

13.1 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>	6	Out a total of 45 established position, 37 are filled, representing 82% of the established positions. The Municipality is striving to upgrade 3 HC II to HC III. In addition, Uganda Cares supported recruitment and payment of salaries for two staff members for each of the 3 HC (Kyabakuza HC, MIMC Hill) and Nyendo HC II.
	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) 	0	<ul style="list-style-type: none"> • The plan was made available during the exit meeting. A review of the plan revealed that it was not a recruitment plan. • The submission was staffing status that shows filled position and staffing gap. It does not show what cadre of staff was planned to be recruited
	3.	The LG Health department has	Evidence that all health facility in-charges have	<ul style="list-style-type: none"> • From the LG HR department, obtain 	4	<ul style="list-style-type: none"> ▪ All In-Charges were appraised, during the FY 2017/18

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		conducted 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)	been appraised during the previous FY (2017/18): <ul style="list-style-type: none"> ▪ 100%: score 8 points ▪ 70 – 99%: score 4 points ▪ Below 70%: score 0 	and review a sample of in-charge personnel files to determine whether they were appraised during the previous FY (2017/18).		<ul style="list-style-type: none"> ▪ However we identified the following challenges; <ul style="list-style-type: none"> ○ Due attention is not given to the output areas being assessed. There is a miss-match between the plan output targets and what is actually assessed. The assessment is not informed by the plan output targets. ○ Also there are no efforts made to establish whether the performance output targets as listed by the staff were actually realised. For example, where Kyabakuzza HC III In-Charge reported to have conducted 12 Continuing Medical Education (CME) session, yet there were only 2 CMEs conducted in 2018 on 14th May 2018 and 11th June 2018. <p>Annex 3 provides the details out our findings out of the review of appraisal reports on personnel files.</p>
	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. 	0	Substantial information to assess this measure was not provided by the MLG.
(B) Monitoring	5.	The MHO has effectively	<ul style="list-style-type: none"> ▪ Evidence that the MHO has communicated all 	<ul style="list-style-type: none"> ▪ From MOH obtain guidelines, policies, 	3	The policy guidelines are distributed by the MOH through the DHO or the NMS. The Municipal Health Office has

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and supervision (Maximum 32 points)		communicated and explained guidelines, policies, circulars issued by the national level in the previous FY (2017/18) to health facilities (Maximum 6 points)	guidelines, policies, circulars issued by the national level in the previous FY (2017/18) to health facilities: score 3 points	<p>circulars issued by the national level in the previous FY (2017/18) to health facilities (MoH to prioritize the documents to be reviewed)</p> <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>	0	<p>very limited role in the distribution of the policy guidelines. The following guidelines were found at the facilities visited:</p> <ul style="list-style-type: none"> Uganda Clinical Guidelines, 2016 Essential Medicines and health supplies for Uganda, 2016 Introduction to Rota virus vaccines into routine immunisation, Training Field Guide for Operational Level Health Workers, MOH, 2018. The Quality Improvement Methods , A Manual for Health Workers in Uganda, Sector Grants and Budgets Guidelines 2017/18, MOH Consolidated Guidelines for Prevention and Treatment of HIV in Uganda, 2016. Consolidated guidelines for prevention and treatment of HIV in Uganda, MOH, 2016 (At Nyendo HC III) Service Standards and service delivery standards for the health sector (at Nyendo HC III) Surveillance of adverse events following immunisation; Basic concepts of vaccines and adverse events following immunisation.
			<ul style="list-style-type: none"> Evidence that the MHO has held meetings with health facility in-charges and among others explained the 	<ul style="list-style-type: none"> From the MHO obtain and review minutes and/or other evidence of meetings with health 	0	<p>There was no evidence presented to show that the MHO held a meeting with In- Charges to explain guidelines, policies and circulars. We established the following contrary to the requirement in the measure:</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 PNFPS 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>facility in-charges in the previous FY (2017/18).</p> <ul style="list-style-type: none"> Check from a sample of 5 health facilities <p>From the MHO obtain:</p> <ul style="list-style-type: none"> The LG support supervision reports (quarterly) Minutes of MHT meeting. Facility records <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 	<p>3</p>	<ul style="list-style-type: none"> Kyabakuzza HC II carried out CME on Family Planning and Data Use guidelines (14th May 2018) and on components of vaccines (1st June 2018). At MMC HC carried 4 CME but were all on specific treatment topics or health care service delivery topics and not policy guidelines. There was on specific arrangement of programme made to explain the policy documents to the In-Charges. <p>Masaka Municipality does not have HC. IV. All the health facility under the mandate of the Municipality are HC. II</p>
					0	<p>A detailed review of the support supervision reports presented shows the following:</p> <ul style="list-style-type: none"> The layout of all the supervision reports for FY 2017/18 is the same as the layout for the FY 2016/17 supervision reports The support supervision objectives were acutely the same as for 2016/17 The findings of the support supervision are almost the same for each health facility during 2016/17 and 2017/18 The action points are almost the same for each health centre during 2016/17 and 2017/18 <p>Annex 4 provides details of the quarterly support supervision objectives, findings, and action points for four health facilities. All the above raise concern as to whether the supervisions were undertaken and thus the score of 0</p>

