



## Local Government Performance Assessment

Amolatar District

(Vote Code: 564)

Assessment	Scores
Accountability Requirements	17%
Crosscutting Performance Measures	29%
Educational Performance Measures	62%
Health Performance Measures	81%
Water Performance Measures	73%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Annual performance contract			
<p>LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.</p>	<ul style="list-style-type: none"> <li>• From MoFPED's inventory/schedule of LG submissions of performance contracts, check dates of submission and issuance of receipts and:               <ul style="list-style-type: none"> <li>o If LG submitted before or by due date, then state 'compliant'</li> <li>o If LG had not submitted or submitted later than the due date, state 'non-compliant'</li> </ul> </li> <li>• From the Uganda budget website: <a href="http://www.budget.go.ug">www.budget.go.ug</a>, check and compare recorded date therein with date of LG submission to confirm.</li> </ul>	<p>The LG submitted an Annual Performance Contract on 12th August 2018 as per the schedule of submission obtained from the MoFPED. For this matter Amolatar District submission was outside the official date of 1st August, 2018 declared by the Ministry of Finance.</p>	No
Supporting Documents for the Budget required as per the PFMA are submitted and available			
<p>LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY by 30th June (LG PPDA Regulations, 2006).</p>	<ul style="list-style-type: none"> <li>• From MoFPED's inventory of LG budget submissions, check whether:               <ul style="list-style-type: none"> <li>o The LG budget is accompanied by a Procurement Plan or not. If a LG submission includes a Procurement Plan, the LG is compliant; otherwise it is not compliant.</li> </ul> </li> </ul>	<p>The LG submitted a Budget that includes a Procurement Plan for the forthcoming FY on 12th August, 2018 as per the submission schedule obtained from the MoFPED. However, this dated of the District submission was outside the date of 1st August 2018 set by the Ministry of Finance.</p>	No
Reporting: submission of annual and quarterly budget performance reports			

<p>LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)</p>	<p>From MoFPED's official record/inventory of LG submission of annual performance report submitted to MoFPED, check the date MoFPED received the annual performance report:</p> <ul style="list-style-type: none"> <li>• If LG submitted report to MoFPED in time, then it is compliant</li> <li>• If LG submitted late or did not submit, then it is not compliant</li> </ul>	<p>Amolatar LG submitted the Annual Performance Report for FY 2017/18 on Sunday, August 12, 2018 well beyond the statutory date of 31st July.</p>	<p>No</p>
<p>LG has submitted the quarterly budget performance report for all the four quarters of the previous FY by end of the FY; PFMA Act, 2015).</p>	<p>From MoFPED's official record/ inventory of LG submission of quarterly reports submitted to MoFPED, check the date MoFPED received the quarterly performance reports:</p> <ul style="list-style-type: none"> <li>• If LG submitted all four reports to MoFPED of the previous FY by July 31, then it is compliant (timely submission of each quarterly report, is not an accountability requirement, but by end of the FY, all quarterly reports should be available).</li> <li>• If LG submitted late or did not submit at all, then it is not compliant.</li> </ul>	<p>Submission of the quarterly budget performance reports during FY 2017/2018:</p> <p>Q1 submitted on 09th February, 2018</p> <p>Q2 submitted on 20th May, 2018</p> <p>Q3 submitted on 20th May, 2018</p> <p>Q4 was not seen</p> <p>Amolatar District submitted quarterly budget performance report for quarters 1, 2 and 3 late. More still the latest schedule of submission of these reports to MoFPED showed that by the assessment date the report for the 4th quarter had not been submitted</p>	<p>No</p>
<p>Audit</p>			

<p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General and the Auditor General's findings for the previous financial year by end of February (PFMA s. 11 2g). This statement includes actions against all findings where the Internal Auditor and the Auditor General recommended the Accounting Officer to take action in line with applicable laws.</p>	<p>From MoFPED's Inventory/record of LG submissions of statements entitled "Actions to Address Internal Auditor General's findings",</p> <p>Check:</p> <ul style="list-style-type: none"> <li>• If LG submitted a 'Response' (and provide details), then it is compliant</li> <li>• If LG did not submit a 'response', then it is non-compliant</li> <li>• If there is a response for all –LG is compliant</li> <li>• If there are partial or not all issues responded to – LG is not compliant.</li> </ul>	<p>The LG provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General's findings for the previous financial year 2016/2017 by end of February, 2018:</p> <p>(A) Internal Auditor General FY 2016/2017. Number of queries raised 56, number of queries cleared 50, number of queries pending 6</p> <p>(B) Office of the Auditor General FY 2016/2017 Number of queries raised were 7. Number of queries cleared 7. Number of queries pending were Nil</p> <p>The LG did not comply to the requirements of this indicator due to late submission of information on the status of implementation of the audit queries which was submitted 29th March, 2018 as opposed to the requirement of not later than February.</p>	<p>No</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.</p>		<p>Amolatar DLG obtained a Qualified "except for" Audit Opinion for FY 2017/2018</p>	<p>Yes</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a district/ municipality has:</p> <ul style="list-style-type: none"> <li>• A functional Physical Planning Committee in place that considers new investments on time: score 1.</li> </ul>	<p>At the time of assessment, Amolatar District Council did not have a Physical Planning Committee in place to consider infrastructure projects for submission to the Council for recommendation for approval by the National Physical Planning Board.</p>	0
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that district/ MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD score 1.</li> </ul>	<p>In the absence a Physical Planning Committee, there was no single set of minutes to be submitted to MoLHUD</p>	0

<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> <li>• All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0</li> </ul>	<p>There was no Physical Development Plan for Amolatar District, at the time of assessment. For this reason consistency between infrastructure investment and the Physical Development Plan could not be established.</p>	<p>0</p>
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> <li>• Action area plan prepared for the previous FY: score 1 or else 0</li> </ul>	<p>Action area plans for FY 2017/18 were not prepared as confirmed by the District Bio-Statistician who stood in for the District Planner during this assessment exercise.</p>	<p>0</p>

<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"><li>• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.</li></ul>	<p>Although the District authorities claimed that a budget conference was held, the District Biostatistician who stood in for the District Planner failed to produce evidence by way of minutes, the attendance list or a report on the outcomes of the conference.</p>	<p>0</p>
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<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If differences appear, a justification has to be provided and evidence provided that it was approved by the Council. Score 1.</li> </ul>	<p>There was evidence that the capital investments in the approved Annual Work Plan in the FY 2018/19 were derived from the approved Five-Year Development Plan as per examples; Construction of 4 stance latrines at Aromi P/S, Amanido P/S, Aburkidi P/S, and Amai Primary School under page 118 of the 5-year DDP and on pages 38-39 of the AWP. Construction of 2 classroom blocks at Abarikori and Atomoro Primary Schools under page 118 of the 5-year DDP and on pages 38-39 of the AWP. Under the health sector, there was construction of Placenta Pits at Amolatar HCIV, indicated on page 115 of the 5-year DDP and on pages 58-59 of AWP.</p>	
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<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2.</li> </ul>	<p>According to explanation given by the District Biostatistician who stood in for the District Planner, the project profiles were never compiled and for this matter, TPC did not discuss anything to this effect.</p>	<p>0</p>
<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> <li>• Annual statistical abstract, with gender-disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum score 1.</li> </ul>	<p>Amolatar District did not have a Statistical abstract in place.</p>	<p>0</p>

<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2</li> </ul>	<p>Infrastructure projects implemented by the LG in the previous FY 2017/2018 were derived from the Annual Work Plan and Budget approved by the LG Council, examples were:</p> <p>Under Health:</p> <p>Construction of 3 stance VIP latrine and 2 washrooms at Amolatar H/C IV on page 45 of AWP and page 115 of 5-year DDP.</p> <p>Under Education:</p> <p>Renovation of 4 classroom block on pages 51, construction of a 2 classroom block at Atomoro P/S page 52, as well as construction of 4 stance latrine at Amanido P/S page 52. These projects appear on 118 of the 5-year DDP</p> <p>Under Works and Water:</p> <p>Rehabilitation of Omali Road on page 58 of AWP and appearing Page 118 of 5 year DDP. There was also construction 2 stance drainable pit latrine Muchora-Adino landing site, drilling and installation of 5 boreholes at Arwotck, Adita Cell, Okwor, Aburkot Cell in Amalator T/C. These appear on page 58 of AWP and pages 118 of 5-year DDP.</p>	<p>2</p>
<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY.</li> </ul> <ul style="list-style-type: none"> <li>o 100%: score 4</li> <li>o 80-99%: score 2</li> <li>o Below 80%: 0</li> </ul>	<p>According to information provided by Works Department, 17 investment projects out of 18, were implemented and completed as per work plan during FY 2017/18. This was 94.4%. However, the rehabilitation of Awello Ojem trading Center was not completed as planned, basically due to the fact that BOQs had to be revised in the subsequent financial year.</p>	<p>2</p>

