

4.1 Performance on Health Sector Performance Measures

Performance Area	No.	Performance Measures	Scoring guide	Assessment Procedures	Score	Detailed assessment findings																												
(A) Human resource planning and management (Maximum 26 points)	1.	LG has substantively recruited primary health workers with a wage bill provision from PHC wage (Maximum 8 points)	Evidence that LG has filled the structure for primary health workers with a wage bill provision from PHC wage for the current FY (2018/19) <ul style="list-style-type: none"> • More than 80% filled: score 8 points, • 60 – 80% - score 4 points • Less than 60% filled: score 0 	<ul style="list-style-type: none"> • From the LG Performance Contract: <ul style="list-style-type: none"> ✓ Check the LG approved structure ✓ Check wage bill provision ✓ Establish the positions filled <p><i>If there is evidence of effort to recruit (e.g. advertisement etc.) but LG has failed to attract provide the score.</i></p>	8	<p>For Kataraka and Kagote HCs, more Health Workers have been recruited as part of the efforts for upgrading of the facilities to HC IV status.</p> <table border="1"> <thead> <tr> <th colspan="4">HC Staffing Status</th> </tr> <tr> <th>Health Unit</th> <th>Approved</th> <th>Filled</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>Mucwa</td> <td>19</td> <td>12</td> <td>63%</td> </tr> <tr> <td>Kasusu</td> <td>19</td> <td>15</td> <td>79%</td> </tr> <tr> <td>Kagote</td> <td>19</td> <td>21</td> <td>111%</td> </tr> <tr> <td>Kataraka</td> <td>19</td> <td>27</td> <td>142%</td> </tr> <tr> <td>Total</td> <td>76</td> <td>75</td> <td>99%</td> </tr> </tbody> </table>	HC Staffing Status				Health Unit	Approved	Filled	%	Mucwa	19	12	63%	Kasusu	19	15	79%	Kagote	19	21	111%	Kataraka	19	27	142%	Total	76	75	99%
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2.	The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department (Maximum 6 points)	Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY (2018/19), covering the vacant positions of health workers: score 6 points	<ul style="list-style-type: none"> ▪ From the Performance Contract, review recruitment plan to determine whether the vacant positions of primary health care workers have been included in the current FY (2018/19) 	6	<p>Fort Portal Municipal Health Department has developed a recruitment plan for three years. The plan shows the approved positions for each cadre of staff, the number of positions filled and the gap to be filled for each of the health facility under the Municipal Council. The plan also includes the implications to the wage bill.</p>																													
3.	The LG Health department has conducted	Evidence that all health facility in-charges have been appraised during the	<ul style="list-style-type: none"> • From the LG HR department, obtain and review a sample 	8	<p>All health facility in-charges were appraised during the FY 2017/18 as summarised below;</p>																													

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		performance appraisal for Health Centre I/Is and Hospital in-charge and ensured performance appraisals for HC III and II in-charges are conducted. (Maximum 8 points)	previous FY (2017/18): <ul style="list-style-type: none"> ▪ 100%: score 8 points ▪ 70 – 99%: score 4 points ▪ Below 70%: score 0 	of in-charge personnel files to determine whether they were appraised during the previous FY (2017/18).		<ul style="list-style-type: none"> ▪ Kaahwa Rusoke Rose Jolly: In-Charge Kataraka HCIII Appraised on 11th July 2018 by the Appraiser. The In-Charge was assessed on quality service delivery, immunization and health promotion. ▪ Agondeze Betty, In-Charge for Kagote HC III Appraised on 30th July 2018. The In-Charge in an acting position, was assessed on service delivery and financial management outputs. She was not assessed on other management and administration outputs that include coordination of facility activities, staff appraisal and periodic reporting. ▪ Banura Jolly, In-Charge, Mucwa HC III Appraised on 11 July 2018. The In-Charge Was assessed on the following outputs: <ul style="list-style-type: none"> ○ Support supervision of staff ○ Provision of clinical services ○ Performance reviews ○ Coordination of facility activities ○ Financial management ○ Staff appraisal ○ Management of facility supplies and drugs ○ However, she was not appraised on: Immunization coverage and health promotion ▪ Naturinda Monica, Kasusu HC III Appraised on 11th July 2018 was assessed on the following outputs <ul style="list-style-type: none"> ○ Periodic reporting ○ Clinical management ○ Health education ○ Outreaches ○ Counselling ○ Financial management and coordination of facility

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(B) Monitoring and supervision (Maximum 32 points)	4.	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 (2018/19). (Maximum 4 points)	<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 (2018/19), and if not provided justification for deviations: score 4 points 	<ul style="list-style-type: none"> From the MHO, obtain and review a sample of health facilities (rural and urban) verify whether the health workers as indicated in the staff lists are actually deployed in the health facilities. 	4	<ul style="list-style-type: none"> activities outputs were not assessed Note: all In-Charges had no performance plans aggregated upon with the MC, as required for the financial year under review. It appears the In-Charges come up with their performance outputs for review. Different output areas were appraised for different In-Charges as indicated above. <p>Considers the work load. A facility will have more Medical Workers than the approved position if there are more women delivering in the facility or if it has a heavy patient load:</p> <ul style="list-style-type: none"> This is the case with Kagote which has no approved position for a Nursing Officer (Midwifery), but is having one on the payroll and also has 3 enrolled Midwives against the approved position of 2. For Kataraka HC III it has 2 senior clinical officers against one approved clinical officer, a Psychiatric Nurse when there is established position, a Public Dental officer when it is not an approved position, Dispenser when there is no established position. The two HC III that had more staff members than the approved positions, are providing more services above their capacity and are therefore being prepared for upgrading to HC IV
	5.	The MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY	<ul style="list-style-type: none"> Evidence that the MHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY (2017/18) to health facilities: score 3 points 	<ul style="list-style-type: none"> From MoH obtain guidelines, policies, circulars issued by the national level in the previous FY (2017/18) to health facilities (MoH to prioritize the 	3	<p>Documents do not come to Fort Portal Medical Health Officer (FMHO). They are delivered to the District Health Office (DHO), and it is the DHO that disseminates, through training staff at the Health Units (HUs). The DHO has distributed the following through social media forum:</p> <ul style="list-style-type: none"> Guidelines on the implementation of new HIV testing services, Policy and Implementation guidelines 2016, dated 2nd May 2018.