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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: score 4 points 	<ul style="list-style-type: none"> From the MHO obtain and review: <ul style="list-style-type: none"> Support supervision and monitoring visit reports Minutes of quarterly meetings Minutes of monthly MHT meetings From the sampled health facilities, determine whether the Health department provided recommendations from the supervision visits and followed up. 	0	Meeting of In-Charges were held on 21 st December 2017, 29 th March 2018 and 4 th May 2018. For all these meetings, the agenda did not include reviewing and discussing support supervision findings and recommendation. There is no documentation to show that support supervision reports were reviewed and discussed.
	8.	The LG Health department has submitted accurate/ consistent reports/ data for health facility lists receiving PHC funding as per formats provided by MoH (Maximum 10 points)	<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	HMIS reports for the current FY (2018/19) were not availed by MoH, as such this area could not be assessed.

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<p>(C) Governance, transparency, and accountability <i>(Maximum 14 points)</i></p>	9.	<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council <i>(Maximum 4 points)</i></p>	<p>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 <i>(2017/18) - score 2 points</i></p>	<p>From the Clerk to Council obtain and review:</p> <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 	2	<p>The Social Service Committee is responsible for Health. The Committee met five times during 2017/18. Health delivery issues were presented and discussed during 4 of the five meetings held.</p> <p>Meeting of 24th August 2017</p> <ul style="list-style-type: none"> • There were no issues presented and discussed on health <p>Committee meeting of 31st October 2017</p> <ul style="list-style-type: none"> • Health service financing, achievements and challenges • Committee resolved to lobby for transport means, equipping of health centres, opening boundaries of mortuary/land and tending garbage collection. • The Committee also wanted to understand TORs for HUMC members • Directed the Health to develop strategies for managing the mortuary and present to Committee for approval <p>Committee meeting of 13th Nov 2017</p> <ul style="list-style-type: none"> • Compile a comprehensive performance of health enforcement (cases related to health) • Joint inspection of school with the education Dept. to avoid miss understanding <p>Committee meeting of 22nd January 2018</p> <ul style="list-style-type: none"> • Garbage management • Upgrading of health facilities and which should be followed • Garbage collection be tended • Fencing of Kitabazi HC be provided for • Medical examination of food handlers, which must be done • Staff must always be in uniform once at the facility • Drainage at yellow knife be work on by the MC

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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 Council met six times during 2017/18. Health issues were presented in the 4 out of the six Council meetings as indicated below;</p> <p>Council Meeting Held on 28th September 2017;</p> <ul style="list-style-type: none"> On Garbage collection and management: Council resolved to have Division with hold a % of property tax monies withheld to facilitate garbage collection and management <p>Council Meeting Held on 12th Dec ember2017;</p> <ul style="list-style-type: none"> No health issues <p>Council Meeting held on 4th January 2018;</p> <ul style="list-style-type: none"> Council was dedicated to the former Mayor John Tebyasa Matovu <p>Council Meeting Held on 13th February 2018;</p> <ul style="list-style-type: none"> Passed an MOU with MPS – Netherland for the renovation of the mortuary Approval of the supplementary budget for the staff seconded to the MC by Uganda Cares The Council adopted recommendation of the Social Service Committee which Included <ul style="list-style-type: none"> Mandatory Medical examination of all Food handlers Closure of all illegal slaughter Houses Opening Boundaries for the Cemetary land <p>Council Meeting Held on 15th March 2018;</p> <ul style="list-style-type: none"> Laying of the Budget and Work plan, which also included budget and Plan for Health

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	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 	6	Health Unit Management Committees held meetings as follows: <ul style="list-style-type: none"> ▪ Kyabakuzza HC II held 3 meetings on 22nd September 2017, 4th December 2017 and 30th May 2018. ▪ Masaka Municipality HC II held 3 meetings on 21st December 2017 and 16th March 2018Nyendo HC II held 3 meetings on 17th November 2017, 21st December 2017 and 16th March 2018 ▪ Kitabazi HC II; minutes not accessed
	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 	3	The health facilities receiving PHC funds were pinned at the notice board of the MHO and at the facility notice boards.