<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2</li> </ul>	<p>The budget of investment projects was shs.978,032,951 while actual implementation cost was shs.880,365,189. The variance was 9.9% of the original budget. Sampled projects were:</p> <p>Renovation of 4 classroom block at Abarikori Primary School budgeted at Shs.62,149,600 against the actual of Shs.53,286,114</p> <p>ii Procurement and installation of a water harvest tank at Itom H/C III budgetd at Shs.17,000,000 against the actual of Shs.14,501,800</p> <p>iii) Tarmacking/low lost sealing of Bangalala Road budgeted at Shs.174,314,000 and the same for actual cost</p>	<p>2</p>
<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has budgeted and spent at least 80% of the O&amp;M budget for infrastructure in the previous FY: score 2</li> </ul>	<p>The entire budget for O&amp;M in FY 2017/2018 was Shs.5,660,000. Actual expenditure on O&amp;M during the FY Shs.5,660,000, which was a Percentage100%. The evidence presented to PAT on infrastructure O&amp;M covered maintenance of Doors on buildings with a budget of Shs.1,200,000 and an actual of Shs.1,200,000, making it 100% spent under Works Department. There was no evidence of spending O&amp; M budget by other sectors that was seen by PAT.</p>	<p>2</p>
<p>Human Resource Management</p>			

<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has filled all HoDs positions substantively: score 3</li> </ul>	<ul style="list-style-type: none"> <li>• The Customized District Structure approved vide Minute No. COU/21/2016g provides for 10 HoDs.</li> <li>• Only four were substantively filled;</li> </ul> <p>The District Community Development Officer; Mr. Otil Patric, DSC minute No. 13/2015/7 and CAO's Appointment letter Ref. no. HRM/152/2 dated 21st April, 2015</p> <p>The District Production and Marketing Officer; Mr. Ojok Francis, DSC minute No. 13/2015/9 and CAO's Appointment letter Ref. HRM/155/2 dated 21st April, 2015,</p> <p>The District Education Officer; Ms Acen Josphine Atia, DSC minute No. 93/2017/2 and CAO's Appointment letter Ref. HRM/156/171/01 dated 4th January, 2018, and</p> <p>The District Trade, Commerce, Industry and Local Economic Development officer; Mr. Okello Epira, DSC minute No. 106/2017/3.2 and CAO's Appointment letter Ref. HRM/156/171/01 dated 7th February, 2018.</p> <ul style="list-style-type: none"> <li>• The Departments with officers in acting capacities were; District Planner, District Engineer, Chief Finance Officer, Natural Resources Officer, District Health Officer</li> </ul>	<p>0</p>
<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• There was no evidence of appraising HoDs during the FY 2017/2018 using the PS FORM 5.</li> <li>• The performance agreements for HoDs of FY 2017/2018 were neither on staff files nor availed to the assessors.</li> </ul>	<p>0</p>

<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100 % of staff submitted for recruitment have been considered: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• The LG prepared a Recruitment Plan for FY 2017/2018 Letter Ref. HRM/152/01 dated 4th October, 2017 for all the vacancies and submitted it to MOPS on 6th October, 2017.</li> <li>• The MOPS cleared 08 positions on 6th December, 2017 vide letter ARC6/293/05 and was received on 14th October, 2017.</li> <li>• On 16th October, 2017 vide letter CR/156/02, the CAO declared the 08 vacancies to the DSC which included; District Internal Auditor, the District Natural Resources Officer, the District Planner, the Chief Finance Officer, the District Engineer and 13 Parish Chiefs.</li> <li>• The DSC considered all the Vacancies and on Tuesday, December 19, 2017 in the Daily Monitor, the DSC advertised all the Vacancies.</li> <li>• Unfortunately the District was able to attract only the Parish Chiefs and the other positions were still vacant and had staff in acting capacities.</li> </ul>	<p>2</p>
<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100 % of positions submitted for confirmation have been considered: score 1</li> </ul>	<p>29 staff were submitted for confirmation by the DSC and were confirmed as below;</p> <p>On 18th – 19th June, 2018 under minute 21/2018/2.1-2.7 of the 73rd meeting, seven staff were confirmed,</p> <p>On 19th February, 2018 under minute 15/2018/2 of the 72nd meeting, 9 staff were confirmed,</p> <p>On 30th January, 2018 under minute 06/2018/1.1-1.7 during the 71st meeting, six were confirmed,</p> <p>On 5th October, 2017 vide minute 99/2017/4.1.1 – 4.1.7 of the 69th meeting, seven staff were confirmed.</p>	<p>1</p>

<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100 % of positions submitted for disciplinary actions have been considered: score 1</li> </ul>	<ul style="list-style-type: none"> <li>• Two staff were referred to DSC for Disciplinary action during the FY 2017/2018; Okwenyi Onyum Patrick and Okao Peter both Education Assistants on 3rd December, 2017. The two officers were frequently missing from work without official leave</li> <li>• During the 73rd DSC meeting held in the DHO's Board Room, under minutes; 21/2018/8.2 and 21/2018/8.2, the DSC re-instated Okao into service after reprimanding him and Onyum was given a last chance with hope to reform.</li> </ul>	1
<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3</li> </ul>	<p>During the FY2017/2018, seventeen (17) Parish Chiefs were recruited under minute 14/2018/1.1 – 1.17 of the 71st meeting held on 30th January, 2018.</p> <ul style="list-style-type: none"> <li>• At the time of conducting the assessment, all had not accessed the salary payroll.</li> <li>• The delay to access the payroll was attributed to the change in the salary scale from U7 as per the MOPS Circular; ARC135/306/01 of 9th January, 2018 to U5 under which the recruitment was conducted which required updating the IPPS payment system.</li> <li>• The DLG on 28th June, 2018 through letter HRM/156/01 wrote to MOPS requesting them to create the above positions in the IPSS which would allow the staff to access the Payroll of Amolatar.</li> </ul>	0
<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• During the FY 2017/2018, four staff; Oryee Dennis a Head Teacher, Atik James a Deputy Head Teacher, Onyanga Constatine a Cartographer and Ayalo Joel an Education Assistant were retired.</li> <li>• At the time of conducting the assessment, all had not accessed the pension payroll.</li> <li>• On 12th July, 2017 vide letter CR/156/2 and CR/156/7 the Local Government informed the MOPS to process Gratuity of Oryee Denis whose retirement was taking effect 25th July, 2017 and Ayato Joel on 19th September, 2017 but by the Assessment Time, the MOPS had not replied.</li> </ul>	0

Revenue Mobilization			
<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• If increase in OSR (excluding one/off, e.g. sale of assets) from previous FY but one to previous FY is more than 10 %: score 4.</li> <li>• If the increase is from 5% -10 %: score 2.</li> <li>• If the increase is less than 5 %: score 0.</li> </ul>	<p>Total of OSR for FY 2016/2017 Shs.512,134,026, Total OSR for FY 2017/2018 Shs 435,797,587</p> <p>Decrease Shs 76,336,439 Percentage =15%</p> <p>The reasons for the decline were:</p> <ul style="list-style-type: none"> <li>• UPDF mounted a serious campaign against illegal fishing. This significantly affected the collection of local revenue landing sites.</li> <li>• In the FY 2016/2017, there was sale of assets which was not the case in the FY2017/2018</li> <li>• The sale of Assets amounted to Shs 29,275,000 which has been excluded from the Figure of Shs 541,409,026 resulting into Shs 512,134,026 as indicated above.</li> </ul>	0
<p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10 %: then score 2. If more than +/- 10 %: Score 0.</li> </ul>	<p>Total Local Revenue Planned/Budgeted (Original not Revised budget) for FY 2017/2018 Shs 566,918,00.</p> <p>Total Local Revenue collected during FY 2017/2018 Shs 435,797,597</p> <p>Budget realization 77%, resulting into a deficit of 23%</p>	0
<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2</li> </ul>	<p>Local Revenue collections subjected to sharing with LLGs Shs.435,797,597</p> <p>Amount of local revenue remitted to LLGs Shs.17,605,250.</p> <p>Status of compliance:</p> <p>The District remitted 4% instead of 65% as required by the provisions of Local Governments Act CAP 243</p>	0