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		(2017/18) to health facilities (Maximum 6 points)	<ul style="list-style-type: none"> Evidence that the MHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3 points 	<ul style="list-style-type: none"> documents to be reviewed) <ul style="list-style-type: none"> From the MHO obtain evidence that s/he communicated guidelines, policies, circulars to health facilities (e.g. through meetings, submission letters, etc). From the sample of health facilities, check whether the guidelines, policies, circulars were received. <p><i>If all guidelines of the previous year are still applicable and no new ones have been issued, then score 3</i></p>	<p>0</p>	<ul style="list-style-type: none"> Immunisation Act, June 2017 was shared on the DHO social media group of all health In-charges Managing expiring medical supplies was shared on the DHO social media forum Initiatives to increase ART coverage to meet national targets, was shared on DHO social media forum. <p>The following Policy guidelines were found at the health facilities :</p> <ul style="list-style-type: none"> Assisted partner notification Training for providers in a clinical setting Manual, March 2018 Job AID for health workers on vaccine preventable diseases surveillance, revised edition, 2018 Guidelines on the implementation of differentiated service delivery for HIV and TB services in Uganda, October 2017. <p>Dissemination is a function undertaken by the DHO. The DHO has a social media forum which is used to communicate with all HUs. There is also the M-Track of the MOH, which is used to share a lot of information. However there was no evidence that Fort Portal Municipality Health Office, took responsibility to explain to the In-Charges policy guidelines and circulars.</p>

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	6.	The LG Health Department has effectively provided support supervision to district health services (Maximum 6 points)	<ul style="list-style-type: none"> Evidence that MHT has supervised 100% of HC IVs and district hospitals (including PNFs receiving PHC grant) at least once in a quarter: score 3 points <p>Evidence that MHT has ensured that HSD has supervised lower level health facilities within the previous FY (2017/18):</p> <ul style="list-style-type: none"> If 100% supervised: score 3 points 80 - 99% of the health facilities: score 2 points 60% - 79% of the health facilities: score 1 point Less than 60% of the health facilities: score 0 	<p>From the MHO obtain:</p> <ul style="list-style-type: none"> The LG support supervision reports (quarterly) Minutes of MHT meetings Facility records Review and check a sample of minimum 5 facilities 	3	<p>Support supervision was carried out as follows:</p> <ul style="list-style-type: none"> July – September 2017, report dated 22nd September 2017 The supervision was carried out using a compliant check list for integrated support supervision and covered all the 4 health facilities which include Kasusu, Kagote, Mucwa HC II and Kataraka: The report did not provide recommendations arising out of the support supervision. October – December 2017, report dated 29th December 2017 The supervision was carried out using a compliant check list for integrated support supervision and covered all the 4 health facilities which include Kasusu, Kagote, Mucwa HC II and Kataraka: The report did not provide recommendations arising out of the support supervision. January - March 2018, report dated 20th March 2018 The supervision was carried out using a compliant check list for integrated support supervision and covered all the 4 health facilities which include Kasusu, Kagote, Mucwa HC II and Kataraka: The report did not provide recommendations arising out of the support supervision.

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	7.	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 follow up (Maximum 10 points)	<ul style="list-style-type: none"> Evidence that all the 4 quarterly reports have been discussed and used to make recommendations (in each quarter) for corrective actions during the previous financial year (2017/18): score 4 points Evidence that the recommendations are followed up and specific activities undertaken for correction: score 6 points 	<p>From the MHO obtain and review:</p> <ul style="list-style-type: none"> Support supervision and monitoring visit reports Minutes of quarterly meetings Minutes of monthly MHT meetings 	0	<ul style="list-style-type: none"> April – June 2018, report dated 27th June 2018: The supervision was carried out using a compliant check list for integrated support supervision and covered all the 4 health facilities which include Kasusu, Kagote, Mucwa HC II and Katikara: The report did not provide recommendations arising out of the support supervision. <p>There was no evidence of a quarterly meetings held to review and discuss the recommendations. The support supervision reports did not have recommendations that would inform the discussions during the review meeting</p>
			<ul style="list-style-type: none"> Evidence that the recommendations are followed up and specific activities undertaken for correction: score 6 points 	<ul style="list-style-type: none"> From the sampled health facilities, determine whether the Health department provided recommendations from the supervision visits and followed up. 	0	<p>There was no evidence of actions undertaken to follow up recommendations made. There were no recommendations arising out of the support supervision.</p>