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(D) Procurement and contract management <i>(Maximum 8 points)</i>	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 <i>(Maximum 4 points)</i>	<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 (2018/19) - 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 	0	<ul style="list-style-type: none"> Masaka LG Health Department Procurement Plan 2018/2019 was prepared by Municipal Health Officer, Maba Musa on 19th June 2018, approved by Head of Department and submitted to Namugga Gorreth Head of Department, Procurement & Disposal Unit after 30th April 2018, on 19th June 2018. The investment item – supply of medical equipment and upgrade of Nyendo HC III were embedded within the budget in the approved health sector annual work plan. There was no LG PP Form 5 submitted to the PDU at the time of assessment due to unconfirmed sources of funding.
	13	The LG Health department has certified and initiated payment for supplies on time <i>(Maximum 4 points)</i>	<ul style="list-style-type: none"> Evidence that the MHO (as per contract) certified and recommended suppliers timely for payment- score 4 points 	<ul style="list-style-type: none"> From the CFO obtain a sample of contracts, review and determine whether payment requests were certified and recommended on time 	4	<p>The MLG Health department certified (within 28 days) and initiated payment (within 30 days) for works/services on time. We sampled and reviewed two contracts as detailed below:</p> <p>Contract between St Jude Electrical and Medical Equipment Limited dated 4th April 2018 to supply medical equipment to maternity ward of Kyabakuzza H/C;</p> <ul style="list-style-type: none"> The payment requests made by St Jude Electrical and Medical Equipment Limited for the supply of medical equipment was recommended for payment on time. The supplier delivered the equipment on 31st May 2018 as evidenced in the Delivery Note 033 and 034. The supplier submitted claim for payment on 31st May 2018 for sum USHS. 25,721,800 as per invoice number 204

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(E) Financial management and reporting	14	The LG Health department has submitted annual reports (including	<ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous 	<ul style="list-style-type: none"> From the Planning Unit, obtain and review performance report 	0	<ul style="list-style-type: none"> and a letter dated 7th June 2018 requesting for payment. The supplies were inspected and certified on 12th June 2018 by the Principal Medical Officer. Payment was recommended on the same date by the Principal Medical Officer. <p>Contract between Suzza Construction Company Limited and Masaka Municipal Council dated 28th February 2018 for Completion of maternity ward at Kyabakuzza Health Centre II;</p> <ul style="list-style-type: none"> The payment requests made by Suzza Construction Company Limited for the completion of maternity ward at Kyabakuzza Health Centre II was recommended for payment on time. The contractor completed first phase of works on 9th April 2018 and submitted a request for payment of USHS. 30,764,724 on the same date. Works were inspected and certified by the Principal Executive Engineer on 12th April 2018. The recommendation for payment was made on 19th April 2018 by the Senior Town Clerk. Second phase of works were completed on 6th June 2018 and the contractor submitted a request for payment of USHS. 13,167,682 on the same date. The works were certified by the Principal Executive Engineer on 11th June 2018 and recommendation for payment was made on the same date by the Senior Assistant Town Clerk. <ul style="list-style-type: none"> For the FY 2017/18, the Planning unit was using PBS. The departmental head for health had access to PBS and input their departmental figures after which the Planner would receive an email