<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the total Council expenditures on allowances and emoluments- (including from all sources) is not higher than 20% of the OSR collected in the previous FY: score 2</li> </ul>	<p>Total expenditure on council allowances during FY 2017/2018 Shs. 97,940,400.</p> <p>Percentage 18%.%</p> <p>The total Council expenditure on allowances was within the confines of 20% .</p> <p>Revenue Realized in FY 2016/2017 Stood at Shs. 541,969,026</p> <p>Total Expenditure on Council Allowances in FY2017/2018</p> <p>was 97,940,400</p> <p><math>97,940,400/541,969,026 \times 100 = 18\%</math></p>	<p>2</p>
<p>Procurement and contract management</p>			
<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2</li> </ul>	<p>Amolatar DLG neither had neither a Senior Procurement Officer nor a Procurement Officer appointed in these positions.</p>	<p>0</p>
<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1</li> </ul>	<p>No evidence of production and submission of reports by TEC to the contracts committee in the previous FY 2017/18. PAT did not see such reports at the time of Assessment.</p>	<p>0</p>



<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the Contracts Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1</li> </ul>	<p>No evidence was produced to show that the Contracts Committee deviated from recommendations of the Evaluation Committee.</p>	<p>1</p>
<p>The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.</p> <p>Maximum 2 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2</li> </ul>	<p>There were no records availed to PAT for verification. This came about due to the absence of the Senior procurement Officer as well as the Procurement Officer. For the 3 days PAT was in the LG, no other officer was availed to provide the required information.</p>	<p>0</p>
<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/ infrastructure by August 30: score 2</li> </ul>	<p>There was no evidence availed to the PAT to confirm that the LG prepared 80% of bid documents for all investments.</p>	<p>0</p>

<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2</li> </ul>	<p>This was not seen because the officers present at time of assessment never provided this information to verify whether there was an updated contract register.</p>	<p>0</p>
<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.</li> </ul>	<p>The PAT was able to get the following projects meeting thresholds as stipulated by PPDA guidelines.</p> <p>Sampled projects under water and works adhered to PPDA threshold guidelines e. g; Tarmacking/Low cost sealing of Corner-Bangladesh road, 1km Procurement Ref. AMOL5641/Works/0028 with a bid security of UGX 2M was through Open Domestic Bidding published on Friday 15th December, 2017.</p> <p>The same publication advertised the Project; Drilling and Installation of 5 Boreholes Procurement Ref. AMOL564/Wrks/0029 with a bid security of UGX 1.5M.</p> <p>The procurement Ref. AMOL564/Wrks/2017-18/00014; Construction of two stance drainable latrines at UGX 16,520,00 was through selective bidding. The procurement was awarded to Ms Atimo Construction and DS Limited. This award was displayed on the PDU Notice Board from 22nd to 28th September, 2017.</p> <p>Construction of VIP 3-stance pit latrine at Amolatar HC IV at a Cost of UGX 12,556,500 went through selective bidding and was awarded to Ms. M-Big Consultancy Uganda Limited P.O. Box 26, Kaberamaido.</p> <p>Supply and installation of rain water harvest tanks at Etam Health III at UGX 13,519,000 went through Selective bidding and was awarded to Ms. Racbet Onyeko Company Limited, Tel. 0772693057.</p>	<p>2</p>

<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates</li> </ul> <p>for all projects based on technical supervision: score 2</p>	<p>There was no evidence that all works projects implemented in the previous FY were appropriately certified, though some works projects were certified.</p>	<p>0</p>
<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2</li> </ul>	<p>The LG did have any ongoing project for FY2018/19 neither rolled over projects from FY2017/18 to establish if they had site boards. This was because the LG had not received development funds for FY2018/19.</p>	<p>0</p>
<p>Financial management</p>			
<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4</li> </ul>	<p>Reconciliations of bank Accounts with Cash books had been carried out for all the bank Accounts in FY 2017/2018</p> <p>However, since the beginning of FY 2018/2019 no Reconciliations had been carried out as at the time of Assessment (3rd September 2018). The reason given was that LG has not received any disbursements from the center.</p>	<p>0</p>

<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• If the LG makes timely payment of suppliers during the previous FY</li> <li>– no overdue bills (e.g. procurement bills) of over 2 months: score 2.</li> </ul>	<p>Verification of sampled payment vouchers and contracts from all the sectors i.e Voucher No. O667 dated 8th February, 2018, Amount Shs.13,519,000 for supply and installation of Water harvest Tanks to ETAM Health Centre III revealed that the LG made timely payments to supplier on 10th February, 2018. The requisition was made 10th January, 2018. The District was running a Cash basis Accounting.</p>	<p>2</p>
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has a substantive Senior Internal Auditor: 1 point.</li> <li>• LG has produced all quarterly internal audit reports for the previous FY: score 2.</li> </ul>	<p>The LG did not have a substantial Senior internal Auditor at the time of assessment. Mr. Obim Nixon was assigned to take up the responsibilities of this position in an acting capacity as per the letter dated 28th October,2015 Ref HRM/1156/171/01.</p>	<p>0</p>
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• LG has produced all quarterly internal audit reports for the previous FY: score 2.</li> </ul>	<p>Quarterly Internal Audit Reports for FY 2017/2018 were produced as follows;</p> <p>Q1 produced 30th October, 2017</p> <p>Q2 produced 30th January, 2018</p> <p>Q3 produced 30th April, 2018</p> <p>The Forth Quarterly internal audit report FY 2017/2018 was not in place at the time of assessment (3rd September, 2018)</p>	<p>0</p>

<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<p>Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries from all quarterly audit reports: score 2.</p>	<p>Information to Council &amp; LG PAC on Internal Audit Queries raised during FY 2017/2018 as follows;</p> <p>Number of queries raised 56</p> <p>Number of queries responded to 34</p> <p>Number of queries pending 32</p> <p>LGPAC made a follow up on audit queries for only the 1st Quarter 2017/2018</p>	<p>0</p>
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<p>• Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1.</p>	<p>Action by the Accounting Officer, LG PAC on Internal Audit Queries raised during FY 2017/2018 as follows;</p> <p>Q1 produced 30th October, 2017</p> <p>Q2 produced 30th January, 2018</p> <p>Q3 produced 30th April, 2018</p> <p>Q4 report was not seen</p> <p>LG PAC reviewed and followed them up</p>	<p>0</p>
<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<p>• Evidence that the LG maintains an up- dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4</p>	<p>The asset register was not seen at the time of assessment. Similarly, the LG was not yet on IFMS in which case was still on a Manual System.</p>	<p>0</p>

<p>The LG has obtained an unqualified or qualified Audit opinion</p> <p>Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY:</p> <ul style="list-style-type: none"> <li>• Unqualified audit opinion: score 4</li> <li>• Qualified: score 2</li> <li>• Adverse/disclaimer: score 0</li> </ul>	<p>Amolatar DLG obtained a Qualified "Except For" Audit Opinion for FY 2017/2018</p>	<p>2</p>
<p>Governance, oversight, transparency and accountability</p>			
<p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2</li> </ul>	<p>The LG Council held meetings and discussed service delivery related issues as provided in the minutes below:</p> <ol style="list-style-type: none"> <li>1. On 29.08.2017 under minute no.COU/25/2017 to consider appointment of D/PAC members as well as Motion to Council on gross mismanagement at the District under minute no. COU/26/2017</li> <li>2. On 29/11/2017 under minute no.COU/35/2017 presentation of reports from committees</li> <li>3. On 29/03/2018 under minute no.COU/43/2018. Laying of District Budget 2018/19</li> <li>4. On 31/5/2018 under council no.COU/50/2018. Ex-Com Business. Discussion of Budget estimates 2018/19</li> </ol>	<p>2</p>
<p>The LG has responded to the feedback/complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 1.</li> </ul>	<p>Mr Okao Joel, the District Communication Officer was designated to handle grievances/complaints as part of his regular activities. This was in line with Job description and person specifications for the Local Governments issued by MoPS dated March, 2017.</p>	<p>1</p>

