



LGPA 2017/18

Accountability Requirements

Yumbe District

(Vote Code: 556)

Assessment	Compliant	%
Yes	3	50%
No	3	50%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Assessment area: Annual performance contract			
<p>LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.</p>	xxx	<p>Yumbe district LG submitted the final performance contract (Form B) for FY 2017/18 to MOFPED on 31st July, 2017 contrary to the submission standard of 30th June, 2017</p>	No
Assessment area: Supporting Documents for the Budget required as per the PFMA are submitted and available			
<p>LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).</p>	xxxxx	<p>The annual Performance Contract for FY2017/18 had a procurement plan for FY2017/18 attached as required by LG PPDA Regulations , 2006</p>	Yes
Assessment area: Reporting: submission of annual and quarterly budget performance reports			
<p>LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)</p>	xxxxx	<p>The official record of LG submission of annual performance report FY2016/17 to MoFPED show submission was done on 23rd August, 2017, which is also matching with the records at the Moyo district planning unit, contrary to the deadline of 31st July 2017 as per LG budget preparation guidelines.</p>	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>All the 4 quarterly performance contract reports for FY2016/17 were submitted to MoFPED on the dates indicated below</p> <ul style="list-style-type: none"> • Quarter 4 performance contract report submitted on 23th/8/2017 by Guma Victor Ag. Planner • Quarter 3 performance contract report submitted on 23/6/2017, by Guma Victor Ag. Planner • Quarter 2 performance contract report submitted on 28th/2/2017 by Guma Victor the Ag Planner • Quarter 1 performance contract report submitted on 11/11/2016 by Guma Victor Ag. Planner 	<p>Yes</p>
<p>Assessment area: Audit</p>			
<p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous financial year by April 30 (PFMA s. 11 2g). This statement includes actions against all findings where the Auditor General recommended the Accounting Officer to take action (PFMA Act 2015; Local Governments Financial and Accounting Regulations 2007; The Local Governments Act, Cap 243).</p>	<p>xxxxx</p>	<p>No evidence with respect to information submitted to the PS/ST on the implementation status of FY 2015/16 Internal Auditor General findings was seen.</p>	<p>No</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer</p>	<p>xxxxx</p>	<p>The district had an unqualified opinion on its FY 2016/17 report with an emphasis of matter on 5 issues: • Utilization of Medicines and Health Supplies • Unaccounted for medicines and health commodities • Stock-outs • Understaffing • Low recovery rate of Youth Livelihood project funds</p>	<p>Yes</p>



LGPA 2017/18

Crosscutting Performance Measures

Yumbe District

(Vote Code: 556)

Score 45/100 (45%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>All new infrastructure projects in: (i) a municipality; and (ii) all Town Councils in a District are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a municipality/district has:</p> <ul style="list-style-type: none"> • A functional Physical Planning Committee in place that considers new investments on time: score 2. <hr/> <ul style="list-style-type: none"> • All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2. 	<p>0</p> <hr/> <p>0</p>	<p>Yumbe district does not have a functional Physical Planning Committee</p> <hr/> <p>There was no evidence that new infrastructure investments in Yumbe district do have approved plans that are consistent with the physical plans.</p>
2	<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</p>	<ul style="list-style-type: none"> • Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2. 	<p>0</p>	<p>There was no evidence in form of a minute of the budget conference held so as to confirm that the priorities in AWP for FY2017/18 were based on the outcome of the budget conference.</p>

		<ul style="list-style-type: none"> • Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If different, justification has to be provided and evidence that it was approved by Council. Score 2. 	2	<p>There was consistency interms of capital investments planned in the FY2017/18 AWP plan and DDP11 for FY2017/18 as evicendced by the capital investments in both documents like.</p> <p>Education AWP page 15 has projects like:</p> <ul style="list-style-type: none"> • Construction of 2 teachers houses in USE • 25 stances of latrine constructed • 4 classrooms rehabilitated in UPE • 3 classrooms constructed in UPE <p>In the DDP11 Pg 150-151, it has</p> <ul style="list-style-type: none"> • Construction of classrooms in selected schools • Renovation of schools with dilapidated infrastructure • Construction of 5 stance latrines in selected schools • Construction of teachers houses in selected schools
		<ul style="list-style-type: none"> • Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1. 	1	<p>There was evidence that project profiles were developed and discussed by TPC at the time of developing the 5 years District Development Plan 2. Chapter 7, pages 109-141 of the approved DDP11 has a consolidated list of sectoral project profiles for all investments in the AWP as per LG planning guidelines.</p>
3	<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> • Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum 1 point. 	0	<p>There was no evidence that Yumbe district compiled an annual Statistical abstract with gender disaggregated data to guide budget allocation and decision making.</p>

4

Investment activities in the previous FY were implemented as per AWP.

Maximum 6 points on this performance measure.

• Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2

2

There was evidence that all Infrastructure projects implemented derived from FY2016/17 AWP as shown

- Health planned construction of one maternity ward on page 17 of the AWP and reported done in the annual performance report as achieved on page 15.
- Planned to construct 2 OPD and wards in Kululu and Lodonga sub counties in the AWP page17, and achieved on page 15 of the annual performance report
- Education construction of 2 classrooms in UPE pg 19 of AWP, achieved on page 17 of the annual performance report
- Construction of 20 stances of latrines on page 19 and achieved in page 17 of the annual performance report
- Water planned to drill 23 deep boreholes (hand pump and motorised) in various locations Pg 19 of the AWP and cumulative annual performance report on Pg 148 indicate 22 drilled and functional
- Construction of 1 VIP latrine in Odujo RGCs Pg 19 of AWP and reported done in Pg 146 of APR
- 20 Borehole holes drilled on pg 19 of AWP and reported done on Pg 146 of APR.

• 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

There was evidence that investment projects implemented in FY2016/17 were completed as per the work plan as shown below- Health

- Planned to construct output of Maternity Ward Construction and rehabilitation at Yumbe HC111 a budget of 18m and spent 18m (100%) page 121 of the annual performance report

- Output on Staff houses construction and rehabilitation at Moli HC11 in Odravu sub county planned 60m and all spent (100%) page 121 of the APR

- Output on OPD and other ward construction and rehabilitation, at Nyori HC11 and Yoyo HC111 at 106m, but spent 103,012,000 (97.2%) page 121 of APR.

Education

- Output on Classroom construction and rehabilitation in 2 classrooms in Kulikulinga P/s Odravu SC, at 75m but spent 59,949,000 (79.9%) page 127 of the APR

- Output on Provision of furniture to 13 primary schools in the district, at 53,640,000, but spent 53,949,000 (100.6%) pg 128.