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(Maximum 8 points)		all quarterly reports) in time to the Planning Unit (Maximum 4 points)	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"> files from the MHO check annual and quarterly reports for the previous FY (2017/18) 		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 Masaka 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 points If all queries are not responded to - score 0 	<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 health department had several issues raised in the quarterly internal audit reports for the FY 2017/18 and responses were not provided to all issues as shown below hence the score zero:</p> <table border="1"> <thead> <tr> <th>Quarter</th> <th>Query</th> <th>Responses</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Unaccounted for funds for internal assessment for the FY 2016/17 of USHS. 2,350,000 by Maberri Musa</td> <td>Accounted for USHS. 2,350,000</td> </tr> <tr> <td></td> <td>Unaccounted for funds of USHS. 900,000 for garbage disposal & maintenance of disposal site</td> <td>No action taken</td> </tr> <tr> <td></td> <td>Unaccounted for funds of USHS. 380,000 for fumigation of TC's residence</td> <td>No action taken</td> </tr> <tr> <td>2</td> <td>Failure to account for PHC funds of USHS. 1,880,000</td> <td>Incomplete</td> </tr> <tr> <td></td> <td>Unaccounted for funds of USHS. 4,000,000 for facilitation for keeping Masaka clean advanced to Maberri Musa</td> <td>No action taken</td> </tr> </tbody> </table>	Quarter	Query	Responses	1	Unaccounted for funds for internal assessment for the FY 2016/17 of USHS. 2,350,000 by Maberri Musa	Accounted for USHS. 2,350,000		Unaccounted for funds of USHS. 900,000 for garbage disposal & maintenance of disposal site	No action taken		Unaccounted for funds of USHS. 380,000 for fumigation of TC's residence	No action taken	2	Failure to account for PHC funds of USHS. 1,880,000	Incomplete		Unaccounted for funds of USHS. 4,000,000 for facilitation for keeping Masaka clean advanced to Maberri Musa	No action taken
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(F) Social and environment safeguards <i>(Maximum 12 points)</i>	16	Compliance with gender composition of Health Unit Management Committee (HUMC) and promotion of gender sensitive sanitation in health facilities. <i>(Maximum 4 points)</i>	<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"> Kyabakuzza HC II – Committee is in place composed of 5 members with 4 women and 1 man, meeting required minimum 30% women Composition. Nwendo HC II - Committee is in place composed of 5 members with 4 women and 1 man, meeting required minimum 30% women Composition. Masaka Municipal HC II - Committee is in place composed of 5 members with 3 women and 2 men, meeting the required minimum 30% women.
						<p>was not accounted for</p>
						<p>4 Unaccounted for funds of USHS. 1,650,000 advanced to Kabyanga J</p> <p>Accounted for USHS. 1,650,000</p>
	17	LG Health department has ensured that	<ul style="list-style-type: none"> Evidence that all health facility infrastructure projects are screened 	<ul style="list-style-type: none"> From the Environmental officer obtain and 	2	<ul style="list-style-type: none"> All health facility infrastructure projects in 2017/18 (Construction of maternity building at Kasana H/C II and renovation of maternity buildings Kyabakuzza H/C II and

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	18	The LG Health department has issued guidelines on medical waste management (Maximum 4 points)	<ul style="list-style-type: none"> ▪ before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: score 2 points ▪ The environmental officer and community development officer have visited the sites to check whether the mitigation plans are complied with: score 2 points 	<ul style="list-style-type: none"> • 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 	4	From the sampled health facilities, there were medical waste management guidelines in form of posters and charts displayed at various locations around the facilities.
			<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 	43	
Total						

13.2 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. 	4	The staff list was obtained from the MEO and reviewed. At least 7 teachers and one head teacher had been deployed in each of the 13 schools. A sample of 5 schools was randomly selected and visited. It was noted that the number of teachers in the school was more than the required minimum of 7 teachers and one head teacher, as shown in the table below: <table border="1" data-bbox="316 1407 657 2026"> <thead> <tr> <th>School</th> <th>Teachers deployed</th> <th>Staff list</th> </tr> </thead> <tbody> <tr> <td>Blessed Sacrament Kimanya P/S</td> <td>17</td> <td>18</td> </tr> <tr> <td>Hill Road P/S</td> <td>29</td> <td>28</td> </tr> <tr> <td>Ssenyange Public P/S</td> <td>8</td> <td>8</td> </tr> <tr> <td>Masaka Police P/S</td> <td>10</td> <td>11</td> </tr> <tr> <td>St. Bruno Ssaza P/S</td> <td>11</td> <td>13</td> </tr> </tbody> </table>	School	Teachers deployed	Staff list	Blessed Sacrament Kimanya P/S	17	18	Hill Road P/S	29	28	Ssenyange Public P/S	8	8	Masaka Police P/S	10	11	St. Bruno Ssaza P/S	11	13
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<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 																							

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
	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 	<p>indicated in the staff lists are actually deployed in the schools.</p> <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>	6	<p>The performance contract 2018/19 was reviewed. 172 teachers out of 174 teachers (98.8%) had been budgeted for a wage bill provision of 1,167,176,000.</p> <ul style="list-style-type: none"> However, there were efforts of recruitment. A submission of vacant positions was made to the Masaka district commission including one head teacher and 2 teachers (education assistants). In addition, there were efforts to increase the staff ceiling from by 84 teachers (which required increase of wage bill provision) due to increased enrolment of pupils in the government aided schools. No response had been received from ministry of finance.
	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	<p>The approved staff structure for the MLG was awaited for review. According to the approved structure, the MLG requires one inspector.</p> <p>We noted that the MLG had one inspector of schools, Mrs Beatrice Nalugwa Sseekiwunga, who was substantively appointed on 26th June 2006.</p>
	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	<p>The 2018/19 recruitment plan was obtained and reviewed, and it included the vacant positions of teachers.</p>