<p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>The LG has specified a system for recording, investigating and responding to grievances, which should be displayed at LG offices and made publically available: score 1</li> </ul>	<p>Besides consultations between complainants and responsible District officers, there was no properly laid down system for recording, investigating and responding to grievances.</p>	<p>0</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<p>Evidence that the LG has published:</p> <ul style="list-style-type: none"> <li>The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2</li> </ul>	<p>No such information was displayed on notice boards of LG at time of assessment.</p>	<p>0</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>Evidence that the procurement plan and awarded contracts and amounts are published: score 1.</li> </ul>	<p>Examples of contracts awarded and published included:</p> <ul style="list-style-type: none"> <li>- Painting of Awello S/C Council, Court Hall repairs and Replacement of doors at Anamwany H/C III awarded to Health and Wealth Enterprises Ltd. At Ug.Shs.5,469,300</li> <li>- Supply of 40 three seater desks to primary schools in Agwingiri S/C awarded to Fear God Timber Workshop at Ug. Shs. 5,664,000</li> <li>- Renovation of Namasale T/C Administration Block awarded to Aoja General Enterprises Ltd. At Ug.Shs.14,000,000</li> </ul> <p>However, there was no evidence at time of assessment that the procurement plan and awarded contracts with their corresponding amounts were published.</p>	<p>0</p>

<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG performance assessment results and implications are published e.g. on the budget website for the previous year (from budget requirements): score 1.</li> </ul>	<p>Publication of assessment results on LG Notice Boards or website was not done as the PAT never saw any evidence that this was done.</p>	<p>0</p>
<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1</li> </ul>	<p>One example included a letter dated 01/02/2018 from Ministry of Gender, Labour and Social Development addressed to CAOs and T/Cs requesting for a list of all businesses issued with Trading Licenses. The same information was communicated to LLGs (SAS/Town Clerks) in a circular letter dated 13/03/2018 issued by CAO, Amolatar District.</p>	<p>1</p>
<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that LG during the previous FY conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc.) with the public to provide feed-back on status of activity implementation: score 1.</li> </ul>	<p>The latest baraza took place at at Aputi Primary School on 30th June, 2017 as per the RDC's letter dated 4th July, 2017 appreciating participants who attended. However minutes were not availed to the assessment Team.</p>	<p>1</p>
<p>Social and environmental safeguards</p>			



<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG gender focal person and CDO have provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities score 2.</li> </ul>	<p>No evidence of guidance and support by the gender focal point person to sector departments to mainstream gender, vulnerability and inclusion into their activities seen in the departmental meeting minutes verified.</p> <p>Minutes of the Social Welfare Committees without guidance from the Gender Focal Point Officer seen:-</p> <ol style="list-style-type: none"> <li>Minutes of the 19th and 27th February, 2018</li> <li>Minutes of the 14th and 15th November, 2017</li> <li>Minutes of the 17th and 18th. May, 2018</li> </ol>	<p>0</p>
<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the gender focal point and CDO have planned for minimum 2 activities for current FY to strengthen women's roles and address vulnerability</li> </ul> <p>and social inclusions and that more than 90 % of previous year's budget for gender activities/ vulnerability/ social inclusion has been implement-ted: score 2.</p>	<p>Action plans for FY 2018/19 seen with a budget outlay but lack activities .</p> <p>The department planned youth activities including, radio talk shows on Gender issues. Likewise, 2 activities to address vulnerability issues were planned and they were:-</p> <ol style="list-style-type: none"> <li>Training for technical staff and Sub County Executive Committees</li> <li>Training of women in income generating activities.</li> </ol>	<p>0</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 1</li> </ul>	<p>From PDU Amolatar LG, 5 Bid documents were sampled. Only 2 had environmental screening reports. No ESMP (Environment &amp; Social Management Plan) was done. No certification forms were seen and no screening files were seen by PAT.</p>	<p>0</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1</li> </ul>	<p>No contract bid documents were seen by PAT thus this could not be verified.</p>	<p>0</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1</li> </ul>	<p>5 Projects implemented had Land Titles as follows:-</p> <ul style="list-style-type: none"> <li>i) Land at which the District Headquarters were constructed Block Road Opon Acak Avenue</li> <li>ii) Construction of Health Centre 4 on Block Road Kaguta Avenue</li> <li>iii) Construction of Health Centre II, at Awei Peko Cell</li> <li>iv) Construction of Health Centre II, Alyecmeda Health Centre</li> <li>v) Repair of Arwotcek Sub County Head quarters.</li> </ul>	<p>1</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1</li> </ul>	<p>Projects below did not have Environmental and Social Mitigation certification Forms completed and signed by Environmental Officer and CDO:-</p> <ul style="list-style-type: none"> <li>i) Agurudia VIP latrine construction</li> <li>ii) Construction 3 classrooms at Aburukili Primary School</li> <li>iii) Construction of VIP latrine at Amai Prim. School</li> <li>iv) Rehabilitation of Omali T/C Obango Road.</li> </ul>	<p>0</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the contract payment certificated includes prior environmental and social clearance (new one): Score 1</li> </ul>	<p>No evidence was seen at time of assessment</p>	<p>0</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that environmental officer and CDO monthly report, includes a) completed checklists, b) deviations observed with pictures, c) corrective actions taken. Score: 1</li> </ul>	<p>The Environmental Officer and CDO monthly reports, included (a) completed checklists, (b) deviations observed with pictures (c) corrective actions taken as was the case for the following projects in a report dated 15th July, 2018</p> <ul style="list-style-type: none"> <li>i) Periodic road maintenance from Opali to Aputi</li> <li>ii) Periodic Road maintenance, Amolatar to Abeja (21 km.)</li> <li>iii) Periodic road maintenance from Omali to Anamido</li> </ul>	<p>1</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4</li> </ul>	<p>Amolatar LG wage bill for FY 2018/19 as budgeted was Shs.5, 601,618,000. The total budget covers Head teachers and regular teachers.</p>	4
<p>The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has 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: score 4</li> </ul>	<p>The LG had a staff list showing deployment of a Head Teacher and a minimum of 7 teachers per school for the FY 2018/19. A staff list dated 14th March, 2018 had a total of 50 government schools with a head teacher posted and at least a minimum of a teacher per class making a total of 644 teachers.</p>	4
<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has filled the structure for primary teachers with a wage bill provision               <ul style="list-style-type: none"> <li>o If 100%: score 6</li> <li>o If 80 - 99%: score 3</li> <li>o If below 80%: score 0</li> </ul> </li> </ul>	<p>The structure for primary teachers had not been filled but attempts were made on a letter written to Ministry of Public Service dated 4/10/2017. Ref: HRM/152/01. A request to recruit 35 teachers was made but due to wage bill restriction, the request was not cleared by Ministry of Public Service. This shows that the LG made attempts to fill vacant positions of primary school teachers.</p>	3

<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6</li> </ul>	<p>LG had two positions of School Inspector within their structure. Only one was substantively filled (Senior Inspector of Schools), while the other (Inspector of Schools) was vacant. Much as there was a recruitment plan requesting that the position of Inspector of Schools be filled, this is yet to happen.</p>	<p>0</p>
<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> <li>• Primary Teachers: score 2</li> </ul>	<p>The department submitted a recruitment plan on 25/04/2018 vide: HRM/08/156/01 with 50 primary school teachers planned for recruitment in FY 2018/19</p>	<p>2</p>
<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> <li>• School Inspectors: score 2</li> </ul>	<p>The department had submitted a recruitment plan on 25/04/2018 vide: HRM/08/156/01, covering the vacant position of Inspector of Schools.</p>	<p>2</p>
<p>Monitoring and Inspection</p>			

<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> <li>• 100% school inspectors: score 3</li> </ul>	<p>The Senior Inspector of Schools was appraised on 12/8/2017 .The other position of the Inspector of Schools is vacant, thus LG achieved 100% appraisal in FY 2017/18</p>	<p>3</p>
<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> <li>• Primary school head teachers o 90 - 100%: score 3</li> <li>o 70% and 89%: score 2</li> <li>o Below 70%: score 0</li> </ul>	<p>Only 8 out of 50 Head Teachers were appraised in 2017. This gives a percentage of 16% compliance, which is below the minimum 70%.</p>	<p>0</p>
<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1</li> </ul>	<p>The LG did communicated some guidelines issued at national level, whereas PAT was unable to see communication for other guidelines and circulars The following guidelines were communicated;</p> <ol style="list-style-type: none"> <li>1. Circular on follow up of joint mobilization against absenteeism- disseminated on 5/06/2018</li> <li>2. MDD circular disseminated on 17/04/2018</li> </ol> <p>The circulars at the LG were circulated as stipulated by the guidelines</p>	<p>1</p>