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	8.	The LG Health department has submitted accurate/consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH	<ul style="list-style-type: none"> Evidence that the LG has submitted accurate/consistent data regarding list of facilities receiving PHC funding, which are consistent with both HMIS reports and PBS - score 10 points 	<ul style="list-style-type: none"> From the MoH obtain and review: <ul style="list-style-type: none"> HMIS reports for the current FY (2018/19) The performance contract for the current FY (2018/19) Check whether the lists of health facilities submitted are consistent/similar 	0	<ul style="list-style-type: none"> We were not provided with the HMIS reports for the current FY (2018/19) to enable us undertake the procedure. 								
(C) Governance, oversight, transparency and accountability (Maximum 14 points)	9.	The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council (Maximum 4 points)	<ul style="list-style-type: none"> Evidence that the committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY (2017/18) - score 2 points 	<ul style="list-style-type: none"> From the Clerk to Council obtain and review: <ul style="list-style-type: none"> Health sector standing committee meeting minutes – check if the Council has approved the sector implementation plan and discussions by the committee Review the MHO's reports to the committee 	3	<p>The social services and infrastructure committee is responsible for health. During the FY 2017/18, the committee met as follows:</p> <table border="1"> <thead> <tr> <th>Meeting Date</th> <th>Issues presented /discussed</th> </tr> </thead> <tbody> <tr> <td>16th, 18th & 22nd August 2017</td> <td>A Report of the Health Dept. and Work plan were presented. Report was made on mosquito net distribution, sanitation and health facility operations. Recommendation was that the challenge of the mentally ill be handled by both Health and Community Dept. Dept.</td> </tr> <tr> <td>14th December 2017</td> <td>A report presented by the Dept. to the committee. The report covered: Health Facility operations, sanitation, and support from Baylor</td> </tr> <tr> <td>15th March 2018</td> <td>No health issues discussed</td> </tr> </tbody> </table> <ul style="list-style-type: none"> The Social Services and Infrastructure handles a lot of issues. As a result, health has been given limited time. 	Meeting Date	Issues presented /discussed	16 th , 18 th & 22 nd August 2017	A Report of the Health Dept. and Work plan were presented. Report was made on mosquito net distribution, sanitation and health facility operations. Recommendation was that the challenge of the mentally ill be handled by both Health and Community Dept. Dept.	14 th December 2017	A report presented by the Dept. to the committee. The report covered: Health Facility operations, sanitation, and support from Baylor	15 th March 2018	No health issues discussed
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			<ul style="list-style-type: none"> Evidence that the health sector committee has presented issues that require approval to Council - score 2 points 	<ul style="list-style-type: none"> From the Clerk to Council obtain and review health sector standing committee meeting minutes – check if the sector committee has presented issues that require approval. 	2	<p>The social services and infrastructure committee presented issues that require approval to Council as summarised below:</p> <p>High priority is given to infrastructure. In addition, the report presented by the health Department does not adequately articulate health delivery issues, for the Committee to take decision on critical health service delivery issues.</p> <p>The social services and infrastructure committee presented issues that require approval to Council as summarised below:</p> <table border="1"> <thead> <tr> <th>Date</th> <th>Issues presented /discussed</th> </tr> </thead> <tbody> <tr> <td>16th, 18th & 22nd August 2017</td> <td>A Report of the Health Dept. and Work plan were presented. Report was made on mosquito net distribution, sanitation and health facility operations. Recommendation was that the challenge of the mentally ill be handled by both Health and Community Development Department.</td> </tr> <tr> <td>31st October 2017</td> <td>Report to Council presented the following: <ul style="list-style-type: none"> The NIMS truck delivering drugs damaged the patients shed at Kataraka HC III Garbage collection Keep Fort portal Clean carried out on 3rd Oct 2017 Sanitation and hygiene </td> </tr> <tr> <td>22nd December 2017</td> <td>The social services and infrastructure committee presented a committee report. There was no evidence from the Council minutes that health service delivery issues were contained in the Committee report.</td> </tr> </tbody> </table>	Date	Issues presented /discussed	16 th , 18 th & 22 nd August 2017	A Report of the Health Dept. and Work plan were presented. Report was made on mosquito net distribution, sanitation and health facility operations. Recommendation was that the challenge of the mentally ill be handled by both Health and Community Development Department.	31 st October 2017	Report to Council presented the following: <ul style="list-style-type: none"> The NIMS truck delivering drugs damaged the patients shed at Kataraka HC III Garbage collection Keep Fort portal Clean carried out on 3rd Oct 2017 Sanitation and hygiene 	22 nd December 2017	The social services and infrastructure committee presented a committee report. There was no evidence from the Council minutes that health service delivery issues were contained in the Committee report.
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						<p>27th February 2018</p> <p>The social services and infrastructure committee did not have a report to present to Council. The Committee failed to realise quorum to be able to proceed with committee meeting to agree on the committee report</p> <p>28th March 2018</p> <p>No health issues discussed by Council, apart from laying the draft budget for 2018/19 financial year.</p> <p>Note: Health issues were not very prominent in the Council meetings as indicated above. Health services delivery issues do not seem to attract attention of the Council.</p>								
	10.	The Health Unit Management Committees and Hospital Board are operational/ functioning (Maximum 6 points)	Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues): <ul style="list-style-type: none"> If 100% of randomly sampled facilities: score 6 points If 80-99 %: score 4 points If 70-79: %: score 2 point If less than 70%: score 0 	<ul style="list-style-type: none"> Check files of HUMCs and minutes of HUMCs (Check list for all and sample 5 to review) Study files from 5 randomly sampled health facilities to confirm whether they have HUMCs and review whether they have held 4 mandatory meetings 	4	<p>The three health facilities have established HUMCs and they held meetings and minutes where available for the following dates</p> <table border="1"> <thead> <tr> <th>Health Unit</th> <th>Dates meetings held</th> </tr> </thead> <tbody> <tr> <td>Mucwa HC III</td> <td>3rd October 2017, 19th January 2018, 27th April 2018, & 14th June 2018. Reports of the In-charge presented and discussed PHC funding, Security, sanitation and had a tour of the health facility</td> </tr> <tr> <td>Kasusu HC III</td> <td>No minutes presented at the time of the visit. Facility has a challenge of record management</td> </tr> <tr> <td>Kagote HC III</td> <td>Only minutes for the meeting of 30th January 2018 were accessed. Discussed security of the health facility and ambulance.</td> </tr> </tbody> </table>	Health Unit	Dates meetings held	Mucwa HC III	3 rd October 2017, 19 th January 2018, 27 th April 2018, & 14 th June 2018. Reports of the In-charge presented and discussed PHC funding, Security, sanitation and had a tour of the health facility	Kasusu HC III	No minutes presented at the time of the visit. Facility has a challenge of record management	Kagote HC III	Only minutes for the meeting of 30 th January 2018 were accessed. Discussed security of the health facility and ambulance.
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(D) Procurement and contract management (Maximum 8 points)	11.	The LG has publicised all health facilities receiving PHC non-wage recurrent grants (Maximum 4 points)	<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 4 points 	<ul style="list-style-type: none"> Check the LG Notice Boards and LG budget website to establish if the Health department publicised all health facilities receiving non-wage recurrent grants Check a sample of health facilities 	0	<ul style="list-style-type: none"> List and information on health facilities receiving non-wage recurrent grants was displayed on the notice Board in the Mayor's office but not very visible, and also at Mucwa HC III. PHC funds were not displayed at the Kasusu and Kagote HC IIIs. Only Mucwa HCIII published the PHC funds on the notice Board
	12	The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget (Maximum 4 points)	<ul style="list-style-type: none"> Evidence that the sector has submitted input to procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30, 2018 for the current FY (2018/19) - score 2 points Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY - score 2 points 	<ul style="list-style-type: none"> From the Municipal Health Officer (MHO) obtain and review submissions to DPU; From PDU crosscheck submission from DHO 	2	<ul style="list-style-type: none"> The Fort portal municipality Health Procurement Plan 2018/2019 was submitted to Procurement and Disposal Unit (PDU) before the due date of 30th April 2018; on 27th April 2018. The approved annual work plan and procurement plan cover the investment items; Maintenance of Kiteere compost site, Phase completion of Kaowamba toilet market; completion of Katataka staff house and construction of a 2 stance water borne toilet with urinal and bathroom as in the submitted department procurement plan. Procurement Requisition for maintenance of Kiteere compost site was prepared and submitted to PDU before due date of 1st quarter; on 23rd May 2018.
	13	The LG Health department has certified and initiated payment for	<ul style="list-style-type: none"> Evidence that the MHO (as per contract) certified and recommended suppliers 	<ul style="list-style-type: none"> From the CFO obtain a sample of contracts, review and determine 	4	<ul style="list-style-type: none"> The payment requests made by David Ndikiumwami on for the maintenance of the mortuary and cemetery was recommended for payment on time. The service provider completed works on 31st October