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
(B) Monitoring and inspection (Maximum 35 points)	6.	The Municipal LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY (2017/18) to schools (Maximum 3 points)	<ul style="list-style-type: none"> 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 - score 1 point 	<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 obtain evidence that s/he communicated guidelines, policies, circulars to schools. From the sampled schools, check whether the guidelines, policies, circulars were received. 	0	<p>In minute Min. 7 of a meeting with head teachers held on 12th October 2017, a circular on legalising schools was communicated. However, none of the Circular, guidelines, policies from National level were found at the sampled schools.</p> <p>Therefore there was no evidence of communication of the Circular, guidelines, policies from National level to the schools, and so the score is zero.</p>
			<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> From the MEO obtain and review minutes and/or other evidence of the meetings with Head Teachers 		

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	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 during the previous FY (2017/18) 	0	<p>Inspection reports were obtained and reviewed. It was noted that the inspection reports were summarised and did not include a list of schools inspected in the quarter and the dates of inspection.</p> <p>A sample of 5 government aided schools and 5 private schools was randomly selected. Inspection feedback reports were reviewed as evidence of inspection for each of the sampled schools.</p> <p>It was noted that no feedback reports of any of the sampled private schools were availed for review, and so there was no evidence of inspection of private schools.</p> <p>Based on the review of inspection feedback reports for the sampled government aided schools, there was no evidence of termly inspection of any of the sampled schools (some were inspected in one term out of three, others were inspected in 2 terms out of three) as shown in the table below:</p> <table border="1"> <thead> <tr> <th>School</th> <th>Date of inspection</th> <th>Period (term)</th> </tr> </thead> <tbody> <tr> <td>Blessed Sacrament</td> <td>20/09/2017</td> <td>2017 Term 3</td> </tr> <tr> <td>Kimaanya P/S</td> <td>06/06/2018</td> <td>2018 Term 2</td> </tr> <tr> <td>Hill Road P/S</td> <td>21/09/2017</td> <td>2017 Term 3</td> </tr> <tr> <td></td> <td>29/06/2018</td> <td>2018 Term 2</td> </tr> <tr> <td>St. Bruno Ssaza P/S</td> <td>25/09/2017</td> <td>2017 Term 3</td> </tr> <tr> <td></td> <td>16/06/2018</td> <td>2018 Term 2</td> </tr> <tr> <td>Masaka Police P/S</td> <td>04/10/2017</td> <td>2017 Term 3</td> </tr> <tr> <td>Ssenyange Public P/S</td> <td>02/10/2017</td> <td>2017 Term 3</td> </tr> </tbody> </table>	School	Date of inspection	Period (term)	Blessed Sacrament	20/09/2017	2017 Term 3	Kimaanya P/S	06/06/2018	2018 Term 2	Hill Road P/S	21/09/2017	2017 Term 3		29/06/2018	2018 Term 2	St. Bruno Ssaza P/S	25/09/2017	2017 Term 3		16/06/2018	2018 Term 2	Masaka Police P/S	04/10/2017	2017 Term 3	Ssenyange Public P/S	02/10/2017	2017 Term 3
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	8.	Municipal LG Education department has	<ul style="list-style-type: none"> ▪ Evidence that the Education department has discussed school 	<ul style="list-style-type: none"> ▪ From the MEO obtain and review minutes of 	0	From the MEO, minutes of Departmental meeting held on 18 th September 2017 were obtained and reviewed. Under minute Min.04/DM/09/2017, the inspector of schools																											

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		discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations (Maximum 10 points)	inspection reports and used reports to make recommendations for corrective actions during the previous FY (2017/18) - score 4 points	departmental meetings to determine whether school inspection reports were discussed and used to make recommendations for corrective actions during the previous FY (2017/18).	0	presented a report to the members. No other departmental minutes were availed for review. Since only one inspection report was discussed, the score is zero.
			<ul style="list-style-type: none"> 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 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 	4	<p>From the DES headquarters, we obtained and reviewed lists of LGs that had submitted school inspection reports in FY 2017/18. It was noted that Masaka LG was not on the list. From the MEO no acknowledgment forms from the DES were availed for review, and so there was no evidence of submission of any quarterly inspection reports to the DES.</p> <p>There was evidence that inspection recommendations were followed up.</p> <ul style="list-style-type: none"> About absenteeism of teachers, warning letters were issued to undisciplined teachers. We reviewed a letter dated 04/04/2018 written to Nabachwezi Prossy, the head teacher of St. Paul Kitovu P/S. In the meetings with head teachers dated 18th September 2017, the head teachers were advised to keep records about teachers' attendance as evidence to present for disciplinary action. Each of the schools visited had a teacher's attendance register.
			<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. 		

