none"> <li>Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1</li> </ul>	0	<ul style="list-style-type: none"> <li>There were submissions to LGPAC and Accounting officer as seen in the Internal Audit Reports BUT the only LGPAC meeting minutes and reports handled the financial year 2014/2015 and 2015/2016. And not 2016/2017.</li> <li>The LGPAC has yet to sit and discuss the 2016/2017 Audit Reports.</li> </ul>
19	<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4</li> </ul>	0	<ul style="list-style-type: none"> <li>The LG does not maintain an Assets Register in the format prescribed in the Accounting Manual.</li> </ul>

20	<p>The LG has obtained an unqualified or qualified Audit opinion</p> <p>Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY:</p> <ul style="list-style-type: none"> <li>• unqualified audit opinion: score 4</li> <li>• Qualified: score 2</li> <li>• Adverse/disclaimer: score 0</li> </ul>	4	<ul style="list-style-type: none"> <li>• The LG had unqualified Audit opinion as evidenced from the OAG report for 2016/2017 dated December 2017 released in January 2018.</li> </ul>
Assessment area: Governance, oversight, transparency and accountability				
21	<p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p>	<p>Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2</p>	2	<p>According to the minutes available for FY 2016/17, council sat 6 times i.e. sat on 31/03/2017, 21/12/2016, e.t.c... and yet during the council meeting that was held on 31/03/2017, committee reports for quarter II FY 2016/17 were presented for discussion and adoption in council, presentation of draft AWP FY 2017/18, discussion of the capacity building plan and laying of budget estimates FY 2017/18 were all service delivery issues discussed then.</p>
22	<p>The LG has responded to the feedback/complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• Evidence that LG has designated a person to coordinate response to feedback (grievance /complaints) and responded to feedback and complaints: score 2.</li> </ul>	0	<p>No person in place designated to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints</p>
23	<p>The LG shares information with citizens (Transparency)</p>	<p>Evidence that the LG has published:</p> <ul style="list-style-type: none"> <li>• The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2</li> </ul>	0	<p>Whereas the LG Payroll was seen, the Pensioner Schedule was not published on public notice board.</p>
	<p>Total maximum 4 points on this Performance Measure</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>A list of procurements to be done for the FY 2017/18 together with a list of best evaluated bidders with contract amounts was seen on the public notice boards. NB: Most contracts were for collection of local revenues from various S/Cs.</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	The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens	<ul style="list-style-type: none"> <li>Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1</li> </ul>	1	<ul style="list-style-type: none"> <li>On the public notice board, a communication on IPFs FY 2017/18 dated 01/02/2017 was seen</li> <li>The DDEG guidelines were also displayed on the notice board.</li> </ul>
	Maximum 2 points on this performance measure	<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	There was no proof to support the fact that LG during FY 2016/17 conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc...)

Assessment area: Social and environmental safeguards

25	The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles	<ul style="list-style-type: none"> <li>Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2.</li> </ul>	2	<ul style="list-style-type: none"> <li>Minute No. 03/DTPC/08/2016 indicates that the GFP provided technical support to the Technical during the Planning/Physical Planning Committee meeting held on 8th/08/2016</li> <li>The GFP provided an activity report on gender mainstreaming held on 13th/06/2017</li> </ul>
	Maximum 4 points on this performance measure.			

		<ul style="list-style-type: none"> <li>• Evidence that gender focal point has planned activities for current FY to strengthen women's roles and that more than 90% of previous year's budget for gender activities has been implemented: score 2.</li> </ul>	2	<p>(a) The GFP has planned activities to strengthen women's roles for the FY2017/18 that includes;</p> <ul style="list-style-type: none"> <li>• Participating in International Women's Day Celebrations</li> <li>• Conducting meeting of women councils</li> <li>• Training and monitoring of UWEP and YLP programs.</li> </ul> <p>(b) The LG utilised more than the budgeted costs on gender activities. The LG budgeted Ugx. 10m and spend Ugx. 11m, representing 110%</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>	<ul style="list-style-type: none"> <li>• Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 2</li> </ul>	2	<p>Environmental screening was done for various projects ranging from the protection of springs, construction of stance pit latrines at RGCs, construction of pit latrines at primary schools, and construction classroom block at Busamaga p/s. For Water Gravity Flow Schemes, EIA are prepared at the inception of the project, and they are followed during the implementation of subsequent extensions. GFSs with EIAs, includes; Bugitirima GFS, Nalusala GFS and Buwasa GFS.</p>
		<ul style="list-style-type: none"> <li>• Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1</li> </ul>	1	<p>Review of the bid documents indicated that environment and social mitigation plans are integrated into the bid documents. A specific cost in the BOQs is allocated to the implementation of environment issues in every works projects.</p>
		<ul style="list-style-type: none"> <li>• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1</li> </ul>	0	<p>The process of titling all land where the LG projects are established had just begun at the time of the assessment, and hence only one projects had land conducted in the FY 2016/17, Construction of 1 blocks 5 stance drainable latrines at Bugitmbwa HC III, had a land title. In the water sector, only 2 out of 15 water projects implemented in the FY 2016/17 had consent forms.</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	No Environmental and Social Mitigation Certification Forms were prepared and signed for the completed projects by the environment officers. These forms don't part of the payment and therefore both the contractors and the LGs tend to ignore them.
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## **LGPA 2017/18**