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(E) Financial management and reporting (Maximum 8 points)	14	The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit (Maximum 4 points)	<ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY – 2017/18 (including all four quarterly reports) to the Planner by mid-July for consolidation - score 4 points 	<ul style="list-style-type: none"> From the Planning Unit, obtain and review performance report files From the MHO check annual and quarterly reports for the previous FY (2017/18) 	0	<ul style="list-style-type: none"> For the FY 2017/18, the Planning unit was using PBS. The departmental head for health has access to PBS, which was used to input departmental figures after which the Planner would receive an email notification from the PBS system though there was no evidence of submission. However, we noted that the two quarterly performance reports (quarter 1 and 2) included input from the health department and Fort Portal MLG annual performance report for the FY 2017/18 was not submitted to MoFPED before the deadline of 30th August 2018. 												
	15	LG Health department has acted on Internal Audit recommendations (if any) (Maximum 4 points)	<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</p> <ul style="list-style-type: none"> If sector has no audit query - score 4 points If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year (2017/18) - score 2 	<ul style="list-style-type: none"> From the Internal Auditor obtain copies of sector audit reports from the internal audit and Management responses for the previous FY (2017/18) 	0	<p>The audit department had issues raised to the health department however, there was no proof that the health department responded to all the issues as shown in the table below:</p> <table border="1"> <thead> <tr> <th>Quarters</th> <th>Issues</th> <th>Responses</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>No accountabilities for the follow up on MDR TB suspects, supervision of health facilities, monitoring and review of activity implementation, conduct support supervision to health activities of USHS. 537,000</td> <td>No evidence of action taken</td> </tr> <tr> <td>2</td> <td>No issues raised</td> <td>No response required</td> </tr> <tr> <td>3</td> <td>No issues raised</td> <td>No response required</td> </tr> </tbody> </table>	Quarters	Issues	Responses	1	No accountabilities for the follow up on MDR TB suspects, supervision of health facilities, monitoring and review of activity implementation, conduct support supervision to health activities of USHS. 537,000	No evidence of action taken	2	No issues raised	No response required	3	No issues raised	No response required
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(F) Social and environment safeguards (Maximum 12 points)	16	Compliance with gender composition of Health Unit Management Committee (HUMC) and promotion of gender sensitive sanitation in health facilities. (Maximum 4 points)	<ul style="list-style-type: none"> Evidence that HUMC meet the gender composition as per guidelines (i.e. minimum 30% women) - score 2 points 	<ul style="list-style-type: none"> From the sampled health facilities, find out whether the number and gender of committee members is as per required composition 	2	<p>Committees for selected health facilities met the gender composition as per guidelines (i.e. minimum 30% women).</p> <ul style="list-style-type: none"> Mucwa HC III – Committee is in place composed of 9 members with 6 women and 3 men meeting required minimum 30% women Composition. Kagote HC III - Committee is in place composed of 7 members with 4 women and 3 men meeting required minimum 30% women Composition. Kasusu HC III - Committee is in place composed of 7 members with 3 women and 4 men meeting required minimum 30% women Composition.
	17	LG Health department has ensured that guidelines on environmental management are disseminated and	<ul style="list-style-type: none"> Evidence that all health facility infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget 	<ul style="list-style-type: none"> From the Environmental officer obtain and review filled screening forms to ascertain whether screening was done 	2	<ul style="list-style-type: none"> There was no capital development fund for health for 2017/18. There were therefore no health infrastructure projects to screen. No site visits were made because there were no health projects implemented.

Performance Area	No.	Performance Measures	Scoring guide	Assessment Procedures	Score	Detailed assessment findings
		<p>complied with. (Maximum 4 points)</p>	<p>guidelines and where risks are identified, the forms include mitigation actions: score 2 points</p> <ul style="list-style-type: none"> The environmental officer and community development officer have visited the sites to check whether the mitigation plans are complied with: score 2 points 	<p>and whether risks mitigation plans were developed.</p> <ul style="list-style-type: none"> From the Environmental officer and CDO obtain and review Site visit reports to establish whether they checked compliance to the risk mitigation plans 		
	18	<p>The LG Health department has issued guidelines on medical waste management (Maximum 4 points)</p>	<ul style="list-style-type: none"> Evidence that the LG has issued guidelines on medical waste management, including guidelines (e.g. sanitation charts, posters, etc) for construction of facilities for medical waste disposal - score 4 points. 	<ul style="list-style-type: none"> From the sampled health facilities, find out whether the LG has issued guidelines on medical waste management 	4	<p>There was evidence that the MLG issued guidelines on medical waste management (e.g. sanitation charts, posters, etc), including guidelines for construction of facilities for medical waste disposal:</p> <ul style="list-style-type: none"> A copy of Health Care Waste Management, Health workers guide second edition of 2013 was seen on file at the Municipal Health Inspector's office. From the sampled health facilities (Kagote HC III, Mucwa HC III and Kasusu HC III), there was evidence that the LG Health department issued guidelines on medical waste management. Medical waste management guidelines summarised in form of charts and posters were displayed at various locations of the sampled health centers. Medical waste disposal dust bins well labelled with different colours were observed in all the health centers visited.
Total					64	

4.2 Performance on Education Sector Performance Measures

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings																		
(A) Human resource planning and management <i>(Maximum 30 points)</i>	1.	The Municipal LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school) <i>(Maximum 8 points)</i>	<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 (2018/19) - score 4 points 	<ul style="list-style-type: none"> From the Municipal LG Performance Contract: (i) review the list of schools; and (ii) the staff lists and validate that: <ul style="list-style-type: none"> The Municipal LG has budgeted for at least a Head Teacher and a minimum of 7 teachers per school. 	0	<ul style="list-style-type: none"> The performance contract for the FY 2018/19 was obtained and reviewed. The budget included only 11 schools out of 15 schools. The detailed staff list submitted with the performance contract was not availed for review. Therefore there was no evidence that the LG had 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 (2018/19) 																		
			<ul style="list-style-type: none"> Evidence that the Municipal LG has deployed a Head Teacher and minimum of 7 teachers per school (or minimum of a teacher per class for schools with less than P.7) for the current FY (2018/19) - score 4 points 	<ul style="list-style-type: none"> From the MEO obtain and review <ul style="list-style-type: none"> Teachers' lists to determine whether Municipal LG has deployed a Head Teacher and minimum of 7 teachers (or minimum of a teacher per class for schools with less than P.7) per school for the current FY (2018/19). From the sampled schools (urban and rural), verify whether the teachers as 	4	<ul style="list-style-type: none"> The teacher's lists were obtained and reviewed. A sample of 5 schools was randomly selected. All sampled schools were visited and these had more than the required minimum number of teachers as shown in the table below: <table border="1" data-bbox="406 1449 690 1921"> <thead> <tr> <th>School</th> <th>Deployed teachers</th> <th>Staff list</th> </tr> </thead> <tbody> <tr> <td>Njara</td> <td>18</td> <td>18</td> </tr> <tr> <td>Buhinga</td> <td>36</td> <td>36</td> </tr> <tr> <td>Kyebambe</td> <td>20</td> <td>20</td> </tr> <tr> <td>Kagote</td> <td>13</td> <td>13</td> </tr> <tr> <td>Kahungabunyonyi</td> <td>12</td> <td>12</td> </tr> </tbody> </table> <p>However, the names of teachers were different from those in the staff list received from the HR. We noted that whenever transfer of teachers were done between schools, the payroll was not edited to reflect the</p>	School	Deployed teachers	Staff list	Njara	18	18	Buhinga	36	36	Kyebambe	20	20	Kagote	13	13	Kahungabunyonyi	12	12
School	Deployed teachers	Staff list																						
Njara	18	18																						
Buhinga	36	36																						
Kyebambe	20	20																						
Kagote	13	13																						
Kahungabunyonyi	12	12																						