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
						<ul style="list-style-type: none"> Head teachers had also been advised to track teacher's time on duty and make monthly reports on the same to the MLG education department. For all the 5 sampled schools, we noted that monthly reports were submitted to the MLG education department regarding teacher's time on duty. Correspondence letters about Mr. Nsamba Paul, a teacher at St. Bruno Ssaza P/S (who was constantly absent at school), were found at the school and at the municipal education department.
	9.	The Municipal LG Education department has submitted accurate/consistent reports/date for school lists and enrolment 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"> ✓ Enrolment 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. 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 enrolment levels are consistent/similar. 	0	<ul style="list-style-type: none"> From MoES, the EMIS report was not availed for review. We obtained and reviewed the performance contract for 2018/19, which indicated 12 government-aided schools submitted in PBS. Masaka Police Children's Primary School was not included, due to name mismatch on entering data in PBS. <p>Based on the above we were unable to ascertain the level of consistency of information submitted in PBS and the EMIS reports.</p>
			<ul style="list-style-type: none"> Evidence that the Municipal LG has submitted accurate/consistent data: <ul style="list-style-type: none"> ✓ Enrolment 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 enrolment levels are consistent/similar. 	0	<p>The EMIS report from MoES were not availed for review. We obtained and reviewed the performance contract for 2018/19, which indicated an enrolment of 15,984 pupils in the 12 government-aided schools on the submitted list. Based on the above we were unable to ascertain the level of consistency of information submitted in PBS and the EMIS reports.</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 	2	Minutes of the sectoral committee for social services were reviewed and there was evidence of discussion of education service delivery issues as shown in the table below:								
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30 th April 2018	MIN.03/SOS/02/2018: Budget discussion, Min.04/EDU/02/2018: primary schools understaffing													
			<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. 	2	Minutes of council meetings were reviewed and there was evidence of presentation of education issues that required approval to Council, as shown in the table below:								
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	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 	3	<table border="1"> <thead> <tr> <th>School</th> <th>Date of meeting</th> <th>SMC meeting</th> <th>Period (term)</th> </tr> </thead> <tbody> <tr> <td rowspan="5">Blessed Sacrament Kimaanya P/S</td> <td>13/06/2018</td> <td>2018 term 2</td> <td></td> </tr> <tr> <td>15/02/2018</td> <td>2018 term 1</td> <td></td> </tr> <tr> <td>05/12/2017</td> <td>2017 term 3</td> <td></td> </tr> <tr> <td>05/10/2017</td> <td>2017 term 3</td> <td></td> </tr> <tr> <td>06/09/2017</td> <td>2017 term 3</td> <td></td> </tr> <tr> <td rowspan="3">Hill Road P/S</td> <td>14/07/2017</td> <td>2017 term 2</td> <td></td> </tr> <tr> <td>09/06/2018</td> <td>2018 term 2</td> <td></td> </tr> <tr> <td>02/03/2018</td> <td>2018 term 1</td> <td></td> </tr> <tr> <td rowspan="3">St. Bruno Ssaza P/S</td> <td>12/11/2017</td> <td>2017 term 3</td> <td></td> </tr> <tr> <td>02/02/2018</td> <td>2018 term 1</td> <td></td> </tr> <tr> <td>14/07/2017</td> <td>2017 term 2</td> <td></td> </tr> <tr> <td rowspan="2">Ssenyange Public P/S</td> <td>01/10/2017</td> <td>2017 term 3</td> <td></td> </tr> <tr> <td>09/03/2018</td> <td>2018 term 1</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td> <table border="1"> <tbody> <tr> <td>17th May 2018</td> <td>expenditure estimates for July 2018/19 work plans</td> </tr> <tr> <td></td> <td>OUL/005/MAY, 2018</td> </tr> <tr> <td></td> <td>Approval of revised estimates for 2017/18, draft revenue and expenditure estimates and work plan 2018/19</td> </tr> </tbody> </table> <p>Minutes of SMC meetings were reviewed for the 5 sampled schools. It was noted that 4 out of 5 sampled schools (80%) had held 3 mandatory SMC meetings. There was no evidence that Masaka Police P/S held an SMC meeting in 2018 term 1, as shown in the table below;</p> </td> </tr> </tbody> </table>	School	Date of meeting	SMC meeting	Period (term)	Blessed Sacrament Kimaanya P/S	13/06/2018	2018 term 2		15/02/2018	2018 term 1		05/12/2017	2017 term 3		05/10/2017	2017 term 3		06/09/2017	2017 term 3		Hill Road P/S	14/07/2017	2017 term 2		09/06/2018	2018 term 2		02/03/2018	2018 term 1		St. Bruno Ssaza P/S	12/11/2017	2017 term 3		02/02/2018	2018 term 1		14/07/2017	2017 term 2		Ssenyange Public P/S	01/10/2017	2017 term 3		09/03/2018	2018 term 1								<table border="1"> <tbody> <tr> <td>17th May 2018</td> <td>expenditure estimates for July 2018/19 work plans</td> </tr> <tr> <td></td> <td>OUL/005/MAY, 2018</td> </tr> <tr> <td></td> <td>Approval of revised estimates for 2017/18, draft revenue and expenditure estimates and work plan 2018/19</td> </tr> </tbody> </table> <p>Minutes of SMC meetings were reviewed for the 5 sampled schools. It was noted that 4 out of 5 sampled schools (80%) had held 3 mandatory SMC meetings. There was no evidence that Masaka Police P/S held an SMC meeting in 2018 term 1, as shown in the table below;</p>	17 th May 2018	expenditure estimates for July 2018/19 work plans		OUL/005/MAY, 2018		Approval of revised estimates for 2017/18, draft revenue and expenditure estimates and work plan 2018/19
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(D) Procurement and contract management (Maximum 7 points)	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 	3	<p>The municipal noticeboard had a display of list of schools receiving non-wage recurrent grant for 2017 and 2018. However, the list did not include the amounts receivable by each school in the term/quarter.</p> <p>The 5 sampled schools were visited and it was noted that they all had the funds received displayed in the head teacher's office or the staff room.</p>
	13	The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements, to Procurement Unit that cover all	<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; From DPU crosscheck submission from MEO 	0	<ul style="list-style-type: none"> Masaka LG Education Department Procurement Plan 2018/2019 was prepared by Inspector of Schools, Beatrice Sesekiwunga, approved by Head of Department and submitted to Head of the Procurement and Disposal Unit (PDU) on 5th June 2018, which was after date of 30th April 2018. Investment items, Procurement and Installation of lightning aretors, construction of teacher's house at St Henrys Kitovu Mixed P/S, Rehabilitation of a