<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department has 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</li> </ul>	<p>The department had held meetings with primary school head teachers to explain and sensitize to them guidelines, policies and circulars issued at national level. The meetings were held as below;</p> <ol style="list-style-type: none"> <li>1. Head teacher's meeting on 25th June, 2018 to disseminate MDD circular</li> <li>2. Stakeholders meeting on 9th April, 2018</li> </ol>	<p>2</p>
<p>The LG Education Department has effectively inspected all registered primary schools<sup>2</sup></p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> <li>o 100% - score 12</li> <li>o 90 to 99% - score 10</li> <li>o 80 to 89% - score 8</li> <li>o 70 to 79% - score 6</li> <li>o 60 to 69% - score 3</li> <li>o 50 to 59 % score 1</li> <li>o Below 50% score 0.</li> </ul> </li> </ul>	<p>The following schools were sampled and visited;</p> <ol style="list-style-type: none"> <li>1. Etam Primary school was inspected and inspection report available with DIS. Report at school dated 3/10/2017.</li> <li>2. Anamwany Primary school had one inspection report on 5/3/2018. No report for 2017 seen</li> <li>3. Acengryeny had one inspection report in 2017 dated 25/9/2017</li> </ol> <p>Since all the sampled schools were inspected and reports compiled, PAT was compelled to score a full mark. It should however be noted that we were able to sample only 3 schools instead of 5 due to;</p> <ol style="list-style-type: none"> <li>1. Long distances from one school to the other</li> <li>2. Inaccessibility of some schools due to heavy rains that day, making roads impassable</li> <li>3. Schools were in holidays</li> </ol>	<p>12</p>



<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4</li> </ul>	<p>No evidence at the time of assessment that school inspection reports were discussed by Education department. The only minutes seen were for the stakeholders workshop held on 9th April, 2018 and we deemed this insufficient to get a mark for this parameter</p>	<p>0</p>
<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2</li> </ul>	<p>LG Education department submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES) as evidenced by reports from the DES dated:</p> <ul style="list-style-type: none"> <li>• 24th May, 2018; and</li> <li>• 13th April, 2017</li> </ul>	<p>2</p>
<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the inspection recommendations are followed-up: score 4.</li> </ul>	<p>Inspection recommendations were followed up as per a meeting held on 9th April, 2018 under minute no.5/9/04/2018. For example, SMCs were advised to encourage their schools to improve performance in their schools.</p>	<p>4</p>

<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> <li>o List of schools which are consistent with both EMIS reports and PBS: score 5</li> </ul> </li> </ul>	<p>List of schools consistent with both EMIS reports and PBS were submitted on letter dated 14th March, 2018</p>	<p>5</p>
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<p>Evidence that the LG has submitted accurate/consistent data:</p> <ul style="list-style-type: none"> <li>• Enrolment data for all schools which is consistent with EMIS report and PBS: score 5</li> </ul>	<p>Enrollment data which was consistent with both EMIS reports and PBS submitted on letter dated 14th March, 2018</p>	<p>5</p>
<p>Governance, oversight, transparency and accountability</p>			
<p>The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc. during the previous FY: score 2</li> </ul>	<p>The Council Committee responsible for education met once and discussed service delivery issues as follows:</p> <p>Meetings under Education, Health and CBS Committee 3rd May, 2018 under Min. no.05/05/2018. Issues discussed included;</p> <ul style="list-style-type: none"> <li>- Head count for pupils in schools</li> <li>- Strengthening school monitoring and inspections by the DEO's office</li> </ul>	<p>2</p>

<p>The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the education sector committee has presented issues that require approval to Council: score 2</li> </ul>	<p>No evidence seen at time of assessment that the education sector has presented issues that require approval of Council. This was due to the fact that the Clerk to Council did not show PAT minutes of full council discussing issues presented by the sector.</p>	<p>0</p>
<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO/ MEO)</p> <ul style="list-style-type: none"> <li>• 100% schools: score 5</li> <li>• 80 to 99% schools: score 3</li> <li>• Below 80 % schools: score 0</li> </ul>	<p>The sampled school files were:</p> <ol style="list-style-type: none"> <li>1. Aweiwot P/S meeting held on: 9/4/2018</li> <li>2. Agwenonywal P/S held on : 6/7/2018 on SMC budget review</li> <li>3. Agikdak P/S held on 11/06/2018 was a joint SMC, PTA committee meeting</li> <li>4. Akol P/S report on 4/06/2018</li> </ol>	<p>3</p>
<p>The LG has publicised all schools receiving non- wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has publicised all schools receiving non-wage recurrent grants</li> </ul> <p>e.g. through posting on public notice boards: score 3</p>	<p>This was not done on all LG notice boards or other public notice boards inspected at time of assessment.</p>	<p>0</p>
<p>Procurement and contract management</p>			

<p>The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements, to the Procurement Unit that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has submitted procurement input to Procurement Unit that covers all investment items in the approved Sector annual work plan and budget on time by April 30: score 4</li> </ul>	<p>Procurement Plan submitted on 8th June, 2018 as opposed to April 30, 2018</p> <p>For FY 2017/18, plan was submitted 12th September, 2017 well over the stipulated timeline.</p>	<p>0</p>
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Financial management and reporting

<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3.</li> </ul>	<p>Amolatar LG Education department timely certified and recommended suppliers for payment . This was evidenced by verifying the following sampled payment vouchers and contracts;</p> <ul style="list-style-type: none"> <li>- Contract dated 29th January,2018 for construction of 2 Classroom Block at Atomoro Primary School by Gwokdong Compay Po box 33 Lira O772004011, payment was requested 6th April, 2018 under Voucher no. 0660 of Shs 15,791,541 was cleared on 11th April, 2018</li> <li>- Contract dated 20th November, 2017 for renovation of 3 class room Block at Abarikori Primary School by Evaronjo Services payment request was made on 20th June, 2018 under Voucher 0708 for Shs. 9791,941 and was cleared 27th June, 2018</li> <li>- Contract construction of 4 stance pit latrine, payment request was made under Voucher no.0715 amount Shs. 9,616,476, on 15th May, 2018 and paid 22nd June, 2018. It was paid to Fear God Timber Workshop and building construction company Ltd.</li> </ul>	<p>3</p>
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<p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by 15th of July for consolidation: score 4</li> </ul>	<p>Two quarterly reports were submitted to the Planner as follows;</p> <ol style="list-style-type: none"> <li>1. Q2 prepared 14/11/2017</li> <li>2. Q3 submitted 16/05/2018</li> </ol> <p>Other reports were not seen at the time of assessment.</p>	<p>0</p>
<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year <ul style="list-style-type: none"> <li>o If sector has no audit query score 4</li> <li>o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2</li> <li>o If all queries are not responded to score 0</li> </ul> </li> </ul>	<p>Sector has no audit query.</p>	<p>4</p>
<p>Social and environmental safeguards</p>			
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills, etc.: Score 2</li> </ul>	<p>No evidence for such consultation was seen at the time of assessment</p>	<p>0</p>

<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2</li> </ul>	<p>No evidence for such consultation was seen at the time of assessment</p>	<p>0</p>
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the School Management Committee meets the guideline on gender composition: score 1</li> </ul>	<p>SMCs sampled met guidelines on gender composition;</p> <ol style="list-style-type: none"> <li>Burakwana P/S has 2 women out of 6</li> <li>Arwotek P/S has 3 women out of 6</li> <li>Etam P/S has 2 out of 6</li> <li>Acii P/S has 2 out of 6</li> <li>M.otike P/S has 2 out of 6.</li> </ol>	<p>1</p>
<p>LG Education department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 1:</li> </ul>	<p>There was no evidence of such collaboration between education department and environment department. In fact, the Environment Officer pointed out during the exit meeting that his department was grossly underfunded thus can only do much.</p>	<p>0</p>
<p>LG Education department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all school infrastructure projects are screened 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 1</li> </ul>	<p>No evidence seen at time of assessment that infrastructure projects were screened before approval for construction.</p>	<p>0</p>