Educational Performance Measures

Sironko District

(Vote Code: 552)

Score 59/100 (59%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Human Resource Management				
1	<p>The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4</li> <li>Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4</li> </ul>	4	<p>A budget of UGX. 7,834,598,000/= was in place for 1191 teachers in post giving an average of 11 teachers per school meeting the threshold of 8 teachers per school.</p> <p>105 schools have classes up to P.7 with the lowest staff of 8 teachers and highest staff of 25 teachers. 5 schools have classes ranging from classes P.5 to P.6 each with an extra teacher on top of the classes except Gabende P/S with 5 classes and five teachers.</p>
2	<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0</li> </ul>	3	<p>Out of 1249 teachers [staff ceiling], 1191 [95.3%] teachers [in OBT and staff lists] are in post with a wage bill in place leaving a gap of 58 teachers who are replaceable.</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>	0	<p>Only one inspector is in post contrary to the 3 as per structure. The approved costed staff establishment 2017 in place confirm the three in structure with wage bill in place.</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>	0	<p>There was no evidence of a recruitment plan to fill the gap of 58 yet wage bill was available.</p>
		<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of School Inspectors: score 2</p>	0	<p>No recruitment plan to fill vacant posts for inspectors was in place yet the wage bill was available.</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</p> <ul style="list-style-type: none"> <li>• 100% school inspectors: score 3</li> </ul>	0	<ul style="list-style-type: none"> <li>• Initially during FY 2016/2017 there were 2 school inspectors however 1 of them was after assigned the duties of DEO. The remaining 1 inspector of schools namely Wamboko Rose was not appraised.</li> </ul>
		<p>Evidence that the LG Education department appraised head teachers during the previous FY.</p> <ul style="list-style-type: none"> <li>• 90% - 100%: score 3</li> <li>• 70% - 89%: score 2</li> <li>• Below 70%: score 0</li> </ul>	0	<ul style="list-style-type: none"> <li>• Sironko DLG had 110 primary school head teachers during FY 2016/2017, however there is no evidence of performance reports and appraisals for the calendar year 2016.</li> </ul>
Assessment area: Monitoring and Inspection				

6	The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools	<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>	1	Circulars from MoES in place: Establishment Notice No,1/ 2017 - Dressing Code; Operations of Unlicensed/Unregistered schools - 16/01/2017; No, 14/2017 - Over testing learners; Teacher Support Supervision in Schools - 30/06/2017. Circulars from district to schools in place were: Clarification on UPE/USE releases - 28/8/2017 and Closure of schools - 19/01/2018.
	Maximum 3 for this performance measure	<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>	2	Minutes and attendance lists to meetings of: 26/5/2017; 05/07/2017;18/12/2017;28/09/2017; 20/09/2017; 14/08/2017; 17/07/2017; and 24/07/2017 were in place.
7	The LG Education Department has effectively inspected all private and public primary schools	<ul style="list-style-type: none"> <li>Evidence that all private and public primary schools have been inspected at least once per term and reports produced: o 100% - score 12 o 90 to 99% - score 10 o 80 to 89% - score 8 o 70 to 79% - score 6 o 60 to 69% - score 3 o 50 to 59% score 1 o Below 50% score 0.</li> </ul>	3	145 schools [110 government & 35 private] were inspected as follows basing on inspection reports: term I/2017 - 63 [43.4%], term II /2016 - 111 [76.6%], and term III /2016 - 130 [89.7%] giving an average of 69.9%.
8	LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations	<ul style="list-style-type: none"> <li>Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4</li> </ul>	4	Minutes and attendance lists of meetings of 15/11/2017; 20/04/2017; 28/11/2016; and 09/02 2017 were in place with traces of issues raised in inspection reports discussed.
		<ul style="list-style-type: none"> <li>Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2</li> </ul>	2	Inspection reports of terms I, II, and III were received by DES Regional Office - Eastern on 16/05/2017, 02/01/2017 and 16/01/2017 respectively. However, DES headquarters did not receive the reports.
	Maximum 10 for this performance measure	<ul style="list-style-type: none"> <li>Evidence that the inspection recommendations are followed-up: score 4</li> </ul>	0	There was no evidence of follow-up reports on recommendations raised in inspection reports.