Masaka Police P/S	28/07/2017	2017 term 2
	08/06/2018	2018 term 2
	06/10/2017	2017 term 3

Note:

Ssenyange Public P/S held a term 2 meeting in the FY 2016/17 on 5th May 2017, and the 2018 term 2 meeting minutes were not ready, as the meeting was held in August 2018 (FY 2018/19).

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
		items in the approved Sector annual work plan and budget (Maximum 4 points)				classroom block St Kitovu P/S and procurement of desks and teacher's tables at Kyimbwe P/S was captured in the Procurement Plan and Health Department Work plan & Budget
	14	The LG Education department has certified and initiated payment for supplies on time (Maximum 3 points)	<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 	<ul style="list-style-type: none"> From the CFO obtain a sample of contracts, review and determine whether payment requests were certified and recommended on time 	3	<p>MIMLG Education department certified (within 28 days) and initiated payment (within 30 days) for works on time as summarised below;</p> <p>Contract between Muma Construction Limited and Masaka Municipal Council dated 28 February 2018 for Renovation of a 4 classroom block at St. Paul Kitovu P/S</p> <ul style="list-style-type: none"> The request for payment by Muma Construction Limited for the renovation of 4 classroom block at St Paul Kitovu P/S was certified and recommended on time. The contractor completed first phase of works on 23rd April 2018 and submitted their claim for payment on the same date for sum USHS. 47,041,431 The works were inspected and certified by Principal Executive Engineer on 23rd April 2018 and recommendation for payment was made on the same date by the Principal Executive Engineer. Second phase of works were completed on 12th June 2018 and claim for payment for sum USHS. 10,075,608 was submitted on the same date. Works were inspected and certified by Principal Executive Engineer on 13th June 2018. Recommendation for payment was done on 13th June 2018 by the Principal Executive Engineer.