5	<p>The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects and assets during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2 	0	<p>There was evidence that not all investment projects in FY2017/18 were completed within approved budget as shown by the few sampled investment projects below.</p> <ul style="list-style-type: none"> Output of classroom construction and rehabilitation in USE- Planned to construct 6 classrooms in Barakala seed SS (2), Kuru SS (2) and Kei Seed SS (2) at a cost of 332,201,000 and spent 392,522,000 (118.2%) page 129 of APR Under Bridge construction- Morta Bridge Phase 111, planned 475,000,000 but spent 999,157,000 (210.3%) Pg 137 Output on district roads maintenance planned 7,800,000 but spent 2,702,000 (34.6%) pg 171 of APR Output on Classroom construction and rehabilitation in 2 classrooms in Kulikulinga P/s Odravu SC, at 75m but spent 59,949,000 (79.9%) page 127 of the APR
		<ul style="list-style-type: none"> Evidence that the LG has budgeted and spent at least 80% of O&M budget for infrastructure in the previous FY: score 2 	0	<ul style="list-style-type: none"> There is no evidence of the LG budgeting for O&M either in roads, water, education etc for infrastructure projects in FY2016/17.

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"> Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2 	2	<ul style="list-style-type: none"> All heads of Departments and keys section heads, namely Internal audit, HRM, Planning unit, and Procurement have filled performance contracts and have accordingly been appraised as per the guidelines of Mo PS (CIRCULAR STANDING INSTRUCTION NO1 OF 2016)
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		<ul style="list-style-type: none"> • Evidence that the LG has filled all HoDs positions substantively: score 3 	0	<ul style="list-style-type: none"> • 5 Departments don't have substantive heads, ie The post of Deputy CAO is yet filled by MoPS. For the posts of District Engineer, District production coordinator, District planner and District Education officer are not filled substantively. • However there is evidence that they have advertised but failed to attract suitable candidates to fill the positions substantively, as evidenced by CAO,s recruitment request ref.no.CR/115/02/01, Cleared by MoPS
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"> • Evidence that 100 percent of staff submitted for recruitment have been considered: score 2 	2	<ul style="list-style-type: none"> • Reference made to DSC minute no. DSC/153/301/9,in respect of CAO's submissions, all positions submitted for recruitment have been considered
		<ul style="list-style-type: none"> • Evidence that 100 percent of staff submitted for confirmation have been considered: score 1 	1	<ul style="list-style-type: none"> • Reference made to DSC Minute no.DSC/153/301/10,in comparison with CAO'S submission CR/157 dated 2/8/2016, all staff submitted for confirmation have been considered
		<ul style="list-style-type: none"> • Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1 	1	<ul style="list-style-type: none"> • Reference made to DSC minute .DSC/153/301/8,and CAO's submission CR/157 dated 2/8/2016 all disciplinary cases submitted to the DSC have been considered
8	<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3 	0	<ul style="list-style-type: none"> • Not all staff recruited in previous financial year had accessed the pay roll with in two month as evidenced in the IPPS and the DSC extract DSC/153/301/9
		<ul style="list-style-type: none"> • Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2 	0	<ul style="list-style-type: none"> No pensioner had accessed pensioner's pay roll with in two month, according to the pensioner's soft ware payroll

Assessment area: Revenue Mobilization

9	<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • If increase in OSR from previous FY but one to previous FY is more than 10% : score 4 points • If the increase is from 5 -10% : score 2 point • If the increase is less than 5% : score 0 points. 	4	<p>Local revenue for FY 2015/16 was Shs 185,425,575. Local revenue for FY 2016/17 was Shs 284,962,615. The increase was 53.7%, even though a portion of this increase was from disposal of assets.</p>
10	<p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10% : then 2 points. If more than +/- 10% : zero points. 	0	<p>Local revenue budget for FY 2016/17 was Shs 583,993,000. The amount realised in the same year was Shs 284,962,615. This was 51.2% below what was planned / budgeted.</p>
11	<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2 • Evidence that the LG is not using more than 20% of OSR on council activities: score 2 	0	<p>Some evidence of remittances of local revenue to and from LLGs was seen, but it was very irregular. For the period July 2016 to date, we could only manage to see two payments by the District to Yumbe Town Council; one of Shs 25,505,000 on 02/12/17 and another of Shs 17,225,000 on 06/11/17. Sub counties do not remit 35% of their collections to the district.</p> <p>For FY 2016/17, Council expenditures on which local revenue is spend were highlighted as: Travel inland (Shs 4,142,000+4,083,300+1,150,000+45,741,800), fuel (Shs 19,084,300) and maintenance of Chairman's vehicle (Shs 916,250) totalling Shs 75,117,650. Compared with the local revenue realised in FY 2015/16 i.e Shs 185,425,575, this is 40.5%, which is > 20%.</p>

Assessment area: Procurement and contract management

12

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

Maximum 4 points on this performance measure.

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

2

District Service Commission (DSC) Minute No. 1204/2017 and Signed Performance Contracts for a Senior Procurement Officer and Procurement Officer that were seen at Yumbe HRM Department confirmed that those two positions were substantively filled.

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

1

Preliminary Evaluation Forms and Reports of TEC that were Signed on 13/10/2016 and on 21/02/2017 by TEC Chairman, 2 Members and Secretary confirmed that TEC produced and submitted reports to the Contracts Committee for the previous FY. Examples of Projects with corresponding TEC Reports for the previous FY that were seen at the PDU in Referenced Procurement Files are listed below:

- Construction of 2 Classroom Block at Barakala SS (YUMB 556/WRKS/16-17/00008).
- Construction of 5 Stance VIP Latrine at Omba P/S (YUMB 556/WRKS/16-17/00024).
- Construction of 2 Stance VIP Latrine at Kuru S/C (YUMB 556/WRKS/16-17/00047).
- Construction of Maternity Ward at Okuyu HC III (YUMB 556/WRKS/16-17/00058).
- Fencing of Lokpe HC II in Kochi S/C (YUMB 556/WRKS/16-17/00017).
- Drilling of 13 Boreholes (Lot I) (YUMB 556/WRKS/16-17/00002).
- Drilling of 13 Boreholes (Lot III) (YUMB 556/WRKS/16-17/00004).
- Construction of 5 Stance VIP Latrine at Nyori P/S (YUMB 556/WRKS/16-17/00033).
- Construction of 2 Classroom Block at Kuru SS (YUMB 556/WRKS/16-17/00007).
- Construction of 2 Science Rooms at Kei SS (YUMB 556/WRKS/16-17/00061).