9	The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES	<ul style="list-style-type: none"> <li>• Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5</li> </ul>	5	The names and number of schools in OBT, statistical forms, and staff lists tallied with those EMIS [2016] data captured.
	Maximum 10 for this performance measure	<ul style="list-style-type: none"> <li>• Evidence that the LG has submitted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and OBT: score 5</li> </ul>	5	EMIS [2016] enrolment data tallied with enrolment figures in OBT and statistical forms at schools and at district. schools: Bubikoote [6299] - 139 boys & 126 girls; Bukyabo [6224] - 261 boys & 178 girls; Bugitimwa [233] - 290 boys & 315 girls; Bugobbiro[6327] - 355 boys & 411 girls; and Bunagami [182 boys & 174 girls had enrolment figures rhyme with EMIS data.

Assessment area: Governance, oversight, transparency and accountability

10	The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council	<ul style="list-style-type: none"> <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	From the committee minutes, it was established that a committee sat and discussed service delivery issues for example during a committee meeting that sat on 19/10/2016, under MIN.3/SSC/10/2016, sector report for quarter 1 FY 2016/17 was presented by the DEO for discussion.
	Maximum 4 for this performance measure	<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>During a committee meeting that sat on 19/10/2016,the following were some of the issues recommended for approval in council;</p> <ul style="list-style-type: none"> <li>• That the DEO comes up with a concept paper on feeding in schools to improve on performance.</li> <li>• That reallocation of funds meant for construction of classrooms at Bugwanyi P/S which is a community school be considered.</li> <li>• That chairman and CAO should lobby for increase on wage bill to address low staffing levels.</li> </ul>

11	<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0</p>	5	<p>Basing on the appointment letters dated 20/04/2015 term of office for all SMCs in the district commenced June 2015 and expires May 2018. Same information was reflected in minutes and SMC files at both district and schools.</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>	3	<p>UPE funds received by each school was duly displayed on notice boards for public viewing.</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>	4	<p>procurement requests for FYs 2016/17 and 2017/18 dated 01/08/2016 and 29/09/2017 respectively were in place.</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>• The LG Education department made timely certification and recommendations for payments to suppliers in time. This was evidenced from the payments documents (vouchers, funds requisition forms, interim certificates) for the following supplies &amp; Projects in 2016/201; Constructions of Pit Latrines as BUGOBBIRE, KIBIRA, BUTANDIGA Primary Schools, Construction of a Four Classroom Block at BUGIMABU P/S, Construction of a Teacher's House and a Lined Pit Latrine at BUGUNZU P/S.</li> </ul>
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Assessment area: Financial management and reporting

15	<p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by mid-July for consolidation: score 4</li> </ul>	0	<p>There was no proof that the sector made a timely submission of the annual performance report to planning unit for consolidation.</p>
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16	<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points o If all queries are not responded to score 0</li> </ul>	2	<ul style="list-style-type: none"> <li>• The sector had two queries for the Financial Year 2016/2017 evidenced with the Internal Audit Report on lacking accountability for UPE funds remitted to three schools and unaccounted for funds by the District Inspector of Schools for Inspection activities for third and fourth quarters.</li> <li>• There were formal responses to Audit findings (Internal Audit Reports and Management letters) and this was evidenced with responses availed by the Internal Audit and Finance Departments dated the 16th &amp; 21st March and 23rd May 2017. The responses contained the required accountabilities in form of Inspection reports, receipts for the expenses of UPE funds,</li> </ul>
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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"> <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>A presentation on gender issues by the gender officer sensitising senior women/men teachers and headteachers dated 01/11/2017 was in place.</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>There was a book on School Sanitation and Hygiene in Uganda [UNICEF, 2006] in DEO's office and circulated to all schools to guide teachers on sanitation issues.</p>
		<ul style="list-style-type: none"> <li>• Evidence that the School Management Committee meet the guideline on gender composition: score 1</li> </ul>	1	<p>According to appointment letters, SMC minutes and attendance lists , each committee has a membership of at least 3 women.</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>	0	<p>There was no evidence of collaboration between departments of education and environment over environment management in schools, Neither guidelines to this effect were in place.</p>
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## **LGPA 2017/18**

Health Performance Measures

Sironko District

(Vote Code: 552)