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
(E) Financial management and Reporting (Maximum 8 points)	15	The LG Education 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 (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 	0	<ul style="list-style-type: none"> For the FY 2017/18, the Planning unit was using PBS. The departmental head for education had access to PBS and input their departmental figures after which the Planner would receive an email notification from the PBS system though there was no evidence of submission. <p>However, we noted that the two quarterly performance reports (quarter 1 and 2) included input from the education department and Masaka MLG annual</p> <ul style="list-style-type: none"> The works were inspected and certified by Senior Assistant Engineering Officer 11th June 2018 and recommendation for payment was made on 14th June 2018 by the Principal Executive Engineer. The contractor completed first phase of works on 9th April 2018 and submitted the claim for payment on the same date for sum USHS. 14,385,793. The works were inspected and certified by Principal Executive Engineer on 12th April 2018 and recommendation for payment was made on 12th April 2018 by the Principal Executive Engineer. Second phase of works were completed by the contractor on 6th June 2018 and they submitted the claim for payment on the same date for sum USHS. 5,720,994 The works were inspected and certified by Senior Assistant Engineering Officer 11th June 2018 and recommendation for payment was made on 14th June 2018 by the Principal Executive Engineer. <p>Contract between Suzza Construction Company Limited and Masaka Municipal Council dated 28 February 2018, Construction of 5 stance pit latrine at Gayaza P/S;</p> <ul style="list-style-type: none"> The request for payment by Suzza Construction Company Limited for the construction of lined 5 stance pit latrine at Gayaza P/S was certified and recommended on time. The contractor completed first phase of works on 9th April 2018 and submitted the claim for payment on the same date for sum USHS. 14,385,793. The works were inspected and certified by Principal Executive Engineer on 12th April 2018 and recommendation for payment was made on 12th April 2018 by the Principal Executive Engineer. Second phase of works were completed by the contractor on 6th June 2018 and they submitted the claim for payment on the same date for sum USHS. 5,720,994 The works were inspected and certified by Senior Assistant Engineering Officer 11th June 2018 and recommendation for payment was made on 14th June 2018 by the Principal Executive Engineer.

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings															
	16	LG Education has acted on Internal Audit recommendations (if any) (Maximum 4 points)	<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 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"> ▪ From the Internal Auditor obtain copies of sector audit reports from the internal audit and Management responses for the previous FY (2017/18) 	2	<p>The education department had several issues raised in the quarterly internal audit reports that were addressed by the department as shown below hence the score 2:</p> <table border="1"> <thead> <tr> <th>Quarter</th> <th>Query</th> <th>Responses</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Unaccounted for funds of USHS. 15,942,200 for facilitation for municipal games & national ball games</td> <td>Accounted for USHS. 15,942,200.</td> </tr> <tr> <td>2</td> <td>Failure to utilise the classroom block at Nyendo public school and slow progress of rectifications</td> <td>Addressed</td> </tr> <tr> <td>3</td> <td>Absence of hand washing facilities in schools.</td> <td>Addressed</td> </tr> <tr> <td>4</td> <td>No issue raised</td> <td></td> </tr> </tbody> </table>	Quarter	Query	Responses	1	Unaccounted for funds of USHS. 15,942,200 for facilitation for municipal games & national ball games	Accounted for USHS. 15,942,200.	2	Failure to utilise the classroom block at Nyendo public school and slow progress of rectifications	Addressed	3	Absence of hand washing facilities in schools.	Addressed	4	No issue raised	
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4	No issue raised																				
						performance report for the FY 2017/18 was not submitted to MoFPED before the deadline of 30th August 2018															

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
(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"> 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 MEO obtain evidence on dissemination of sanitation guidelines and awareness raising on how to manage sanitation for girls and PWDs in primary schools 	0	There was no evidence from the MEO to show that sanitation guidelines and awareness raising on how to manage sanitation for girls and PWDs in primary schools were disseminated.
			<ul style="list-style-type: none"> Evidence that the School Management Committee meet the guideline on gender composition - score 1 point 	<ul style="list-style-type: none"> From the sampled schools, check whether the SMC meets the guideline on gender composition 	1	The School Management Committees for the sampled schools were duly composed with at least 2 females, following the guidelines in the Education (pre-primary, primary and Post Primary) Act, 2008 <ul style="list-style-type: none"> Masaka Police Children's School – Committee is composed with 6 women and 6 men, meeting required minimum at least 2 females on the SMC committee. Blessed Sacrament Kimanya Primary School - Committee is composed with 6 women and 6 men

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 environmental 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 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"> ▪ meeting required minimum at least 2 females, on the SMC committee. ▪ Hill Road Public Schools- Committee is composed with 4 women and 8 men, meeting required minimum at least 2 females on the SMC committee. <p>There was no evidence showing that LG Education department issued guidelines on environmental management.</p> <p>There were no circulars on file at the environmental officer's office communicating environmental management activities to schools.</p>
Total					43	