		<ul style="list-style-type: none"> • Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1 	1	<p>Reports of Yumbe District Contracts Committee that were Signed on 25/10/2016 and on 24/02/2017 by DCC Chairman, 2 Members and Secretary confirmed that DCC considered recommendations of the TEC and provided justifications for any deviations from those recommendations for the previous FY. Examples of Projects with corresponding DCC Reports for the previous FY that were seen at the PDU in Referenced Procurement Files are listed below:</p> <ul style="list-style-type: none"> - Construction of 2 Classroom Block at Barakala SS (YUMB 556/WRKS/16-17/00008). - Construction of 5 Stance VIP Latrine at Omba P/S (YUMB 556/WRKS/16-17/00024). - Construction of 2 Stance VIP Latrine at Kuru S/C (YUMB 556/WRKS/16-17/00047). - Construction of Maternity Ward at Okuyu HC III (YUMB 556/WRKS/16-17/00058). - Fencing of Lokpe HC II in Kochi S/C (YUMB 556/WRKS/16-17/00017). - Drilling of 13 Boreholes (Lot I) (YUMB 556/WRKS/16-17/00002). - Drilling of 13 Boreholes (Lot III) (YUMB 556/WRKS/16-17/00004). - Construction of 5 Stance VIP Latrine at Nyori P/S (YUMB 556/WRKS/16-17/00033). - Construction of 2 Classroom Block at Kuru SS (YUMB 556/WRKS/16-17/00007). - Construction of 2 Science Rooms at Kei SS (YUMB 556/WRKS/16-17/00061).
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</p>			<p>a) There was Evidence that the procurement and Disposal Plan for the current year covered all infrastructure projects in the approved annual work plan and budget as exemplified by the following procurements that were indicated both in the Procurement Plan and in the approved annual work plan and budget for the current FY:</p> <ul style="list-style-type: none"> - Construction of OPD at Yumbe HC IV (YUMB 556/wrks/17-18/00038) was indicated in Planned Outputs for 2017/18 FY under Health (Page 14 of AWP and Budget for

<p>on this performance measure.</p>	<p>• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2</p>	<p>2017/18 FY).</p> <ul style="list-style-type: none"> -Construction of Administrative Block at Aringa SS was indicated in Planned Outputs for 2017/18 FY (Page 16 of AWP and Budget for 2017/18 FY). -Construction of Concrete Bridge at Oya (YUMB 556/wrks/17-18/00037) was indicated in Planned Outputs for 2017/18 FY (Page 17 of AWP and Budget for 2017/18 FY). - Construction of Kerwa Resource Center at Kerwa S/C (YUMB 556/wrks/17-18/00039) occurred in the Consolidated Procurement Plan of the AWP and Budget for 2017/18 FY). <p>b) A Procurement Plan for previous FY was seen in PDU and was Stamped and Dated 27/07/2016 and was Signed by Head PDU and was also Signed by Accounting Officer. There was evidence that the LG made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY as exemplified by the following procurements that occurred both in the Procurement Plan and in Referenced Procurement Files for the previous FY:</p> <ul style="list-style-type: none"> - Construction of 2 Classroom Block at Barakala SS (YUMB 556/WRKS/16-17/00008). - Construction of 5 Stance VIP Latrine at Omba P/S (YUMB 556/WRKS/16-17/00024). - Construction of Maternity Ward at Okuyu HC III (YUMB 556/WRKS/16-17/00058). - Fencing of Lokpe HC II in Kochi S/C (YUMB 556/WRKS/16-17/00017). - Drilling of 13 Boreholes (Lot I) (YUMB 556/WRKS/16-17/00002). - Drilling of 13 Boreholes (Lot III) (YUMB 556/WRKS/16-17/00004). - Construction of 5 Stance VIP Latrine at Nyori P/S (YUMB 556/WRKS/16-17/00033). - Construction of 2 Classroom Block at Kuru SS (YUMB 556/WRKS/16-17/00007).
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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

For current FY, there is NO evidence that the LG prepared 80% of the bid documents for all investment/infrastructure by August 30. What ACTUALLY happened is that the Bid Document for Procurement of ALL Works for FY 2017/18 was issued on 4/09/2017 on the same day that an Advert was placed in New Vision Newspaper of 4th September 2017 inviting potential bidders to submit their bids for the works. The closing date for acceptance of bids was 22nd September 2017. TEC Meetings took place on 4th, 5th and 6th October 2017 to evaluate the submitted bids. District Contracts Committee Meeting took place on 12th October 2017 to consider and approve recommendations of TEC. Some of the projects that were approved by DCC on 12/10/2017 are indicated below:

- Construction of OPD at Yumbe HC IV (YUMB 556/wrks/17-18/00038).

- Construction of Concrete Bridge at Oya (YUMB 556/wrks/17-18/00037).

- Construction of Kerwa Resource Center at Kerwa S/C (YUMB 556/wrks/17-18/00039).

- Construction of Administrative Block at Aringa SS.

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

2

An updated contracts register with a start date of 14/02/2012 and an end date of 30/08/2017 was seen at the PDU. Referenced completed procurement activity files for all procurements were also seen at the PDU.

- For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.

2

All projects for FYs 2016/17 and 2017/18 were contracted via the Open Bidding Method. An Advert was placed in New Vision Newspaper of 8th September 2016 for all projects contracted in 2016/2017 FY. An Advert was placed in New Vision Newspaper of 4th September 2017 for all projects contracted in 2017/2018 FY.

15	<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2 	2	<p>There was Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision as exemplified by the following projects:</p> <ul style="list-style-type: none"> - Drilling and Installation of 10 Boreholes Lot II. Practical Completion Payment Certificate No. 1 Signed by DWO on 12/06/2017. Signed by CAO on 12/06/2017. Signed by Chief Internal Auditor on 13/06/2017. Sanctioned by Head of Finance on 13/06/2017. - Rehabilitation of 10 Boreholes Lot II. Completion Payment Certificate Signed by DWO on 16/01/2017. Signed by CAO on 16/01/2017. Signed by Chief Internal Auditor on 18/05/2017. Signed by Head of Finance on 18/05/2017. - Construction of Mortar Concrete Deck Bridge in Yumbe District (YUMB 556/Wrks/11-12/00077) Signed by District Engineer on 05/06/2017. Signed by Head Internal Audit on 14/06/2017. Signed by Head Finance on 14/06/2017. Signed by CAO on 14/06/2017.
		<ul style="list-style-type: none"> Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2 	2	<p>There was Evidence that all works projects for the current FY were clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration as exemplified by Signage that was observed on the following projects during a field visit conducted by the Assessor on 20/01/2018:</p> <ul style="list-style-type: none"> - Construction of 3 Classroom Block at Limidia Primary School. Client: Yumbe District Local Government P.O. Box 1 Yumbe. - Construction of Operating Theater at Yumbe Health Center IV. Client: Yumbe District Local Government P.O. Box 1 Yumbe. - 5 Stance VIP Latrine Constructed at Yumbe Health Center III under DDEG FY 2016/17.
Assessment area: Financial management				