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 • More than 80% filled: score 6 points, • 60 – 80% - score 3 • Less than 60% filled: score 0</p>	6	<ul style="list-style-type: none"> <li>• 366 positions are filled as per the performance contract 2017/18. However current staff list indicates that there are 328 established position for health workers with a wage bill provision for the year 2017/18 of which one post (DHO) is not yet filled – this is 89% of the structure for primary health workers with a wage bill provision from PHC wage for the current FY has been filled</li> </ul>
2	<p>The LG Health department has submitted a comprehensive recruitment plan to the HRM department</p> <p>Maximum 4 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers: score 4</p>	0	<ul style="list-style-type: none"> <li>• There was a staff recruitment plan in the performance contract however it was not comprehensive as not all vacant positions of health workers had been included.</li> <li>• For HC III only Nurses and Midwives have been included, for HC IV only Anaesthetic officers and assistants have been included, and 3 vacant posts at the district health were included. And these were the same posts proposed for filling FY 2017/18.</li> </ul>
3	<p>The LG Health department has ensured that performance appraisal for health facility in charge is conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the health facility in-charge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0</p>	0	<ul style="list-style-type: none"> <li>• Of the two HC IV in-charges one (1) was not appraised in accordance with the MoPS appraisal guidelines. The period of appraisal indicated on the appraisal is November 2016 to February 2017 instead of a complete FY.</li> </ul>

4	<p>The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4</li> </ul>	4	<ul style="list-style-type: none"> <li>• There are 5 midwives and 6 enrolled nurses deployed at Buwasa HC IV -This is consistent with the staff lists submitted together with the budget 2017/18</li> </ul>
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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"> <li>• Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3</li> </ul>	0	<ul style="list-style-type: none"> <li>• There were no communication letters to indicate that the DHO communicated ALL of the following guidelines issued by the national level in the previous year:             <ol style="list-style-type: none"> <li>1. PHC grants guidelines 2016/17</li> <li>2. MoH guidelines for eye care – October 2016</li> <li>3. Uganda Clinical Guidelines – 2016</li> <li>4. Essential Medicines &amp; Health Supplies List – 2016</li> <li>5. MoH Resettlement Policy Framework – 2016</li> <li>6. Health Sector Quality Improvement Framework and Strategic Plan 2015/16 – 2019/20, June 2016</li> </ol> </li> </ul>
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		<ul style="list-style-type: none"> <li>Evidence that the DHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3</li> </ul>	0	<ul style="list-style-type: none"> <li>In the DHMT meetings minutes presented to me dated 10th August 2016 had no indication that the DHO had held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level</li> <li>No other meeting minutes had an indication that the DHO had held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level</li> </ul>
6	<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3</p>	0	<ul style="list-style-type: none"> <li>The district did not avail the mandatory quarterly integrated support supervision reports by the DHT for FY 2016/17. Only the 1st Quarter integrated support supervision report submitted to CAO on the 28th September 2016 documented integrated support supervision activities by the DHT at Budadiri HC IV and Buwasa HC IV were presented.</li> <li>Supervision log books at Budadiri HC IV and Buwasa HC IV had no logs for ALL the quarterly mandatory integrated support supervisions by the DHT during FY 2016/17</li> </ul>
		<p>Evidence that DHT has supervised lower level health facilities within the previous FY: • If 100% supervised: score 3 points • 80 - 99% of the health facilities: score 2 • 60 - 79% of the health facilities: score 1 • Less than 60% of the health facilities: score 0</p>	0	<ul style="list-style-type: none"> <li>The district did not avail the mandatory quarterly integrated support supervision reports by the DHT for FY 2016/17. Only the 1st Quarter integrated support supervision report submitted to CAO on the 28th September 2016 documented integrated support supervision activities by the DHT to all 28 HFs.</li> <li>Supervision log books at Sironko HC III and Bumulisha HC III had no logs for ALL the quarterly mandatory integrated support supervision by the DHT during FY 2016/17</li> </ul>