<p>LG Education department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>The environmental officer and community development officer have visited the sites to check whether the mitigation plans are complied with: Score 1</li> </ul>	<p>There was no evidence- by way of a report at time of assessment that the two officers visited construction sites to check whether mitigation plans were being complied with. In any case, there were no mitigation plans seen by PAT.</p>	<p>0</p>
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Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>LG has substantively recruited primary health care workers with a wage bill provision from PHC wage</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY</p> <ul style="list-style-type: none"> <li>• More than 80% filled: score 8</li> <li>• 60 – 80% - score 4</li> <li>• Less than 60% filled: score 0</li> </ul>	<p>PHC wage allocation for the district FY 18/19 1,461,849,540/</p> <p>PHC wage for health workers in post for FY 18/19 1,331,402,868/</p> <p>%wage provision (posts filled for primary health care workers with a wage bill provision) = 91%</p>	8
<p>The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/re- quest to HRM for the current FY, covering the vacant positions of primary health care workers: score 6</p>	<p>Recruitment plan for health workers was submitted by DHO to CAO and was received on the same day of 11th April, 2018</p>	6



<p>The LG Health department has conducted performance appraisal for Health Centre IVs and Hospital In-charge and ensured performance appraisals for HC III and II in-charges are conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the all health facilities in-charges have been appraised during the previous FY:</p> <ul style="list-style-type: none"> <li>o 100%: score 8</li> <li>o 70 – 99%: score 4</li> <li>o Below 70%: score 0</li> </ul>	<p>All health facilities in-charges in the 5 sampled health facilities were appraised in the financial year 2017/2018 as indicated below:</p> <ul style="list-style-type: none"> <li>• In-charge Amolatar HC IV, Dr Odong Jimmy appraised on 30th May, 2018. Appraiser comment "very committed and has improved services at the HSD"</li> <li>• In-charge Etam HC III, Acio Roselline appraised on 23rd May, 2018. Appraiser comments "Very good work"</li> <li>• In-charge Aputi HC III, Opure Tonny appraised on 23rd May, 2018. Appraiser comment "Very dedicated and can do better if gaps are addressed"</li> <li>• In-charge Nakatiti HC II, Pedun Thereza appraised on 23rd May, 2018. Appraiser comment "Can do better if skills are enhanced through training"</li> <li>• In-charge Awonangiro, HC II Adong Joan appraised on 23rd May, 2018. Appraiser comments "Deserves to be promoted to nursing office"</li> </ul>	<p>8</p>
<p>The Local Government Health department has deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Health department has deployed health workers in line with the lists submitted with the budget for the current FY, and if not provided justification for deviations: score 4</li> </ul>	<p>The LG had allocated health workers in line with lists submitted with the budget for FY 18/19.</p> <p>For facilities visited, Health unit staff lists were in tandem with the deployment list at DHO's office. We visited facilities the following facilities.</p> <ul style="list-style-type: none"> <li>• Etam HC III</li> <li>• Anamwany HC II</li> <li>• Aputi HC III</li> <li>• Amolator HC IV</li> <li>• Awotceek HC III</li> </ul>	<p>4</p>
<p>Monitoring and Supervision</p>			

<p>The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DHO/MHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3</li> </ul>	<p>The following examples of guidelines, policies, circulars issued by the national level in the previous FY to health facilities were seen.</p> <ul style="list-style-type: none"> <li>UNEPI cold chain circular-14th June 2017</li> <li>Bed capacity needs quantification letter-25th July 2017</li> <li>Digital drug stock management (Intended for only HC IV and hospital) -3rd October 2017</li> <li>Tb drug formulation guidelines-2nd May 2018</li> <li>UMA industrial action 25th October 2017</li> <li>Service standards guidelines 4th July 2017</li> </ul> <p>The following facilities were visited:</p> <ul style="list-style-type: none"> <li>Etam HC III</li> <li>Anamwany HC II</li> <li>Aputi HC III</li> <li>Amolator HC IV</li> <li>Awotceek HC III</li> </ul>	<p>3</p>
<p>The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DHO/MHO has held meetings with health facility in- charges and among others explained the guidelines, policies, circulars issued by the national level: score 3</li> </ul>	<p>DHT held meetings with health facility in- charges. The minutes were captured in a minute book. In one of the meetings held on 7th November, 2017, the following were discussed;</p> <ul style="list-style-type: none"> <li>Circular to submit bed capacity gaps</li> <li>The use of Uganda Clinical guidelines (UCG)</li> <li>Industrial action circular calling on health workers to offer services to emergencies</li> </ul>	<p>3</p>

<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT/MHT has supervised 100% of HC IVs and district hospitals (including PNFPs receiving PHC grant) at least once in a quarter: score 3</p>	<p>Amolator has 1 HC IV and 1 PNFP hospital .</p> <p>There were support supervision reports for the four quarters to each of the two facilities with clear action points on gaps identified during the support supervision.</p> <p>Quarterly supervision reports were submitted on the following dates :</p> <p>Quarter 1-30th July 2017</p> <p>Quarter 2-19th November 2017</p> <p>Quarter 3-12th February 2018</p> <p>Quarter 4-28th June 2018</p>	<p>3</p>
<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT/MHT has ensured that HSD has supervised lower level health facilities within the previous FY:</p> <ul style="list-style-type: none"> <li>• If 100% supervised: score 3</li> <li>• 80 - 99% of the health facilities: score 2</li> <li>• 60% - 79% of the health facilities: score 1</li> <li>• Less than 60% of the health facilities: score 0</li> </ul>	<p>The following facilities were sampled;</p> <ul style="list-style-type: none"> <li>• Aputi HC III Visited once in Q4</li> <li>• Etam HC III Visited twice in Q2 and Q4</li> <li>• Anamwany HC II Visited once in Q3</li> <li>• Arwotceek HC II Never visited at all</li> </ul> <p>The sampled 4 facilities were supposed to be visited once quarterly hence 16 visits were required, only 4 visits were conducted.</p> <p>% supervision visits were 4/16 which translates into 25%</p>	<p>0</p>

<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all the 4 quarterly reports have been discussed and used to make recommendations (in each quarter) for corrective actions during the previous FY: score 4</li> </ul>	<ul style="list-style-type: none"> <li>The DLG prepared four Quarterly HSD support supervision reports.</li> <li>However, each of the 4 reports was a page each and did not have the necessary detail to ascertain whether action points were followed up in subsequent supervision visits.</li> <li>There was also no evidence that action points were discussed during quarterly DHMT meetings</li> </ul>	<p>0</p>
<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6</li> </ul>	<ul style="list-style-type: none"> <li>On 24th October, 2017, DHT meeting recommended that they hold a special maternal and perinatal audit review meeting which was held on 9th November, 2017.</li> <li>There was evidence that 4 quarterly report recommendations arising from DHT supervision to HC IV and Hospital were followed up.</li> </ul>	<p>6</p>
<p>The LG Health department has submitted accurate/consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> <li>List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10</li> </ul> </li> </ul>	<p>The LG health department submitted accurate/consistent reports/data for health facility lists receiving PHC funding for FY2018/19 as per formats provided by the MoH as evidenced in the July HMIS reports submitted between 5th - 9th August, 2018. Reports were entered into DHIS2 system for health reporting. All facilities benefitting from PHC (13) reported in DHIS2.</p>	<p>10</p>
<p>Governance, oversight, transparency and accountability</p>			

<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2</li> </ul>	<p>4 social services committee reports were presented and all had health related issues discussed. For example;</p> <ul style="list-style-type: none"> <li>21st September 2017 -Operational health issues were discussed</li> <li>14th November, 2017- Operational health issues were discussed</li> <li>29th March, 2018-Operational health issues discussed</li> <li>17th May, 2018-Health budget passed by social services committee</li> </ul>	<p>2</p>
<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the health sector committee has presented issues that require approval to Council: score 2</li> </ul>	<p>On 17th May, 2018 Health budget was passed by the social services committee and on 31st May, 2018, Secretary for health presented health budget to council and the budget was passed</p>	<p>2</p>
<p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 6 points</p>	<p>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> <li>If 100% of randomly sampled facilities: score 6</li> <li>If 80-99 %: score 4</li> <li>If 70-79: %: score 2</li> <li>If less than 70%: score 0</li> </ul>	<p>There was evidence that HUMCs were functional, met regularly and meeting minutes were in place for all 5 sampled facilities</p> <p>Sampled facilities held HUMC meeting in 4th quarter as follows:</p> <ul style="list-style-type: none"> <li>Aputi HC III 4/6/2018</li> <li>Etam HC III 28/6/2018</li> <li>Anamwany HC II 25/6/2018</li> <li>Arwotceek HC II 30/5/2018</li> <li>Amolator HC IV 22/6/2018</li> </ul>	<p>6</p>