16	<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4 	0	<p>The district has 17 bank accounts, including the Treasury Single Account (TSA). As of the date of review, the TSA was reconciled to 28/12/17, the General Fund Account to 27/12/17. The rest of the accounts were not up to date, some as far back as June 2017 and some have not been reconciled for a long time.</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"> 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. 	0	<p>The payments reviewed revealed that even though on average the district makes timely payment of its suppliers, there were still instances where payments get delayed beyond 2 months. Examples include: Payment to Shell Station Yumbe, invoice dated 27/11/17 and payment on 05/12/17 (8 days). Payment of Shs 88,582,300 to Homeway Traders Ltd for construction of a staff house at Mengo Primary School. Invoicing was on 16/11/17, certification on 22/11/17 and payment on 05/12/17 (20 days). Payment of Shs 179,668,664 to Achoru United Traders Ltd for construction of an operating theatre at Yumbe HC IV. Invoicing was on 20/11/17, certification on 22/11/17 and payment on 05/12/17 (15 days). Payment of Shs 19,215,096 to Banda Agencies for construction of a staff house at Moli HC II. Requisition dated 05/10/16, certificate on 31/10/16 and payment on 28/12/16 (80 days). Average: 31 days.</p>
18	<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3. 	3	<p>The district has a substantively appointed Principal Internal Auditor in the names of Drabe Ismail Idris, per appointment letter dated 15/01/2009 written by the CAO (Ref. CR/156/2). The internal audit department has produced reports for Q1 (dated 10/10/16), Q2 (dated 28/03/17), Q3 (10/05/17) and Q4 (dated 10/09/17).</p>
		<ul style="list-style-type: none"> Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries: score 2. 	0	<p>No evidence with respect to information to the Council and LG PAC on the implementation status of internal auditor findings for FY 2016/17 was seen.</p>

		<ul style="list-style-type: none"> • Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1 	0	Internal audit reports for the four quarters of FY 2016/17 were seen and for one quarter, evidence of submission to the CAO was seen. However, for other quarters, no evidence was seen, nor did we see evidence of submission of reports to LG PAC or their review in the committee.
19	<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4 	0	The district has an assets list in electronic form (excel) with tabs for things like machinery, land, electronic equipment etc. In some of the tabs, the assets are listed differently from the format recommended in the Finance Manual. Some of tabs such as buildings are totally empty. In conclusion we can say the district has not assets register. It just has an incomplete list of assets.
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"> • unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0 	4	The district had an unqualified report with an emphasis of matter on 5 issues: <ul style="list-style-type: none"> • Utilization of Medicines and Health Supplies • Unaccounted for medicines and health commodities • Stock-outs • Understaffing • Low recovery rate of Youth Livelihood project funds
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	<ul style="list-style-type: none"> • In the 7th session of the 5th council meeting held on 30/05/2017 in the council hall, service delivery related issues such as approval of annual budget estimates for FY2017/18 and sector committees recommendations were discussed. • In the 6th session of the 5th Council meeting held on 20th April, 2017 in the council hall, issues among others discussed included District state of affairs address by district chairperson, laying of the annual budget estimates for FY 2017/18, approval of supplementary budget for FY2016/17 under Education, health and community based services, presentation and approval of the district client chart and framework of good governance and anti-corruption.

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"> Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 2. 	0	<ul style="list-style-type: none"> No person designated to coordinate responses to feedback and respond to feedback.
23	<p>The LG shares information with citizens (Transparency)</p>	<p>Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2</p>	0	<ul style="list-style-type: none"> There was no evidence of LG Payroll and pensioner schedule published on public notice boards
	<p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> Evidence that the procurement plan and awarded contracts and amounts are published: score 1 	0	<ul style="list-style-type: none"> There was no evidence of procurement plan and awarded contracts and amounts published on public notice boards
		<ul style="list-style-type: none"> 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. 	0	<p>Not applicable since there was no LG performance assessment done in FY2016/2017</p>
24	<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p>	<ul style="list-style-type: none"> Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1 	0	<p>There was no evidence of HLG communicating and explaining guidelines, circulars and policies issues by the national level to LLGs during FY2016/17</p>
	<p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc..) with the public to provide feed-back on status of activity implementation: score 1. 	0	<p>There was no evidence of Yumbe LG conducting fora, barazas with the public to provide feedback on status of activity implementation</p>

Assessment area: Social and environmental safeguards

<p>25</p>	<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2. 	<p>2</p>	<p>There was Evidence that the LG gender focal person provided guidance and support to sector departments to mainstream gender into their activities as exemplified by the following:</p> <ul style="list-style-type: none"> - The Assessor saw Yumbe DLG Gender Matrix Analysis for FY 2016/2017 that was Prepared and Signed by LG Gender Focal Person on 15/05/2016. Verified and Signed by DCDO on 15/05/2016. Approved and Signed by CAO on 15/05/2016. - The Assessor saw Behavioral Change Communication/IEC Activities 4th Quarterly Activity Report Prepared and Signed by SCDO Yumbe in Quarter 4 2016. Activity No. GBV04DLG. Project ID: UGA07GBV. - The Assessor saw Sub county SGBV Quarterly Alliance Review Meeting Report Prepared and Signed by SCDO Yumbe. Q 4 2016. UGA07GBV. - The Assessor saw a Report on Training of Duty Bearers and Political Leaders on Relevant Laws and Policies on GBV. The Report was Prepared and Signed by SCDO Yumbe. UGA7U505. July - September 2016. Activity: GBVRRPYUMBDLG04. Sub activity 5.1.5.
		<ul style="list-style-type: none"> • 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. 	<p>0</p>	<ul style="list-style-type: none"> - There was NO Evidence that gender focal point had planned activities for current FY to strengthen women's roles since there was NO Allocation made for Gender Activities from Local Revenue for FY 2017/2018. - There was NO Evidence that more than 90% of previous year's budget for gender activities was implemented since there was NO Allocation made for Gender Activities from Local Revenue for FY 2016/2017.