7	<p>The Health Sub-district(s) have effectively provided support supervision to lower level health units</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that health facilities have been supervised by HSD and reports produced: • If 100% supervised score 6 points • 80 - 99% of the health facilities: score 4 • 60 - 79% of the health facilities: score 2 • Less than 60% of the health facilities: score 0</p>	0	<ul style="list-style-type: none"> <li>• The HSDs (Budari HC IV and Buwasa HC IV) did not avail the mandatory quarterly integrated support supervision reports by the HSD for FY 2016/17. Neither health Unit in-charges were present at the facilities yet reports were reported to be in their custody.</li> <li>• Supervision log books at Bumulisha HC III and Sironko HC III had no logs for integrated support supervision by the HSD during FY 2016/17</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> <li>• Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6</li> </ul>	0	<ul style="list-style-type: none"> <li>• There were no integrated support supervision reports to make recommendations for corrective actions on</li> <li>There are no recommendations to be followed up on</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>	10	<ul style="list-style-type: none"> <li>• All 28 health facilities on the OBT that are also on the HIMS list from MoH.</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	<p>From the committee minutes, it was established that a committee sat and discussed service delivery issues for example during a committee meeting that sat on 28/02/2017, sector report for quarter II FY 2016/17 was presented by the DHO for discussion.</p> <p>During a committee meeting that sat on 28/02/2017, the following were some of the issues recommended for approval in council;</p> <ul style="list-style-type: none"> <li>• That there is need for a sign language nurse at Budadiri HC IV.</li> <li>• That planning for solar in wards at Budadiri HC IV should be done.</li> <li>• That staff who absent themselves without clear reasons be deleted from the LG pay roll. Etc....</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>• None of the health facilities visited availed the mandatory quarterly HUMC meeting minutes for FY 2016/17.</li> <li>• Budari HC IV and Buwasa HC IV did not avail HUMC minutes as they were reported to be in the custody of the facility incharge who was reported away at the time of the assessment.</li> <li>• At the time of the assessment Sironko HC III availed only quarter 2 and quarter 3 minutes dated 18th November 2016 and 25th April 2017 respectively.</li> <li>• Bumulisha HC III did not hold any meetings during 2016/17 due to non-appointment member by Bumalimba sub-county</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>	0	<ul style="list-style-type: none"> <li>There was no evidence on the public notice board at the DHOs office that the office had publicised all health facilities receiving PHC non-wage recurrent grants.</li> </ul>
Assessment area: Procurement and contract management				
13	<p>The LG Health department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2</li> </ul>	0	<ul style="list-style-type: none"> <li>There was no submission letters to DPU that covered all investment items in the approved Sector annual work plan and budget</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>At the time of the assessment no copy of the procurement request form to the PDU by 1st Quarter of the current FY 2017/18 was availed</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>There was a Procurement Plan for 2016/17 forwarded by the health department signed by the DHO on the 27th January 2016</li> </ul>

15	<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 2 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points</li> </ul>	2	<ul style="list-style-type: none"> <li>The DHO made timely certification and recommendations for payments to suppliers in time. This was evidenced from the payments documents (vouchers, funds requisition forms, interim certificates) for the following supplies in 2016/2017; Construction of Five Stance Latrines at BUWASA HCIV &amp; BUGITIMWA HCIII, Re-modification of a drug store at BUDADIRI HCIV and Fuel for the department in September 2016, Stationery for 4th Quarter, Balance for the construction of a Three Stance Latrine at DHO's Office, Repair &amp; Service of the Department's Vehicle, Fencing of BUWASA HCIV, Re, The certification periods ranged between one and Thirty three days.</li> </ul>
Assessment area: Financial management and reporting				
16	<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4</li> </ul>	0	<p>There was no proof that the sector made a timely submission of the annual performance report to planning unit 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>	2	<ul style="list-style-type: none"> <li>The sector had three queries for the Financial Year 2016/2017 evidenced with the Internal Audit Reports which were on lacking accountability for sensitization meetings by the Health Inspector, DHO's support supervision for second , third and fourth Quarters, lack of supporting documents for Fuel supply to the department.</li> <li>There were formal responses to Audit findings (Internal Audit Reports and Management letters) by the CAO and this was evidenced with responses availed by the Internal Audit and Finance Departments dated the 16th &amp; 21st March and 23rd May 2017. The department availed the required supporting documents in form of invoices and receipts, training reports for sensitization meetings, support supervision reports.</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> <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>	2	<ul style="list-style-type: none"> <li>Health Unit Management Committee (HUMC) at Sironko HC III had more than two females members</li> </ul> <p>No guidelines on how to manage sanitation in health facilities including separating toilet facilities for men and women were found at Budari HC IV, Buwasa HC IV, Sironko HC III and Bumulisha HC III</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"> <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 medical waste management guidelines, including guidelines for construction of facilities for medical waste disposal were found at Budari HC IV, Buwasa HC IV, Sironko HC III and Bumulisha HC III</li> </ul>





## **LGPA 2017/18**

Water & Environment Performance Measures

Sironko District

(Vote Code: 552)