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
				indicated in the staff lists are actually deployed in the schools.		teachers in the new cost centres (schools to which they have been transferred).
	2.	Municipal LG has substantively recruited all primary school teachers where there is a wage bill provision (Maximum 6 points)	<ul style="list-style-type: none"> Evidence that the Municipal LG has filled the structure for primary teachers with a wage bill provision <ul style="list-style-type: none"> If 100% - score 6 points If 80 - 99% - score 3 points If below 80% - score 0 points 	<p>From the Municipal LG Performance Contract:</p> <ul style="list-style-type: none"> Check the Municipal LG approved structure Check wage bill provision Positions filled. <p><i>If there is evidence of effort to recruit (e.g. advertisement etc.) but Municipal LG has failed to attract, provide the score.</i></p>	3	<ul style="list-style-type: none"> The wage bill for primary teachers was Ushs. 2,313,416,763. The existing number of teachers was not specified in the performance contract. From the Human resource officer, we obtained a staff list with a total of 282 teachers, implying that 98% of the structure (288) was filled.
	3.	Municipal LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision. (Maximum 6 points)	<ul style="list-style-type: none"> Evidence that the Municipal LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision - score 6 points 	<p>From the Municipal LG Performance Contract:</p> <ul style="list-style-type: none"> Check the Municipal LG approved structure Positions filled. 	6	<ul style="list-style-type: none"> The 2 positions of school inspectors as per staff structure were filled. Senior inspector of schools: Susan Manimake appointed on 27th January 2016. Inspector of schools: Ategeka Patrick appointed on 27th January 2016.
	4.	The LG Education department has submitted a recruitment plan	Evidence that the Municipal LG Education department has submitted a recruitment plan to HRM	<p>From the Municipal LG Performance Contract:</p> <ul style="list-style-type: none"> Review the recruitment plan to 	2	<ul style="list-style-type: none"> The recruitment plan for 2018/19 was obtained and reviewed. Head teachers and 7 teachers had been included in the recruitment plan

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
(B) Monitoring and inspection (Maximum 35	5.	The Municipal 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 (2017/18). (Maximum 6 points)	Evidence that the Municipal LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY (2017/18) <ul style="list-style-type: none"> 100% school inspectors - score 3 points Primary school head teachers <ul style="list-style-type: none"> 90 - 100% - score 3 points 70% and 89% - score 2 points Below 70% - score 0 	From the Municipal HR department obtain and review: <ul style="list-style-type: none"> Personnel files for school inspectors and a sample of head teachers to determine whether they were appraised during the previous FY (2017/18). 	3	<ul style="list-style-type: none"> The staff files for the inspectors of schools and a sample of 5 head teacher were reviewed. The schools Inspectors (Manimake Susan, and Ategeka Patrick) had been appraised for the FY 2017/18. None of the head teachers of the sampled schools were appraised during the year ended December 2017.
	6.	The Municipal LG Education Department has effectively communicated and explained guidelines, policies, (Maximum 35	Evidence that the Municipal LG Education department has communicated all guidelines, policies, circulars issued by the national level in the <ul style="list-style-type: none"> From MOES obtain guidelines, policies, circulars issued by the national level in the previous FY (2017/18) to schools From the MEO 	1	<ul style="list-style-type: none"> There was Evidence that the Municipal LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY (2017/18) to schools. Letters from the MEO to the head teachers were reviewed. The Circulars/ guidelines (issued in FY 2017/18) found 	

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
points)		circulars issued by the national level in the previous FY (2017/18) to schools (Maximum 3 points)	previous FY (2017/18) to schools - score 1 point	obtain evidence that s/he communicated guidelines, policies, circulars to schools. From the sampled schools, check whether the guidelines, policies, circulars were received.	0	<ul style="list-style-type: none"> ▪ Minutes of education department meetings with head teachers held on 12th March 2018, 15th February 2018 were obtained and reviewed. No other minutes were availed for review. ▪ There was no evidence of any explanation or sensitization on the guidelines policies and circulars issued by the national level.
			Evidence that the Municipal 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 - score 2 points	From the MEO obtain and review minutes and/or other meetings with Head Teachers		
	7.	The Municipal LG Education Department has effectively inspected all registered schools (Maximum 12 points)	<ul style="list-style-type: none"> ▪ Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> ✓ 100% - score 12 ✓ 90 to 99% - score 10 ✓ 80 to 89% - score 8 ✓ 70 to 79% - score 6 ✓ 60 to 69% - score 3 ✓ 50 to 59 % - score 1 ✓ Below 50% - score 0 	<ul style="list-style-type: none"> ▪ From the MEO, obtain and review school inspection reports and inventory of schools inspected in the previous FY (2017/18) ▪ From sampled school verify the number of times they were inspected 	6	<ul style="list-style-type: none"> ▪ A sample of 5 government aided schools and 5 private schools was randomly selected. Quarterly inspection reports for FY 2017/18 were obtained and reviewed. ▪ We also obtained and reviewed Inspection feedback reports for each of the sampled schools. ▪ It was noted that 7 out of 10 sampled schools had been inspected at least once per term in the previous FY 2017/18. There was no evidence of inspection of Kahungabunyonyi P/S and Sky's Limit P/S in FY 2017/18. Njara P/S had not been inspected in 2018 term one. Refer to table below for specific findings;