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>• 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</p>	2	<p>There was Evidence that environmental screening or EIA where appropriate, was carried out for activities, projects and plans and mitigation measures were planned and budgeted for as exemplified by the following:</p> <ul style="list-style-type: none"> - Screening of all projects implemented in FY 2017/18 was done and a Letter to this effect was sent to CAO on 18/09/2017. The Letter was Written and Signed by District Environmental Officer. - The Assessor saw an Environmental and Social Management Plan for projects implemented in FY 2016/2017 covering the Period July 1st 2016 to June 30th 2017. The Environmental and Social Management Plan was Prepared by District Environmental Officer.
		<p>• Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1</p>	1	<p>There was Evidence that the LG integrates environmental and social management plans in the contract bid documents as exemplified by the following:</p> <ul style="list-style-type: none"> - 5 Stance VIP Latrine with Shower at Omba P/S. FY 2016/2017. Engineering Department. 22/08/2016. Environmental Mitigation: Tree Planting with Teak, Neem and Gmelina. Back filling of Quarry Sites and Borrow Pits. Grass Planting around exposed area. Provide Drainage Provision. Clearing Debris remaining at Site. The Environmental Mitigation Plan was contained in Contract Agreement that was Signed by Contractor and Referenced CR/105/9 and Dated 02 January 2017. - Drilling 10 Boreholes Lot II. Environmental Mitigation Plan found on Page 15 of the Contract Agreement in the BOQ Section: Clearing Site and Environmental Restoration. Tree Planting within Catchment Area. 20 Timber Tree Seedlings. 5 Fruit Tree Seedlings. Costed at 300,000/=. Contract Agreement was Signed by CAO on 2nd January 2017. Signed by DWO on 2nd January 2017. Also Signed by Contractor. - Construction of Classroom Block at Kuru SS. Environmental Mitigation: Signed by CAO on 21/02/2017. Signed by District Engineer on 21/02/2017. Signed by Contractor on 21/02/2017.

		<p>- Construction of 2 Classroom Block at Lodenya P/S. Environmental Mitigation: Signed by CAO on 03/January/2017. Signed by SAS on 03/January/2017. Signed by Contractor on 03/January/2017.</p> <p>- Construction of 2 Science Rooms at Kei SS (Yumb 556/Works/16-17/00061). Environmental Mitigation: Plant Tree Seedlings as Works get Started as Directed by the Forest Officer. Signed by CAO on 10/April/2017. Signed by Headteacher Kei SS on 10/April/2017. Signed by Contractor on 10/April/2017.</p> <p>- Construction of OPD at Okuyu HC. Environmental Mitigation: Signed by CAO on 18/03/2017. Signed by District Engineer on 10/03/2017. Signed by Contractor on 10/03/2017.</p> <p>- Construction of 2 Classroom Block at Kulikulinga P/S. Environmental Mitigation: Signed by CAO on 02/January/2017. Signed by District Engineer on 02/January/2017. Signed by Contractor on 02/January/2017.</p>
<p>• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1</p>	<p>0</p>	<p>There was NO Evidence that all projects were implemented on land where the LG had proof of ownership by way of a land title or agreement with land owners as exemplified by the following:</p> <p>- None of the projects sampled had a copy of a land title or a land agreement on their Procurement Files that were appropriately and adequately referenced.</p> <p>- LG projects had issues with land where original land owners (religious institutions and traditional heirs) were claiming back their land.</p>

		<ul style="list-style-type: none">• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2	0	<p>There was NO Evidence that all completed projects had Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer as exemplified by the following:</p> <ul style="list-style-type: none">- None of the projects sampled had a copy of an Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer on their Procurement Files that were appropriately and adequately referenced.
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LGPA 2017/18

Educational Performance Measures

Yumbe District

(Vote Code: 556)

Score 80/100 (80%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Human Resource Management				
1	<p>The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4 Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4 	4	<p>Vote 556 Yumbe district OBT FY 17/18 has a wage bill provision of UGX 9,670,405,160 for 1,560 qualified Hed teachers and teachers in 123 government aided primary schools. The total covers Head teachers and regular teachers.</p> <p>The Education Department has a school staff list deployment schedule for 1,537 (both Head teachers and Teachers) as per "Report on Teachers Data Update per school, 2017" on File in the DEO's Office</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"> 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 	6	<p>Yumbe district vote 556 OBT budget provision for FY17/18 with a wage bill of UGX 9,670,405,160 caters for the entire 123 government aided primary schools staffed by 1,560 teachers (100%) and having a minimum staffing level in the structure of a Head teacher and minimum 7 Teachers</p>

3	<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6 	0	<p>The Staff Recruitment Plan FY2017-18, the district structure has 3 positions and only two positions (Ref: CR/156/2 and Ref: CR/156/2) have been filled.</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>There is a department recruitment plan that covers both the Primary Teachers and School Inspectors on file and sent to HRM department as per recruitment plan Ref: Staff Recruitment Plan FY2017/18.</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>There is a department recruitment plan that covers both the Primary Teachers and School Inspectors on file and sent to HRM department as per recruitment plan Ref: Staff Recruitment Plan FY2017/18.</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>Both school inspectors of schools were appraised during the FY16/17.</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>	3	<p>All the 124 Head teachers were appraised and files were countersigned by the DEO.</p>

Assessment area: Monitoring and Inspection

6	<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p>			<p>The national level instructions communicated include:</p> <ul style="list-style-type: none"> -Circular No. 1/2017 officers in charge of districts/ municipalities at the MoES Headquarters, dated 18th January 2017 -Dressing Code for non-uniformed officers in the public service, Ref: CR/156/8 dated 21 June 2017 -Guidelines on school charges Oct 24th 2017 Ref: ADM/48/315/01, MoES -Training of Associate Assessors, MoES, DES/120/116 of June 1st 2016 -Teacher Support supervision in schools; MoES. Ref: ADM/203/255/01 June 30, 2017 -Operations of Unlicensed Schools Jan 16th 2017, Ref: DES/50/14 MoES
	<p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1 	1	
		<ul style="list-style-type: none"> • Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level, including on school feeding: score 2 	2	<p>Records exist of joint meetings with education officials on 28th February 2017 at the Council Hall</p>

7	<p>The LG Education Department has effectively inspected all private and public primary schools</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that all private and public primary schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> 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. 	10	<p>Majority (90%) of the primary schools have been inspected and all the 3 terms reports were seen:</p> <ul style="list-style-type: none"> -Term 1, 2016: Inspection Report on 139 (both private and public) Assessment of Teaching and Learning in PS in Yumbe district Term 1, June 9th 2016 -Term 2, 2016: Inspection Report about Assessment of Teaching and Learning in PS in Yumbe district Term 2, September 12th 2016 -Term 3, 2016: Inspection Report about 139 Educational Assessment of Teaching and Learning in PS in Yumbe district Term 3, 23rd December 2016
8	<p>LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4 	4	<p>The Education Department held meetings on:</p> <ul style="list-style-type: none"> -25th July 2017 – Education Staff Meeting – “Agenda 4 – Inspection and Assessment Reports” -4th October 2017 – Education Staff Meeting – “Agenda 4 (Term 2 Supervision and Inspection) -8th August 2016 – Education Staff Meeting – “Agenda 5 (I and II) Supervision and Inspection
		<ul style="list-style-type: none"> Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2 	0	<p>Two Inspection Reports were submitted and DES acknowledged receipt for 3rd Qtr and 4th Qtr (DES acknowledged receipt on 16th August 2016).</p> <p>There was no evidence of submissions of Quarters 1 and 2 reports to DES.</p>
		<ul style="list-style-type: none"> Evidence that the inspection recommendations are followed-up: score 4 	4	<p>There was Monitoring Report file 2016/17 at the Education Department which contains all the recommended actions arising from the schools inspections</p>

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"> • Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> o List of schools which are consistent with both EMIS reports and OBT: score 5 	5	<ul style="list-style-type: none"> • EMIS (2016) list of schools data stood at 123 schools • OBT list of schools data stood at 123 schools in FY2017/18
	Maximum 10 for this performance measure	<ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> • Enrolment data for all schools which is consistent with EMIS report and OBT: score 5 	5	<ul style="list-style-type: none"> • EMIS enrolment data stood at 90,000 in FY2017/18 • OBT enrolment data stood at 89,652 pupils in FY2017/18 and the additional EMIS figure is on account of private schools that also submit their enrollment data as per regulation.