Score 27/100 (27%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: score 10</li> </ul>	10	<p>The Annual Workplan For Sironko District Water and Sanitation Conditional Development Grants For 2017/18 dated 12th July 2017 signed by Chief Administrative Officer , Mr. Lukwago Anthony Martin, the district safe water coverage is at 75.6%</p> <p>Subcounties with safewater coverage below the district include: Buhugu at 75.1%, Bugitimwa at 60%, Busulani at 71.6%, Bukiise at 51.9%, Bunyafwa at 54.2%, Bukiyi at 54.4%, Masaba at 74.5%, and Bukhulo at 66.2%.</p> <p>The District has targeted the following s/c:</p> <p>Bukhulo: 1 borehole to be drilled, 2 boreholes for rehabilitation, 1 spring for protection.            Bukiise: 1 bh for drilling, 2 for rehabilitation.            Buhugu:4 tap stands for construction.            Bugitimwa: 1 spring to be protected and a design of GFS of Mashate. Masaba s/c: 1 spring for protection. Bukiyi: rehabilitation of 2 boreholes. Bunyafwa: 1 spring for protection. Bumyafwa: a design of Bunyafwa - Buwasa and Mashate GFS and construction of Bunyafwa – Buwasa GFS</p> <p>From the review of the above information all sub counties with safe water coverage below the district have been targeted.</p>

<p>2</p>	<p>The LG Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15</li> </ul>	<p>0</p>	<p>From the Annual Work plan for Sironko District Water and Sanitation Conditional Development Grants For FY 2016/17 dated 21st July 2016 the district safe water coverage was at 76. 2% .</p> <p>From the 4th quarter Progress Report FY 2016/2017 dated 12th July 2017, the district safe water coverage was at 75.6%. The workplan and the report have inconsistent safe water coverage figures for the district.</p> <p>Sub counties with safe water coverage below the district included:</p> <p>Bumasifwa at 71.8%, Busulani at 68%, Buteza at 67.2%, Buhugu at 75.1%, Bugitimbwa at 60%, Bukiise at 51.9%, Bunyafwa at 54.2%, Bukiyi at 54.4%, Masaba at 74.5%, and Bukhulo at 66%</p> <p>The following sub counties were targeted:</p> <p>Busulani s/c: 1 borehole to be rehabilitated. In Buteza s/c: 1 spring for protection and 1 GFS Rehabilitation. Bumasifwa s/c: 2 springs to be protected and 6 GFS Tap stands to be constructed. In Bumasifwa s/c:</p> <p>a gfs with 6 tapstands. Bugitimbwa: 2 springs to be protected. Bukiise: 1 new borehole and 2 rehabilitation. Bunyafwa: 2 springs for protection. Bukiyi: 1 new bh and a rehabilitation of borehole. Bukhulo 2 new bhs and 2 bh rehabilitation.</p> <p>Buhugu and Masaba subcounties were not targeted</p>
<p>Assessment area: Monitoring and Supervision</p>				

3	<p>The LG Water department carries out monthly monitoring and supervision of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the LG Water department has monitored each of WSS facilities at least annually.</p> <ul style="list-style-type: none"> <li>If more than 95% of the WSS facilities monitored: score 15</li> <li>80 - 95% of the WSS facilities - monitored: score 10</li> <li>70 - 79%: score 7</li> <li>60 - 69% monitored: score 5</li> <li>50 - 59%: score 3</li> <li>Less than 50% of WSS facilities monitored -score 0</li> </ul>	0	<p>Report on supervision and monitoring of projects For 2016/2017 and 2015/2016 dated 25th april 2017 to CAO and by DWO , Buyi DK show evidence of supervision of works in the sub counties of Bukiyi – drilling of boreholes, Bukiise s/c – borehole rehabilitation, Buhugu and Butandiga, Bumasiywa subcounties – extension of GFS, Bukiyi s/c- borehole rehabilitation, spring protection in Bumasiywa s/c, Butandinga and Masaba s/c protection of springs..</p> <p>A second Report on supervision and monitoring of Projects for 2016/17 to CAO, by District Water Officer, Mr. Buyi DK. Dated 24/03/2017 in subcounties of Zesui – construction of source intake , Bukiise s/c and Mafudu, Busulani and Bukhulo s/c for borehole rehabilitation , Bukyambi s/c, and Bumasiywa s/c for extension of GFS, Bukhulo and Bukiise subcounty s/c for Borehole drilling, and Spring protection in Bugitimbwa, Buyobo, Butandinga s/c.</p> <p>From the number of facilities planned only 16 out of 39 (less than 50%) were visited. These included 6/11 springs, 4 /16 Bh rehabilitation, 3/13 tapstands on GFS extension, no visits to gfs extension done, none on new GFs, none on source intake of Zesui and latrine. 3/4boreholes visited.</p>
4	<p>The LG Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has submitted accurate/consistent data for the current FY: o List of water facility which are consistent in both sector MIS reports and OBT: score 10</li> </ul>	0	<p>The District has not yet compiled data for the current financial year. Construction works have just started. Hence no data submitted at the Mo WE</p>