<p>The LG has publicised all health facilities receiving PHC non-wage recurrent grants</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has publicised all health facilities receiving PHC non- wage recurrent grants e.g. through posting on public notice boards: score 4</li> </ul>	<p>A list of PHC recurrent non-wage beneficiaries was displayed at the district health notice-board</p>	<p>4</p>
<p>Procurement and contract management</p>			
<p>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</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>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 for the current FY: score 2</li> </ul>	<p>The procurement plan for health department was submitted on 7/6/2018, later than the recommended deadline of 30th April</p>	<p>0</p>
<p>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</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2.</li> </ul>	<p>The procurement request form for last FY 2017/18 was submitted on time (6/9/2017) before the deadline of end of first quarter. No reference</p> <p>The procurement request form for health department for the FY 2018/19 had not been prepared yet. Deadline was end of September 2018.</p>	<p>2</p>

The LG Health department has certified and initiated payment for supplies on time

Maximum 4 for this performance measure

- Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4.

The following projects were executed and DHO certified and recommended payments to contractors in FY 17/18.

- Supply of water harvesting tanks at Etam HC III. Request for payment submitted On 20th December 2017, certificate prepared on 20th December 2017 and payment made on 21st December 2017 as per voucher no Voucher number 0667

- Construction of 3 stance pit latrine at Amolator HC IV

Request for payment submitted on 10th January 2017, certificate prepared on 16th January 2018 and payment made on 2nd February 2018 as per voucher no Voucher number 0656

- Completion of general ward at Amolator HC IV.

Request for payment submitted on 25th May 2018, certificate prepared on 6th June 2018 and payment made on 14th June 2018 as per Voucher number 0131

The LG Health department had certified and initiated payment for suppliers on time

Financial management and reporting

<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4</li> </ul>	<p>The department submitted the annual performance report for the previous FY 2017/2018 on 28th June 2018</p> <p>Submission of quarterly reports to Planner during FY 2017/2018:</p> <p>The department submitted the annual performance report for the previous FY 2017/2018 on 28th June 2018</p> <p>Submission of quarterly reports to Planner during FY 2017/2018:</p> <p>Quarter 1 report was submitted on 30th July 2017, No reference</p> <p>Quarter 2 report was submitted on 19th November 2017 , No reference</p> <p>Quarter 3 report was submitted on 12th February 2018, No reference</p> <p>Quarter 4 report was submitted on 28th June 2018, No reference</p> <p>There was evidence of submission of quarterly performance reports as well as annual performance report for health. However, the reports were not referenced.</p>	<p>4</p>
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<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</p> <ul style="list-style-type: none"> <li>• If sector has no audit query: Score 4</li> <li>• If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: Score 2 points</li> <li>• If all queries are not responded to Score 0</li> </ul>	<p>Appropriate action was taken on queries raised by the Internal Auditor during FY 2016/2017.</p> <p>Number of queries raised were 11, Number of queries cleared were 11 and no query remained pending.</p>	<p>4</p>
<p>Social and environmental safeguards</p>			
<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> <li>• Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines (i.e. minimum 30 % women: score 2</li> </ul>	<p>Not all the following sampled health facilities had the required 30% and above of female composition on HUMC:</p> <p>Amolator HC IV 2/9=22%</p> <p>Aputi HC III 2/7 =29%</p> <p>Etamu HC III 3/7 =60%</p> <p>Anamwany HC II 2/5 =40%</p> <p>Arwoticheek HC II 2/5 =40%</p>	<p>0</p>

<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2.</li> </ul>	<p>On the 4th July 2017,the DHO issued guidance entitled GUIDELINES ON WASTE MANAGEMENT IN AMOLATAR DISTRICT” to health facilities. However, this communication was not referenced. The guidance was received by health facilities as verified during health unit visit to the following health facilities.</p> <p>Amolator HC IV</p> <p>Aputi HC III</p> <p>Etamu HC III</p> <p>Anamwany HC II</p> <p>Arwoticheek HC II</p>	<p>2</p>
<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all health facility infrastructure projects are screened 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</li> </ul>	<p>No screening forms for EIA</p> <p>No site visit reports availed</p> <p>There was no evidence to ascertain whether health infrastructure projects had been screened before approval.</p>	<p>0</p>
<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 2</li> </ul>	<p>There was no evidence to prove that the Environmental officer and and Community development officer conducted site visits.</p>	<p>0</p>

<p>The LG Health department has issued guidelines on medical waste management</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> <li>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.</li> </ul>	<p>Only one of the 5 sampled health facilities (Kanamwany HC II) had medical waste management guidelines.</p> <p>Other health facilities did not have. DHO reported that such guidelines should be sent by Ministry of Health .</p>	<p>0</p>
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Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the district Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY:               <ul style="list-style-type: none"> <li>o If 100 % of the budget allocation for the current FY is allocated to S/Cs below average coverage: score 10</li> <li>o If 80-99%: Score 7</li> <li>o If 60-79: Score 4</li> <li>o If below 60 %: Score 0</li> </ul> </li> </ul>	<p>There was evidence that sub counties with safe water coverage below the district average were targeted in the 2018/2019. The average coverage in the LG for FY 2018/19 was 65%.</p> <p>However, this allocation will go towards the purchase of a Double Cabin Pick-up to support the monitoring and supervision exercise for the existing water facilities. The DLG sought clearance from the Line Ministry through letter Ref. ADM/104/04 dated 26th October, 2017 and was received by the Ministry of Water and Environment on 30th October, 2017. The Ministry of Water and Environment through letter referenced RWSS1/340/17 dated 3rd January, 2018 signed by Eng. Christopher Tumusiime to the CAO of Amolatar DLG, gave them the clearance if the purchase of the vehicle was within the District Water Sector Budget.</p>	10
<p>The district Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the district Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY.               <ul style="list-style-type: none"> <li>o If 100 % of the water projects are implemented in the targeted S/Cs: Score 15</li> <li>o If 80-99%: Score 10</li> <li>o If 60-79: Score 5</li> <li>o If below 60 %: Score 0</li> </ul> </li> </ul>	<p>The District Water department implemented only 5 out of the 7 budgeted projects in the targeted sub-counties the sub counties of; Amolatar S/C, Namasale S/C, Arwotcek S/C, Akwon S/C and Etam S/C equivalent to 71.4% hence the score of 5 points.</p>	5

Monitoring and Supervision

<p>The district Water department carries out monthly monitoring of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the district Water department has monitored each of WSS facilities at least annually.</p> <ul style="list-style-type: none"> <li>• If more than 95% of the WSS facilities monitored: score 15</li> <li>• 80% - 95% of the WSS facilities - monitored: score 10</li> <li>• 70 - 79%: score 7</li> <li>• 60% - 69% monitored: score 5</li> <li>• 50% - 59%: score 3</li> <li>• Less than 50% of WSS facilities monitored: score 0</li> </ul>	<p>The was evidence that the District water department had monitored more than 95% of the WSS facilities according to the quarterly monitoring reports for the FY2017/18 dated;</p> <p>22nd September,2017-Q1 facilities monitored include;</p> <p>Ocomolum A and B in Agwenonywal Parish</p> <p>22nd December,2017-Q2 facilities monitored include; Alaro bore hole and Aminangom borehole in Alemere Parish</p> <p>16th March,2018-Q3 facilities monitored include; Alwala B and C in Nalubowyo Parish</p> <p>and 26th June,2018-Q4 facilities monitored include;</p> <p>Alyemeda borehole and Olake borehole in Agwingiri Parish,Kezimba A and B in Alemere Parish.</p>	<p>15</p>
<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the district has submitted accurate/consistent data for the current FY: Score 5</li> <li>• List of water facility which are consistent in both sector MIS reports and PBS: score 5</li> </ul>	<p>There was evidence that the District has submitted accurate/consistent data for the FY2017/17 to the Permanent Secretary Ministry of Water and Environment on;</p> <p>6th July,2018;</p> <p>9th April,2018;</p> <p>12th January,2018 and</p> <p>6th October,2017</p>	<p>5</p>