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"> • 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 	0	There was no evidence of the education committee discussing service delivery issues. The recommendations to council on service deliver issues were in the file but the minute showing when the council met to come with the recommendations were not anywhere seen.
	Maximum 4 for this performance measure	<ul style="list-style-type: none"> • Evidence that the education sector committee has presented issues that requires approval to Council: score 2 	2	<p>In the recommendation of social services sector committee arising from the meetings held on 4/4/2017 and 18th/4/2017 :</p> <ul style="list-style-type: none"> • All Implementing partners in the education sector sign MoUs with the district to streamline standard issues in the sector • Unconditional grant for education department in the FY17/18 be increased from current UGX8 million to UGX20 million to enhance the performance of the sector.

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>The Education Department document titled and filed “SMC approval report – Analysis by sex 2017” shows all (100%) the 123 schools have approved SMCs with gender composition at a minimum of 2 females, dated 2nd November 2017.</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>The District display of non-wage for all schools was seen titled “Display of UPE Capitation Grants to Government Aided Primary Schools in the Financial Year 2016/2017”</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>The Education department prepared and submitted all investment items in the approved sector annual workplans and all were submitted before 30th April 2017 as per FY16/17 AWP as per:</p> <ul style="list-style-type: none"> -Renovation of 4 Classrooms in Lomorojo P/S valued at UGX110 Million -Construction of 5 stance VIP latrine at Geya P/S valued at UGX31 Million -Construction of 5 stance VIP latrine at Kulinga P/S valued at UGX23 Million -Construction of 5 stance VIP latrine at Amaguru P/S valued at UGX23 Million -Construction of 5 stance VIP latrine at Okuyo P/S valued at UGX31 Million

14	<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points 	3	<p>On average it was found that the Education department timely certifies and recommends for suppliers for payment. Examples include: Payment of Shs 176,315,125 to Arindua Investments Company with respect to construction of a science laboratory at Barakala secondary school. Certification was done on 06/12/17, invoicing on 29/11/17 and payment on 15/12/17 (16 days). Payment of Shs 54,828,824 to Orange International for construction of a 2 classroom block. Invoicing was on 22/11/17, certification on 23/11/17 and payment on 12/12/17 (20 days). Payment of Shs 88,582,300 to Homeway Traders Ltd for construction of a staff house at Mengo Primary School. Invoicing was on 16/11/17, certification on 22/11/17 and payment on 05/12/17 (20 days).</p>
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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"> Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by mid-July for consolidation: score 4 	0	<p>The annual performance report for FY2016/17 was submitted by Luriga Rasulu (Ag. DEO) to district planner for consolidation on 18/8/2017 contrary to the mid-July standard</p>
16	<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points o If all queries are not responded to score 0 	0	<p>Education Department had internal audit queries in FY 2016/17. For example, Quarter 3 report highlighted management challenges in primary schools (Page 6), lack of VIP latrines and hand washing facilities (Page 7). But effort was made to respond to some of the queries and some were cleared while a few remained unresolved.</p>

Assessment area: Social and environmental safeguards

17	<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> • 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 	2	<p>There was gender integration guidelines training on 1st February 2017 for all focal persons from all 123 schools</p>
		<ul style="list-style-type: none"> • Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2 	2	<p>There was a Girl Education Conference attended by school focal staff on June 14th 2016 at Boma Grounds on issues to do with girls, sanitation, and menstruation</p>
		<ul style="list-style-type: none"> • Evidence that the School Management Committee meet the guideline on gender composition: score 1 	1	<p>There was Education Department Document dated 2nd November 2017, titled “SMC approval report – analysis by sex 2017”, which shows a gender disaggregated data of the 123 SMCs of 1,092 Males; 369 Females; and total SMC members of 1,461 thereby generating 25% as females</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"> • 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: 	3	<p>There was correspondence to schools on 6th February 2017 on Child friendly schools which covered ensuring 20 trees were planted at facility levels.</p>



LGPA 2017/18

Health Performance Measures

Yumbe District

(Vote Code: 556)

Score 69/100 (69%)

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>	3	<p>Approved structure FY2017/18 had a total of 626 health staffs while the current staffs on payroll are 419 giving 66%.</p>
2	<p>The LG Health department has submitted a comprehensive recruitment plan to the HRM department</p> <p>Maximum 4 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers: score 4</p>	4	<p>A copy of Recruitment plan was submitted to CAO/HR in FY 2017/2018 as seen at DHO/HRM with health workers positions attached dated 3rd July 2017.</p>
3	<p>The LG Health department has ensured that performance appraisal for health facility in charge is conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the health facility in-charge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0</p>	4	<p>Out of the 10 selected Appraisal personal files for health workers in charges, 7 were appraised and signed by all the supervisors (87.5%).</p>

4	<p>The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4 	4	<p>A copy of the updated staff lists (January 2018) matched with that of the budget framework FY 17/18 (OBT) as seen at the DHOs office</p>
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Assessment area: Monitoring and Supervision

5	<p>The DHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3 	3	<p>Copies of guidelines; Consolidated HIV 2016, Uganda Clinical Guidelines 2016 were seen at selected health Facilities.</p> <p>A copy of invitation letter for the in charges by the DHO dated 27/07/2017 for orientation on IPF 2017/18 guidelines seen at DHOs office.</p> <p>A copy of a letter to in charges by the DHO dated 6/3/2017 on MoPS circular on absenteeism dissemination was seen at DHO and other selected Health facilities</p>
		<ul style="list-style-type: none"> • Evidence that the DHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3 	0	<p>No meeting minutes/ reports for such specific meetings were availed at the DHOs office. Not even the meeting minutes for orienting the in-charges on IPF were availed at the DHOs office.</p>

6	The LG Health Department has effectively provided support supervision to district health services	Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3	3	Supervision reports/Monitoring reports of Health sector available at DHOs office dated 15/10/2016, 30/12/2016, 5/4/2017 showed that the HC IVs and Hospital were supervised but NOT on quarterly basis as recommended.
	Maximum 6 points for this performance measure	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	• Copies of Supervision reports seen from the DHOs office indicated that DHT only supervised HCIVs and Hospital which gives only 3 facilities out of 27. (11%).
7	The Health Sub-district(s) have effectively provided support supervision to lower level health units	Evidence that health facilities have been supervised by HSD and reports produced: • 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	2	No Supervision reports were availed at HSD In-charges office at Midigo HC IV. However, supervision books of lower facilities (Macho, and Apo HC IIs) (61%) which are supervised by Midigo HC IV had reports from the HSD supervisors in their Supervision log books.
8	The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up	• Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4	4	Health facilities supervision log books indicated recommendations generated by the supervising teams and actions to be taken. DHT supervision reports also indicated recommendations and action points generated by the team.
	Maximum 10 points for this performance measure	• Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6	6	DHT supervision reports showed actions points generated from previous visits having been implemented like the need to recruit some X-ray department staffs for Yumbe Hospital. Minutes of the DSC dated 27/12/17 for hiring these staffs was availed at DHOs office which resulted from the previous recommendation.