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings																																																															
				during the previous FY (2017/18)		<table border="1"> <thead> <tr> <th>School</th> <th>Inspection date</th> <th>Period (Term)</th> </tr> </thead> <tbody> <tr> <td colspan="3">Government Aided schools</td> </tr> <tr> <td rowspan="3">Buhinga P/S</td> <td>17/10/2017</td> <td>2017 Term 3</td> </tr> <tr> <td>12/04/2018</td> <td>2018 Term 1</td> </tr> <tr> <td>31/05/2018</td> <td>2018 Term 2</td> </tr> <tr> <td rowspan="3">Kagote P/S</td> <td>11/06/2018</td> <td>2018 Term 2</td> </tr> <tr> <td>27/07/2017</td> <td>2017 Term 2</td> </tr> <tr> <td>23/09/2017</td> <td>2017 Term 3</td> </tr> <tr> <td rowspan="3">Kyebambe P/S</td> <td>28/02/2018</td> <td>2018 Term 1</td> </tr> <tr> <td>24/07/2017</td> <td>2017 Term 2</td> </tr> <tr> <td>16/10/2017</td> <td>2017 Term 3</td> </tr> <tr> <td rowspan="3">Njara P/S</td> <td>26/03/2018</td> <td>2018 Term 1</td> </tr> <tr> <td>10/07/2018</td> <td>2018 Term 2</td> </tr> <tr> <td>05/07/2017</td> <td>2017 Term 2</td> </tr> <tr> <td rowspan="3">Kahungu Bunyonyi P/S</td> <td>10/10/2017</td> <td>2017 Term 3</td> </tr> <tr> <td>21/06/2018</td> <td>2018 Term 2</td> </tr> <tr> <td>None</td> <td></td> </tr> <tr> <td colspan="3">Private schools</td> </tr> <tr> <td rowspan="3">St. Paul Junior P/S</td> <td>09/11/2017</td> <td>2017 Term 3</td> </tr> <tr> <td>26/02/2018</td> <td>2018 Term 1</td> </tr> <tr> <td>27/06/2018</td> <td>2018 Term 2</td> </tr> <tr> <td rowspan="3">Fort Portal Islamic P/S</td> <td>11/07/2017</td> <td>2017 Term 2</td> </tr> <tr> <td>03/10/2017</td> <td>2017 Term 3</td> </tr> <tr> <td>10/04/2018</td> <td>2018 Term 1</td> </tr> <tr> <td rowspan="2">Greenhill P/S</td> <td>09/08/2018</td> <td>2018 Term 2</td> </tr> <tr> <td>17/07/2017</td> <td>2017 Term 2</td> </tr> </tbody> </table>	School	Inspection date	Period (Term)	Government Aided schools			Buhinga P/S	17/10/2017	2017 Term 3	12/04/2018	2018 Term 1	31/05/2018	2018 Term 2	Kagote P/S	11/06/2018	2018 Term 2	27/07/2017	2017 Term 2	23/09/2017	2017 Term 3	Kyebambe P/S	28/02/2018	2018 Term 1	24/07/2017	2017 Term 2	16/10/2017	2017 Term 3	Njara P/S	26/03/2018	2018 Term 1	10/07/2018	2018 Term 2	05/07/2017	2017 Term 2	Kahungu Bunyonyi P/S	10/10/2017	2017 Term 3	21/06/2018	2018 Term 2	None		Private schools			St. Paul Junior P/S	09/11/2017	2017 Term 3	26/02/2018	2018 Term 1	27/06/2018	2018 Term 2	Fort Portal Islamic P/S	11/07/2017	2017 Term 2	03/10/2017	2017 Term 3	10/04/2018	2018 Term 1	Greenhill P/S	09/08/2018	2018 Term 2	17/07/2017	2017 Term 2
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Sky's Limit P/S	None																										
	8.	Municipal LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations (Maximum 10 points)	<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 (2017/18) - score 4 points Evidence that the Municipal LG Education department has submitted school inspection reports to the DES in the Ministry of Education and Sports (MoES) - score 2 points 	<ul style="list-style-type: none"> From MEO obtain and review minutes of departmental meetings to determine whether school inspection reports were discussed and used to make recommendations for corrective actions during the previous FY (2017/18). From the DES obtain and review a list of LGs that have submitted school inspection reports From the MEO check whether the MEO has letter of acknowledgement from DES 	0	<ul style="list-style-type: none"> Minutes of departmental meetings for the FY 2017/18 were not availed for review. Only minutes of the meeting held on 25th July 2016 and 13th August 2018 were availed for review (and they did not include a discussion of any inspection report). Therefore, there was no evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY (2017/18). From the DES, we obtained and reviewed a list of LGs that had submitted school inspection reports. It was noted that the MLG had not submitted inspection reports to the DES. At the MLG, there was no letter from the DES acknowledging receipt of inspection reports. Based on the above, there was no evidence that the Municipal LG Education department submitted school inspection reports to the DES in the Ministry of Education and Sports (MoES). 																					

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
			<ul style="list-style-type: none"> Evidence that the inspection recommendations are followed-up - score 4 points 	<ul style="list-style-type: none"> From the sampled schools, determine whether the education department provided recommendations from the inspection reports and followed-up. 	0	<p>There was no evidence that the inspection recommendation are followed up.</p>
	9.	The Municipal LG Education department has submitted accurate/consistent reports/ date for school lists and enrollment as per formats provided by MoES (Maximum 10 points)	<ul style="list-style-type: none"> Evidence that the Municipal LG has submitted accurate/consistent data: <ul style="list-style-type: none"> ✓ List of schools which are consistent with both EMIS reports and Programme Budgeting System (PBS) - score 5 points Evidence that the Municipal LG has submitted accurate/consistent data: <ul style="list-style-type: none"> ✓ Enrollment data for all schools which is consistent with EMIS report and PBS - score 5 points 	<ul style="list-style-type: none"> From MoES obtain and review EMIS reports for the current FY (2018/19) Obtain and review the performance contract for the current FY (2018/19) Check whether the list of schools submitted are consistent/similar. 	0	<ul style="list-style-type: none"> From the MoES, the EMIS reports were not availed for review. We obtained and reviewed the performance contract for 2018/19. However the enrollment data (which should have been submitted with the performance contract) was not availed for review. <p>Based on the above we were unable to ascertain the level of consistency of information submitted in PBS and the EMIS reports. Therefore the score is zero.</p>
				<ul style="list-style-type: none"> From MoES obtain and review EMIS reports for the current FY (2018/19) Obtain and review the performance contract for the current FY (2018/19) Check whether the enrollment levels are consistent/similar. 	0	<ul style="list-style-type: none"> From the MoES, the EMIS reports were not availed for review. We obtained and reviewed the performance contract for 2018/19. However the enrollment data (which should have been submitted with the performance contract) was not availed for review. <p>Based on the above we were unable to ascertain the level of consistency of information submitted in PBS and the EMIS reports. Therefore the score is zero.</p>