Assessment area: Procurement and contract management

5	<p>The LG Water department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4</p>	4	<p>The PP Form 1 for the following projects were prepared by the DWO on 16/8/2017 and CAO confirmed funding on the same date 16/8/2017:</p> <ul style="list-style-type: none"> <li>- Construction of source intake For Mashate GFS</li> <li>- Rehabilitation of 7Nos. Boreholes</li> <li>- Consultancy Services for siting and Borehole construction supervision</li> <li>- Construction of Masha GFS</li> <li>- Protection of Springs (5 Nos. PP Form 1)</li> <li>- Construction of 3 Stance Drainable latrines</li> <li>- Rehabilitation of Zesui GFS</li> <li>- Extension of Nabalenzi GFS</li> <li>- Extension of Bumasisiwa GFS</li> <li>- Procurement of HDPE pipes and fittings</li> <li>- Borehole drilling, casting and handpump installations</li> </ul>
6	<p>The DWO has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• If the DWO prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2</li> </ul>	0	<p>At the time of the assessment, Contract managers had not been appointed. No contract management plan in place. No monthly site visit reports in place</p>

		<ul style="list-style-type: none"> <li>• If water and sanitation facilities constructed as per design(s): score 2</li> </ul>	2	<p>Visited facilities included those for last financial year 2016/17.</p> <ol style="list-style-type: none"> <li>1. Giumusi tapstand which was rehabilitated in Bumasisfwa s/c</li> <li>2. Zebusiro tapstand completed on 8/05/2017 in Bumasisfwa s/c</li> <li>3. A borehole DWD 52708 in Bulukyeka village, Bukhulo s/c</li> </ol> <p>These water facilities were constructed as per designs.</p>
		<ul style="list-style-type: none"> <li>• If contractor handed over all completed WSS facilities: score 2</li> </ul>	0	<p>At the time of the assessment there was no evidence of handover of completed facilities that were constructed 2016/17. For the current financial year works are ongoing.</p>
		<ul style="list-style-type: none"> <li>• If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2</li> </ul>	0	<p>At the time of the assessment field completion reports were missing for the completed works of 2016/17. The works of 2017/18 are ongoing.</p>
7	<ul style="list-style-type: none"> <li>• Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	3	<ul style="list-style-type: none"> <li>• The DWO made timely certification and recommendations for payments to suppliers in time. The payments documents (vouchers, funds requisition forms, interim certificates) for the following projects in 2016/2017; Supply of HD water pipes to the district, Extension of BUSULANI, BUMASIFWA &amp; BUKUMBULA GFS, Construction of Three Water Springs at KIWOKO ,WOSUKISA &amp; NDEMBALEBA in BUTEZA &amp; BUYOBO Sub Counties, Drilling of Five Deep Boreholes at KILULU VIWE, BULUKYAKA, BUMIBIYU, KUSINYI &amp; KIBANZA and Rehabilitation of of Six Boreholes at SARAJEVO, MPOGO P/S, SHITENDE A, NAKIRUNGU P/S, SOOLAWALA in BUKIISE, BUKHULO, BUKIISE, BUSULANI, BUKIYI,&amp; BUKHULO Sub Counties respectively.</li> </ul>
Assessment area: Financial management and reporting				

8	<p>The LG Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5</li> </ul>	0	<p>There was no proof that the sector made a timely submission of the annual performance report to planning unit 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"> <li>• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 5 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0</li> </ul>	3	<ul style="list-style-type: none"> <li>• The sector had three queries for the Financial Year 2016/2017 evidenced with the Internal Audit Reports and were on unaccounted for funds by the DWO and two staff for supervision activities in the third and fourth Quarters, lacking accountability for Pump Mechanics technical Supervision, lack of supporting documents for suppliers of stationery to the department.</li> <li>• There were formal responses to Audit findings (Internal Audit Reports and Management letters) with provision of supporting documentation which included; acknowledgements by recipients of money, receipts for suppliers of stationery, activity reports for the technical supervision from the CAO and this was evidenced with responses availed by the Internal Audit and Finance Departments dated the 16th &amp; 21st March and 23rd May 2017.</li> </ul>
Assessment area: Governance, oversight, transparency and accountability				