9	<p>The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> o List of health facilities which are consistent with both HMIS reports and OBT: score 10 	10	<ul style="list-style-type: none"> • A copy of the list of Health facilities at the DHOs office that were consistently submitting the HMIS to the DHO/MOH (30 Facilities) were the same as the list of health facilities in the OBT.
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Assessment area: Governance, oversight, transparency and accountability

10	<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2 	2	<ul style="list-style-type: none"> • There was evidence that the health committee discussed health related issues in a meeting held on 4th/4/2017 and 18th/4/2017, in which a number of recommendations to council were generated.
		<ul style="list-style-type: none"> • Evidence that the health sector committee has presented issues that require approval to Council: score 2 	2	<p>There was evidence of recommendations of social services committee to council arising from the meeting held on 4/4/2017 and 18/4/2017 which presented the following recommendation to council:</p> <ul style="list-style-type: none"> • 16 newly created health centre 3s named in the recommendation in the 5 zones of the district were to be approved by council for permanent construction according to MoH standards • Doctors top up allowances were set at one million shillings per month and were to be paid by UNHCR until repatriation of refugees from the district was done

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"> • If 100% of randomly sampled facilities: score 5 • If 80-99% : score 3 • If 70-79%: : score 1 • If less than 70%: score 0 	5	<p>Copies of HUMC meeting minutes were availed at all selected health facilities.(Midigo HC IV,Apo HC II, Mocha HC II,) 100%.</p> <p>Lists of HUMC members were also displayed.</p>
12	<p>The LG has publicised all health facilities receiving PHC non-wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • 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 	3	<ul style="list-style-type: none"> • Copies of PHC fund distribution list of health facilities were properly displayed on noticeboard of the DHO,

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>	<ul style="list-style-type: none"> • Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2 	0	<p>A Copy of procurement Plan request to DPU from DHOs office seen at DPU was availed but was dated 15/8/2017 and received on 4/09/2017</p>
	<p>Maximum 4 for this performance measure</p>	<p>Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2</p>	2	<p>A Copy of procurement request to DPU from DHOs office was availed at DPU dated 15/8/ 2017.</p>

14	<p>The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time: • 100% - score 8 • 70-99% – score 4 • Below 70% - score 0 	8	<p>A copy of budget allocations for all health facilities for FY 16/17 from NMS to CAO Yumbe was availed at DHOs office dated July 1st 2016.</p>
15	<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 2 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points 	2	<p>On average it was found that the Health department timely certifies and recommends for suppliers for payment. Examples include: Payment of Shs 140,747,057 to Kurere Yumbe Enterprises for construction of a maternity ward at Kerwa HC III. Invoicing was done on 22/11/17, certification on 29/11/17 and payment on 12/12/17 (20 days). Payment of Shs 179,668,664 to Achoru United Traders Ltd for construction of an operating theatre at Yumbe HC IV. Invoicing was on 20/11/17, certification on 22/11/17 and payment on 05/12/17 (15 days). Payment of Shs 19,215,096 to Banda Agencies for construction of a staff house at Moli HC II. Requisition dated 05/10/16, certificate on 31/10/16 and payment on 28/12/16 (80 days).</p>
Assessment area: Financial management and reporting				
16	<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4 	0	<ul style="list-style-type: none"> • The annual performance report for FY2016/17 was submitted by Dr. Yayi Alfred (DHO) to District Planner for consolidation on 18/8/2017 contrary to the Mid-July standard

17	<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0</p>	0	<p>Yumbe DLG Health Department had internal audit queries in FY 2016/17. For example, Quarter 1 report highlighted issues in accountability for advanced funds (Page 11), Quarter 2 report highlighted issues on unaccounted for funds, absence of activity reports and non verification of medical supplies (Page 24). But effort was made to respond to some of the queries and some were cleared while others remained unresolved</p>
Assessment area: Social and environmental safeguards				
18	<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<p>• Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2</p>	2	<p>Copies of HUMC members list displayed in selected health facilities met the gender composition of both female and males</p> <p>Copies of Guidelines on HUMC selection were also available in the selected health units</p>
		<p>• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2</p>	0	<p>NO Copies of sanitation management guidelines were seen at the selected health units and even at the DHOs office</p>
19	<p>The LG Health department has issued guidelines on medical waste management</p> <p>Maximum 2 points</p>	<p>• Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal : score 2 points.</p>	0	<p>No Copies of guidelines on medical waste management were seen in selected health facilities and even at the DHOs office</p>



LGPA 2017/18

Water & Environment Performance Measures

Yumbe District

(Vote Code: 556)

Score 36/100 (36%)

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				
1	<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: score 10 	10	<p>The local government water department annual work plan for the financial year 2017/2018 planned to implement drilling of 16 boreholes. The targeted sub counties are Lodonga with safe water coverage of 70%, Midigo 61%, Kuru 50%, Kochi 52%, Odravu 47%, Drajini 42%, Kei 40%, Kerwa 35%, and Ariwa 27% sub counties. The district safe water coverage is 47%, the evidence shows that they have allocated 16 boreholes to 9 sub counties out of 12 sub counties including sub counties with safe water coverage below the district coverage.</p>
2	<p>The LG Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15 	15	<p>According to the annual work plan financial year 2016/2017, water department budgeted to implement 23 deep boreholes. The evidence shows that the water department implemented 22 out of 23 planned water sources including sub counties with safe water coverage below the district average. 17 were successfully implemented, 1 was found to be having low yield, 4 were drilled but found to be dry and the last one was not implemented.</p>
Assessment area: Monitoring and Supervision				