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings								
(C) Governance, transparency, and accountability (Maximum 12 points)	10.	The Municipal LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council (Maximum 4 points)	<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 (2017/18) - score 2 points 	<ul style="list-style-type: none"> From the Clerk to Council obtain and review education sector standing committee meeting minutes – check if the Council has approved the sector implementation plan and discussions by the standing committee MEO's reports to the committee 	0	<ul style="list-style-type: none"> Minutes of council meetings held on 31st August 2017, 22nd December 2017, 27th February 2018, and 28th March 2018 were obtained and reviewed. It was observed that no education sector issues were presented to the council for approval, shown in the table below: <table border="1"> <thead> <tr> <th>Date</th> <th>Key Highlights</th> </tr> </thead> <tbody> <tr> <td>31st August 2017</td> <td>Social Services and Infrastructure Development committee report was presented, but nothing relating to education was discussed</td> </tr> <tr> <td>22nd December 2017</td> <td>Social Services and Infrastructure Development committee report was presented, but nothing relating to education was discussed.</td> </tr> <tr> <td>27th February</td> <td> <ul style="list-style-type: none"> Presentation of the annual work plan for Financial Year 2018/ 19. </td> </tr> </tbody> </table>	Date	Key Highlights	31 st August 2017	Social Services and Infrastructure Development committee report was presented, but nothing relating to education was discussed	22 nd December 2017	Social Services and Infrastructure Development committee report was presented, but nothing relating to education was discussed.	27 th February	<ul style="list-style-type: none"> Presentation of the annual work plan for Financial Year 2018/ 19.
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27 th February	<ul style="list-style-type: none"> Presentation of the annual work plan for Financial Year 2018/ 19. 													
<ul style="list-style-type: none"> Evidence that the education sector committee has presented issues that requires approval to Council - score 2 points 	<ul style="list-style-type: none"> From the Clerk to Council obtain and review minutes to check if education issues have been presented to the Council. 													

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings																																		
	11.	Primary schools in a Municipal LG have functional SMCs (Maximum 5 points)	Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to MEO) <ul style="list-style-type: none"> 100% schools: score 5 80 to 99% schools: score 3 Below 80 % schools: score 0 	<ul style="list-style-type: none"> Check files from MEO if head teachers have submitted reports to SMCs and minutes of SMCs (check the entire list and sample 5 reports) Study files from 5 randomly sampled primary schools to confirm whether they have SMCs and review whether they have held 3 mandatory meetings 	0	<p>2018</p> <ul style="list-style-type: none"> Social Services and Infrastructure Development Committee chairperson had no report to present to the council. <p>28th March 2018</p> <ul style="list-style-type: none"> Laying of the Draft Budget for Financial Year 2018/ 19, and these were referred to standing committees. <p>Since no education issues were presented to the council for approval, the score is zero.</p> <p>SMC minutes of the 5 sampled schools were obtained and reviewed. Only 2 schools (Kagote P/S and Niara P/S) out of 5 sampled schools (40%) had held the mandatory meetings as shown in the table below:</p> <table border="1"> <thead> <tr> <th>School</th> <th>Date of meeting</th> <th>Period (Term)</th> </tr> </thead> <tbody> <tr> <td rowspan="3">Kagote P/S</td> <td>28th June 2017</td> <td>2017 Term 2</td> </tr> <tr> <td>30th September 2017</td> <td>2017 Term 3</td> </tr> <tr> <td>25th February 2018</td> <td>2018 Term 1</td> </tr> <tr> <td rowspan="3">Niara P/S</td> <td>22nd June 2017</td> <td>2017 Term 2</td> </tr> <tr> <td>17th November 2017</td> <td>2017 Term 3</td> </tr> <tr> <td>23rd March 2018</td> <td>2018 Term 1</td> </tr> <tr> <td rowspan="3">Kyebambe P/S</td> <td>1st June 2018</td> <td>2018 Term 2</td> </tr> <tr> <td>21st December 2017</td> <td>2017 Term 3</td> </tr> <tr> <td>20th June 2017</td> <td>2017 Term 2</td> </tr> <tr> <td rowspan="2">Buhinga P/S</td> <td>29th May 2017</td> <td>2017 Term 2</td> </tr> <tr> <td>2nd May 2018</td> <td>2018 Term 1</td> </tr> <tr> <td rowspan="2">Kahungu-bunyonyi P/S</td> <td>23rd June 2017</td> <td>2017 Term 2</td> </tr> <tr> <td>26th September 2017</td> <td>2017 Term 3</td> </tr> </tbody> </table> <p>Since only 40% of the sampled schools held mandatory SMC meetings, the score is zero.</p>	School	Date of meeting	Period (Term)	Kagote P/S	28 th June 2017	2017 Term 2	30 th September 2017	2017 Term 3	25 th February 2018	2018 Term 1	Niara P/S	22 nd June 2017	2017 Term 2	17 th November 2017	2017 Term 3	23 rd March 2018	2018 Term 1	Kyebambe P/S	1 st June 2018	2018 Term 2	21 st December 2017	2017 Term 3	20 th June 2017	2017 Term 2	Buhinga P/S	29 th May 2017	2017 Term 2	2 nd May 2018	2018 Term 1	Kahungu-bunyonyi P/S	23 rd June 2017	2017 Term 2	26 th September 2017	2017 Term 3
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	26 th September 2017	2017 Term 3																																						

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
	12.	The Municipal LG has publicised all schools receiving non-wage recurrent grants (Maximum 3 points)	<ul style="list-style-type: none"> Evidence that the Municipal LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards - score 3 points 	<ul style="list-style-type: none"> Check the Municipal notice boards to establish if the Education department publicised all schools receiving non-wage recurrent grants for public viewing Check a sample of schools for postings of non-wage recurrent grants 	0	<ul style="list-style-type: none"> The Municipal notice boards were checked. There was no evidence that the Education department publicising of all schools receiving non-wage recurrent grants for public viewing. All the 5 sampled schools had published UPE funds in the teacher's office or the staff room. <p>Since the schools receiving non-wage recurrent grants were not pinned on the municipal noticeboards, the score is zero.</p>
(D) Procurement and contract management (Maximum 7 points)	13	The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements, to Procurement Unit that cover all items in the approved Sector annual work plan and budget (Maximum 4 points)	<ul style="list-style-type: none"> Evidence that the sector has submitted procurement input to Procurement Unit that covers all investment items in the approved Sector annual work plan and budget on time by April 30, 2018 - score 4 points 	<ul style="list-style-type: none"> From the Municipal Education Officer (MEO) obtain and review submission to Procurement Unit; <ul style="list-style-type: none"> From DPU crosscheck submission from MEO 	4	<ul style="list-style-type: none"> The Education department Procurement Plan was prepared by Richard Alituha, Principal Education Officer, approved by Head of Department and submitted to Procurement and Disposal Unit (PDU) before due date of 30th April 2018 on 26th April 2018 The approved annual work plan and procurement plan covered the investment items: Renovation of 2 classroom block at Kahinju P/S, Emptying Ventilated Improved Pit (VIP) Latrines in 15 primary schools, and Procurement of school furniture which were in the submitted department procurement plan.
	14	The LG Education department has certified and initiated payment for	<ul style="list-style-type: none"> Evidence that the LG Education departments timely (as per contract) certified 	<ul style="list-style-type: none"> From the CFO obtain a sample of contracts, review and determine 	3	The LG Education department certified and initiated payment for works/supplies on time. We sampled two contracts and assessed to determine whether completed works was certified within 28 days and payment to