10	<p>The LG committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3</li> </ul>	3	<p>From the committee minutes, it was established that a committee sat and discussed service delivery issues for example during a committee meeting that sat on 28/02/2017, under MIN.03/TechSVS/02/2017 water sector report for quarter II FY 2016/17 was presented by the DWO for discussion.</p>
		<ul style="list-style-type: none"> <li>Evidence that the water sector committee has presented issues that require approval to Council: score 3</li> </ul>	0	<ul style="list-style-type: none"> <li>There were no specific water related recommendations to council for approval.</li> </ul>
11	<p>The LG Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <li>The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2</li> </ul>	0	<p>At the time of the assessment there was only display of release of the different grants including Water and Sanitation. But the annual work plan, budget and expenditures were not displayed.</p>
		<ul style="list-style-type: none"> <li>All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2</li> </ul>	2	<p>Visited facilities included those for last financial year 2016/17.</p> <ol style="list-style-type: none"> <li>Giumusi tapstand which was rehabilitated in Bumasifwa s/c</li> <li>Zebusiro tapstand completed on 8/05/2017 in Bumasifwa s/c</li> <li>A borehole DWD 52708 in Bulukyeka village, Bukhulo s/c</li> </ol> <p>These water facilities were labelled though there is need for their visibility to be improved.</p>
		<ul style="list-style-type: none"> <li>Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2</li> </ul>	0	<p>There was no information on tenders and contract awards displayed on notice boards.</p>



12	Participation of communities in WSS programmes	<ul style="list-style-type: none"> <li>• If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1</li> </ul>	0	At the time of the assessment, there was no evidence of application letters from the communities and not even Community Contribution
	Maximum 3 points for this performance measure	<ul style="list-style-type: none"> <li>• Number of water supply facilities with WSCs that are functioning evidenced by collection of O&amp;M funds and carrying out preventive maintenance and minor repairs, for the current FY: score 2</li> </ul>	0	At the time of the assessment, there was no evidence of collection of O&M funds and preventive maintenance being carried out. .

Assessment area: Social and environmental safeguards

13	The LG Water department has devised strategies for environmental conservation and management	<ul style="list-style-type: none"> <li>• Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2</li> </ul>	0	At the time of the assessment there was no Environmental Screening undertaken for any project. But the District has planned to carry out an ESIA for planned water Project. It is questionable on how the district could plan for an ESIA without the project undergoing screening.
	Maximum 4 points for this performance measure	<ul style="list-style-type: none"> <li>• Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1</li> </ul>	0	Though there were some reports prepared for selected water projects, the mitigation plans in the reports were not signed by the officer who prepared them and yet they were approved by the District Environment Officer so they did not seem authentic.  At the time of the assessment, there was no evidence of follow up support provided.

		<ul style="list-style-type: none"> <li>• Evidence that construction and supervision contracts have clause on environmental protection: score 1</li> </ul>	0	<p>1. There is a clause in the BOQ allowing for Environmental Protection as per Environmental Officers Instructions amounting to UGX 300,000/= in the Contract For Extension of 2000m pipe line construction of 2 new tapstands and Rehabilitation of 5 old tapstands in Bumafwa. Ref Siro 552/WRKS/17-18 /00056 dated 19th December awarded to M/S Nalu International Company Limited of Box Mbale.</p> <p>2. Contract on Construction of Bunyafwa GFS 3,000 meters pipeline and construction of four tapstands and install GI Pipes one to HDPE reservoir tank in Buwasa Health Centre IV in Buwasa s/c at a cost of UGX 23,875,530/= Ref Siro 552/WRKS/16-17/00037 . There is a clause in the BOQ allowing for Environmental Protection as per Environmental Officers Instructions amounting to UGX 300,000/= in the Contract</p> <p>3. The Contract for Construction of 3 stance drainable pit latrine with urinal in Kibanda Market in Nalusala Parish, Nalusala s/c at accost of UGX 15,470,770. Ref Siro 552/WRKS/17-18/00061 dated 19th December 2017. This contract is to be executed by M/S Nalome Works Enterprises Limited of Box Mbale does not have any information on Environment Protection and Management</p> <p>Much as contracts 1 and 2 above have BOQs on environment, the basis of the costing is not clear. There was no additional information in the contract to substantiate the BOQs.</p>
14	<p>The LG Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• If at least 50% WSCs are women as per the sector critical requirements: score 3</li> </ul>	0	<p>From the 4th quarter software report embedded in the 4th Quarter Progress Report FY 2016/17 dated 12th July 2017 signed by CAO Mr. Lukwago Anthony Martin, of the 22 WUC for new water sources, only 6 have at least 50% representation of women.</p>

15	<p>Gender- and special-needs sensitive sanitation facilities in public places/RGCs.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"><li>• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3</li></ul>	0	<p>At the time of the assessment, latrine construction was not yet complete.</p>
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