3	<p>The LG Water department carries out monthly monitoring and supervision of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the LG Water department has monitored each of WSS facilities at least annually. • If more than 95% of the WSS facilities monitored: score 15 • 80 - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60 - 69% monitored: score 5 • 50 - 59%: score 3 • Less than 50% of WSS facilities monitored - score 0</p>	3	<p>The monthly monitoring and supervision of project records shows that the district water department carried out monitoring and supervision of each of WSS facilities at least once in the year fy 2016/2017.</p> <p>This is evidenced by 50% monitored water sources records of different sub counties as well as 20 deep borehole drilling and supervision reports.</p>
4	<p>The LG Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<p>• Evidence that the LG has submitted accurate/consistent data for the current FY: o List of water facility which are consistent in both sector MIS reports and OBT: score 10</p>	0	<p>During the review of data submitted and the updated MIS 2017, it was established that there is inconsistency of population published (568,925 people) compared to population data in the OBT (564,600 people), with the total water sources in the OBT totaling to 1387 compared to MIS totaling to 827 total sources.</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>	0	<p>The evidence shows that procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget were submitted on 28th July, this is beyond the time limit of April 30.</p>

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"> • 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 	0	<p>There was no evidence on record for appointment of a contract manager or that a contract management plan was prepared for monthly site visits for the different WSS infrastructure</p>
		<ul style="list-style-type: none"> • If water and sanitation facilities constructed as per design(s): score 2 	0	<p>The water department implemented deep boreholes and sanitation facilities. During the assessment period, there was evidence of sanitation designs but no evidence of drilled borehole surface designs with details of drainage channels, soak pit standards, and other areas of concern making it difficult to assess. The inspected sanitation site with the assistance of assistant district water officer at Odujo rural growth centre cattle market, VIP latrine was not labelled including the year of construction and looked to be an old structure. This was different from the designs shared by procurement unit and the construction progress pictures shared by the district water officer, Engineer Bernard. The pictures did not show the label and year of construction to be able to verify the site location despite looking a completed project.</p>
		<ul style="list-style-type: none"> • If contractor handed over all completed WSS facilities: score 2 	0	<p>During the period under assessment, there was an evidence of drilling report but no evidence of a contractor handing over all completed WSS facilities.</p>
		<ul style="list-style-type: none"> • If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2 	0	<p>Of the water and sanitation facilities implemented, there was an evidence of certifying payments for the completed work but no evidence of appropriately certified WSS projects, prepared and filed completion reports.</p>
7	<ul style="list-style-type: none"> • Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 	<ul style="list-style-type: none"> • Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 	0	<p>No evidence was seen with respect to this performance area</p>
Assessment area: Financial management and reporting				

8	<p>The LG Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5 	0	<p>The Annual Performance Report for FY2016/17 was submitted by Magara Bernard (Water Officer) to District Planner for consolidation on 18/8/2017 contrary to the Mid-July standard</p>
9	<p>LG Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 5 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0 	0	<p>Yumbe DLG Water Department had internal audit queries in FY 2016/17. For example, Quarter 2 report highlighted issues on non sanctioned expenditure (Page 21), absence of activity reports (Page 21), Quarter 3 report highlighted issues on rehabilitation of boreholes (Page 5). But effort was made to respond to some of the queries and some were cleared while others remained unresolved.</p>

Assessment area: Governance, oversight, transparency and accountability

10	<p>The LG committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3 	3	<p>In the works and technical committee meeting of 5th/4/2017, it discussed draft work plan for FY2017/18 for water and sanitation (YDLG/Min/04/05/04/2017).</p> <p>Meeting for works and technical services committee held on 10th /1/2017 at the district water office reviewed quarter 2 report for water and sanitation for FY2016/17 (YDLG/FC.MIN/04/10/01/2017)</p> <p>Meeting for works and technical services committee held on 8th/11/2016 at district water office discussed the 4th quarter report for FY2015/16, progress report for 1st quarter FY2016/17 and discussion of the monitoring report</p>
		<ul style="list-style-type: none"> Evidence that the water sector committee has presented issues that require approval to Council: score 3 	0	<p>There was no evidence of water sector committee presenting any issue/recommendation that required council approval. The minutes of the meetings only focused on review of performance but there was no issue/recommendation that was tabled before council for approval or disapproval.</p>
11	<p>The LG Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2 	0	<p>During the assessment period, there was an evidence of quarterly budget release as per department including water displayed on the notice board. However, there was no evidence of displayed shared information of the annual work plans, highlighting the planned activities, location, cost and the contractor/ service providers on the notice board</p>
		<ul style="list-style-type: none"> All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2 	0	<p>During the assessment period 2 deep boreholes in Eleke and Garube communities were sampled, the assessment found that labels did not indicate project name, contractor name, source of funding details whereas 4 sanitation facilities sampled, Nyori and Omba primary schools project name is not complete and detailed, date of construction is not labelled, source of funding is not detailed, Eleke primary school and Odujo markert were not labelled at all.</p>

		<ul style="list-style-type: none"> Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2 	0	During the assessment period, no evidence of water tenders and contract awards were displayed on the district notice boards
12	Participation of communities in WSS programmes	<ul style="list-style-type: none"> If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1 	0	There was no evidence of communities applying for water/public sanitation facilities including payment of community contribution for the current financial year.
	Maximum 3 points for this performance measure	<ul style="list-style-type: none"> Number of water supply facilities with WSCs that are functioning evidenced by collection of O&M funds and carrying out preventive maintenance and minor repairs, for the current FY: score 2 	2	The sampled water supply facilities have WSCs which are functioning. This was evidenced by the routine maintenance and repairs done and information shared with MIS department with support of the water department

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"> Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2 	0	Guidelines for environmental impact assessment in Uganda (July 1997), provides a checklist for environment and social screening of projects in the districts. There was no evidence of environment and water department conducting environment and social screening for all WSS projects implemented.
	Maximum 4 points for this performance measure	<ul style="list-style-type: none"> Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1 	0	During the assessment period, there was no evidence of conducting environment, social screening and follow up support provided in case of unacceptable environmental concerns.
		<ul style="list-style-type: none"> Evidence that construction and supervision contracts have clause on environmental protection: score 1 	0	There was no evidence identified during the assessment that construction and supervision contracts have clause on environmental protection

14	<p>The LG Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • If at least 50% WSCs are women as per the sector critical requirements: score 3 	3	<p>The 3 sampled WSCs of Eleke community-Apo sub county is composed of 9(5female,4 male), Garube-Kuru sub county 9(4 male, 5 female), Tritri-Kuru sub county 9(5 male, 4 female), meeting a critical requirement of promoting gender equity.</p>
15	<p>Gender- and special-needs sensitive sanitation facilities in public places/RGCs.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3 	0	<p>During the assessment period, 4 toilet facilities were sampled, Eleke and Omba primary school were compliant with access standards of PWDs whereas Nyori primary school and Odujo community market VIP latrine have a step at the door entry hindering easy access of sanitation facilities, it can be concluded that there was no compliance.</p>