<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>List of water facility which are consistent in both sector MIS reports and PBS: score 5</li> </ul>	<p>The water facilities were consistent in both the sector MIS reports and the PBS example water facilities include;Ocomolum A, Ocomolum B, Amolatar A amd Amolatar B.</p>	<p>5</p>
<p>Procurement and contract management</p>			
<p>The district Water department has submitted input for district's procurement plan, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has submitted input for the district procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4</p>	<p>The district water department submitted input for the district procurement plan to PDU that covered all investment items in the approved Sector annual work plan and budget. The submission input for the district procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on 13th June, 2018 which was outside the stipulated timelines of 30th April, 2018.</p>	<p>0</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If the contract manager prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2</li> </ul>	<p>The visited sites did not have evidence of the existence of the contract management plan.</p>	<p>0</p>

<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If water and sanitation facilities constructed as per design(s): score 2</li> </ul>	<p>The facilities of Aburko borehole, Amolatar A, Amolatar B, Ocomolum A, Ocomolum B were functional to the required objective that is supply of water to the community besides the technical requirement hence the score of 2.</p>	<p>2</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If contractor handed over all completed WSS facilities: score 2</li> </ul>	<p>There was no evidence of handing over of completed WSS facilities by the Contractor.</p>	<p>0</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2</li> </ul>	<p>The DWO timely certified and recommended for payment within a period of 2 weeks for example;</p> <p>? ? Mastak Investment Limited submitted its claims on 11th December, 2017 and was certified on 19th December, 2017, and</p> <p>? ? Atimo Construction Limited submitted its claim on 28th December, 2017 and was certified on 28th December, 2017</p> <ul style="list-style-type: none"> <li>E.ABH Limited submitted on 18th June 2018 and certification was on 18th June, 2018</li> </ul>	<p>2</p>

<p>The district Water department has certified and initiated payment for works and supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	<p>The DWO timely certified and recommended for payment within a period of 3 weeks for example;</p> <ul style="list-style-type: none"> <li>Mastak Investment Limited submitted its claims on 11th December, 2017 and was certified on 19th December, 2017,</li> <li>Atimo Construction Limited submitted its claim on 28th December, 2017 and was certified on 28th December, 2017</li> <li>E.ABH Limited submitted on 18th June 2018 and certification was on 18th June, 2018</li> </ul>	<p>3</p>
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Financial management and reporting

<p>The district Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5</li> </ul>	<p>The department submitted annual performance reports for the previous FY 2017/2018 as follows:</p> <table border="1" data-bbox="708 840 1410 1299"> <thead> <tr> <th>Quarter Reference</th> <th>Date of submission</th> </tr> </thead> <tbody> <tr> <td>Quarter 1</td> <td>Not seen None</td> </tr> <tr> <td>Quarter 2</td> <td>14th January, 2018</td> </tr> <tr> <td>Quarter 3</td> <td>12th April, 2018</td> </tr> <tr> <td>Quarter 4</td> <td>15th July, 2018</td> </tr> </tbody> </table> <p>The reports seen by the PAT were not referenced and Quarter1 report was not seen hence the score zero.</p>	Quarter Reference	Date of submission	Quarter 1	Not seen None	Quarter 2	14th January, 2018	Quarter 3	12th April, 2018	Quarter 4	15th July, 2018	<p>0</p>
Quarter Reference	Date of submission												
Quarter 1	Not seen None												
Quarter 2	14th January, 2018												
Quarter 3	12th April, 2018												
Quarter 4	15th July, 2018												



<p>The District Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</li> <li>o If sector has no audit query score 5</li> <li>o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3</li> <li>If queries are not responded to score 0</li> </ul>	<p>The DLG took action on all the queries raised by the Internal Auditor during FY 2016/2017 the number of queries raised were 48, number of queries cleared were 48 and the number of queries pending nil.</p>	<p>3</p>
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Governance, oversight, transparency and accountability

<p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3</li> </ul>	<p>The Council committee responsible for water held meetings and some of the issues discussed were the guidelines to the District Local Governments directing them to use stainless steel instead of galvanized pipes while repairing boreholes. Though the minutes were not dated.</p>	<p>3</p>
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<p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the water sector committee has presented issues that require approval to Council: score 3</li> </ul>	<p>The water committee sought approval from Council on 29th August,2017 that the original number of 10 boreholes be repaired according to the guidelines from the ministry.</p>	<p>3</p>
<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <li>The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2.</li> </ul>	<p>The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district water department notice boards.</p>	<p>2</p>
<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <li>All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2</li> </ul>	<p>The Boreholes visited were clearly labeled showing names of the Contractor examples of the boreholes in Orwon village Etam parish Etam sub county, Borehole in Adita C village Aromu parish Akwon sub county, Borehole at Aburkol cell Amolatar T/C.</p>	<p>2</p>

<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2</li> </ul>	<p>There was posting of tenders and contracts awarded on the District notice boards;</p> <ul style="list-style-type: none"> <li>Name of Contractor; ATIMO construction DS Limited Contract name; AMOL/564/wks/2017/18/00014 and Contract sum 16,500,000/=</li> <li>Contractor's name; East Africa BW Limited:Contract name; AMOL/564/wks/2017/18/0029 and Contract sum: 118,000,000/=</li> <li>Name of contractor: Masttak Inv. Limited: Contractor name; AMOL/564/wks/2017/18/00027 and Contract sum64,700,000/=</li> </ul>	<p>2</p>
<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If communities apply for water/ public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1</li> </ul>	<p>There was no evidence of any meeting held at the time of the assessment.</p>	<p>0</p>
<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Water and Sanitation Committees that are functioning evidenced by either: i) collection of O&amp;M funds, ii( carrying out preventive maintenance and minor repairs, iii) facility fenced/protected, or iv) they an M&amp;E plan for the previous FY: score 2</li> </ul> <p>Note: One of parameters above is sufficient for the score.</p>	<p>There was payment of the non-refundable fees by the community towards O&amp;M example payment to Amolatar LG of a General receipt No.2377 paid on 8th January, 2018 and General receipt No.2385 paid on 30th January, 2018.</p>	<p>2</p>
<p>Social and environmental safeguards</p>			

<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2</li> </ul>	<p>There was evidence of environmental screening/EIAs conducted example environmental screening form ESSF dated 12/12/2017 and 10/10/2017 by the District Environmental Officer proved this.</p>	<p>2</p>
<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1</li> </ul>	<p>There was a follow up on environmental issues screened by the contractor and the monitoring report dated 15/3/2018 by the District Environmental Officer was written and submitted with recommendations.</p>	<p>1</p>
<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that construction and supervision contracts have clause on environmental protection: score 1</li> </ul>	<p>There was no evidence to prove that supervision and construction contracts had a clause on environmental protection as required.</p>	<p>0</p>

<p>The district Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If at least 50% WSCs are women and at least one occupying a key position (chairperson, secretary or Treasurer) as per the sector critical requirements: score 3</li> </ul>	<p>There was evidence of gender equity in WSCs composition confirmed by the minutes of the meetings held on at Atababole village 4/1/2018 under minuter number 6/2018 election of water source committee where the following members were elected;</p> <p>Jennet Otim ---- c/person (lady)</p> <p>Stella Ongu ----- v/person (lady)</p> <p>Ococ Innocent ---secretary (man)</p> <p>Judith Otim-----v/secretary (lady)</p> <p>Okori Ronald ----caretaker (man)</p> <p>Kia Jennet -----v/treasurer (lady)</p> <p>Phoebe Orite----Treasurer (lady)</p> <p>Adoi william---elder(man)</p> <p>Ecam nelson---(comm.member)</p>	<p>3</p>
<p>Gender and special needs-sensitive sanitation facilities in public places/</p> <p>RGCs provided by the Water Department.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3</li> </ul>	<p>There was a ramp access by the PWDs, Separate access by men and women in Public sanitation facilities</p> <p>example at Etam P/S ,Amolatar P/S</p>	<p>3</p>