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
		supplies on time (Maximum 3 points)	and recommended suppliers for payment: score 3 points	whether payment requests were certified and recommended on time		<p>contractor made within 30 days of issuance of certificate as shown below;</p> <p>Contract signed between Amata Enterprises Limited and Fort Portal Municipal Council on 7th November 2017 for the sum of USHS. 23,915,027 for Construction of VIP Latrine at Njara P/S;</p> <ul style="list-style-type: none"> • The requests for payment for Amata Enterprises Limited were certified and recommended for payment on time • The contractor completed works sequentially on 18th December 2017, 29th January 2018 and on 29th March 2018, the works were certified on the same dates. • The contractor was recommended for payment by the Municipal Education Officer payment on the same dates of certification of works. <p>Contract signed between Beglo Enterprises Company Limited and Fort Portal Municipal Council on 25th February 2018 for the sum of USHS. 27,175,780 for Renovation of Special Needs Classroom block at St Peters & Paul P/S;</p> <ul style="list-style-type: none"> • The requests for payment for Beglo Enterprises Company Limited were certified and recommended for payment on time. • The contractor completed first phase of works on 29th March 2018, the works were certified by Municipal Engineer on 20th April 2018. • The contractor submitted their claim for payment on 29th March 2018 which was recommended for payment on 20th April 2018 by Municipal Health Officer. • The contractor completed second phase of works on 1st

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
(E) Financial management and Reporting <i>(Maximum 8 points)</i>	15	The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit <i>(Maximum 4 points)</i>	<ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY – 2017/18 (with availability of all four quarterly reports) to the Planner by 15th July for consolidation: score 4 points 	<ul style="list-style-type: none"> From the Planning Unit, obtain and review performance report files From the MEO check annual and quarterly reports for the previous FY (2017/18) 	0	<ul style="list-style-type: none"> For the FY 2017/18, the Planning unit was using PBS. The departmental head for education has access to PBS, which was used to input departmental figures after which the Planner would receive an email notification from the PBS system though there was no evidence of submission. However, we noted that the two quarterly performance reports (quarter 1 and 2) included input from the education department and Fort Portal MLG annual performance report for the FY 2017/18 was not submitted to MoFPED before the deadline of 30th August 2018.
	16	LG Education has acted on Internal Audit recommendations (if any) <i>(Maximum 4 points)</i>	<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 (2017/18) If sector has no audit query - score 4 points If the sector has provided information to the internal audit on the status of 	<ul style="list-style-type: none"> From the Internal Auditor obtain copies of sector audit reports from the internal audit and Management responses for the previous FY (2017/18) 	0	<p>The education department had issues raised by the internal auditor. However, there was no proof that the department responded to all the issues raised by the internal audit as shown below:</p> <p>Quarter 1 & 2</p> <ul style="list-style-type: none"> No issues raised <p>Quarter 3</p> <ul style="list-style-type: none"> Abandonment of duty by teachers (Katorogo Kaita Irene, Muhumza Festo, Asimwe David & Juma Shakilah) from the primary schools for the period Jan to Mar 2018. However, there was no status of implementation provided to internal audit. <p>Quarter 4</p> <ul style="list-style-type: none"> No issues raised

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(F) Social and environment safeguards <i>(Maximum 8 points)</i>	17	LG Education Department has disseminated and promoted adherence to gender guidelines <i>(Maximum 5 points)</i>	<ul style="list-style-type: none"> implementation of all audit findings for the previous financial year (2017/18) - score 2 points ✓ If all queries are not responded to - score 0 			
			<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 teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc....: score 2 points 	<ul style="list-style-type: none"> From the Municipal Education Officer (MEO) obtain evidence on dissemination of gender guidelines on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc. 	0	<ul style="list-style-type: none"> There was no evidence on dissemination of gender guidelines on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills. The Municipal Education Officer and head teachers of sampled schools were not aware of any related guidelines There was no evidence of minutes from meetings between MEO and the schools discussing guidelines on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health and life skills.
			<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 points 	<ul style="list-style-type: none"> From the MEO obtain evidence on dissemination of sanitation guidelines and awareness raising on how to manage sanitation for girls and PWDs in primary schools 	0	<ul style="list-style-type: none"> There was no evidence that the MLG had issued guidelines on how to manage sanitation for girls and PWDs in primary schools. There was no meeting minute's evidence that schools discussing guidelines on how to manage sanitation for girls and PWDs in primary schools. At the sampled schools, there were no guidelines seen on file or notice boards and at the office of the MEO.
			<ul style="list-style-type: none"> Evidence that the School Management 	<ul style="list-style-type: none"> From the sampled schools, check 	1	<ul style="list-style-type: none"> The School Management Committees for the 4 sampled schools (Kagote, Kahungu Bunyonyi,

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
	18	LG Education department has ensured that guidelines on environmental management are disseminated and complied with (Maximum 3 points)	<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 points 	<ul style="list-style-type: none"> ▪ From MEO obtain and review: <ul style="list-style-type: none"> ✓ Circulars to schools ✓ Minutes of meetings with teachers ✓ Sample of schools inspection reports to schools ▪ From Environmental officer obtain and review: Filled screening forms to ascertain whether screening was done and whether risks mitigation plans were developed. ▪ From the Environmental officer and CDO obtain and review: Site visit reports to establish whether they checked compliance to the risk mitigation plans 	0	<ul style="list-style-type: none"> ▪ There was no evidence that LG Education department issued guidelines on environmental management. ▪ No meetings were held in which the guidelines were disseminated. ▪ There were no circulars on file at the environmental officer's office communicating environmental management activities to schools.
Total					37	