



## Local Government Performance Assessment

Amudat District

(Vote Code: 581)

Assessment	Scores
Accountability Requirements	17%
Crosscutting Performance Measures	43%
Educational Performance Measures	39%
Health Performance Measures	52%
Water Performance Measures	34%

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>Amudat District Local Government submitted the Final Performance Contract on 2nd August 2018 and approved on the same date as per the submission schedule of MoFPED, which was after the deadline of 1st August 2018.</p> <p>Note: The PFMAA LG Budget guidelines require the submission to be by 30th June. However, this date was changed to 1st August 2018 as per the request from MoFPED.</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>Amudat District Local Government submitted a Budget for FY 2018/2019; including a Procurement Plan for FY 2018/2019 on the 2nd August 2018 as per the submission schedule of MoFPED.</p> <p>The submission of the Budget for FY 2018/2019; including a Procurement Plan for FY 2018/2019 was done after the deadline of 1st August 2018 as required.</p> <p>Note: The PFMAA LG Budget Guidelines require the submission to be by 30th June. However, this date was changed to 1st August 2018 as per the request from MoFPED.</p>	<p>No</p>
<p>Reporting: submission of annual and quarterly budget performance reports</p>			
<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>The Annual Budget Performance Report for FY 2017/2018 was submitted on 26th September 2018 (as per computer-generated date on the Q4 report submitted to MoFPED). Amudat DLG was missing on the MoFPED Submission Schedule.</p> <p>The submission was made after the deadline of 31st July 2018</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>All the four Quarterly Budget Performance Reports for Amudat DLG for FY 2017/2018 were submitted to MoFPED as indicated below:</p> <ul style="list-style-type: none"> <li>• Quarter One Report was submitted on 28th February 2018 to MoFPED and approved on the same date (as per Submission Schedule of MoFPED).</li> <li>• Quarter Two Report was submitted on 28th February 2018 to MoFPED and approved on the same date (as per Submission Schedule of MoFPED).</li> <li>• Quarter Three Report was submitted on 20th May 2018 to MoFPED and approved on 27th August 2018 (as per Submission Schedule of MoFPED).</li> <li>• Quarter Four Report was submitted on 26th September 2018 to MoFPED (as per computer-generated date on the Q4 report submitted to MoFPED). Amudat DLG was missing on the MoFPED Submission Schedule.</li> </ul> <p>The reports for the first three quarters were submitted by the end of the FY; PFMA Act, 2015 – Section 21 (3); and the quarter four report was submitted after the end of FY 2017/2018.</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</p>	<p>From MoFPED’s Inventory/record of LG submissions of statements entitled “Actions to Address Internal Auditor General’s findings”,</p>	<p>There was no evidence that the Accounting Officer submitted to the PS/ST information regarding the status of implementation of Internal Auditor General’s findings in FY 2016/2017.</p>	<p>No</p>

<p>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>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 Accounting Officer did not avail documentary evidence at the time of assessment.</p> <p>However, the Accounting Officer submitted to PS/ST information regarding the status of implementation of 8 queries raised by the OAG for FY 2016/2017 on 7th/5/2018 Ref: CR/ADM/213 later than the recommended date of 28th February 2018 contrary to the provisions of the PFMA 2015 section 11 2g.</p> <p>These findings were:</p> <ul style="list-style-type: none"> <li>• Inadequate Controls Surrounding management of Domestic Arrears.</li> <li>• Diversion of funds totaling to Shs. 147,250,000.</li> <li>• Low Recovery of Youth Livelihood Program Fund- only 14% recovered.</li> <li>• Failure to deduct and remit Taxes (WHT &amp; PAYE) totaling to Shs. 63,842,551 to URA.</li> <li>• Understaffing – only 38% positions filled leaving 62% staffing gap.</li> <li>• Payments for no works done.</li> <li>• Delays in the construction of a Solar Powered Mini Water Supply System.</li> <li>• Unverified Assets.</li> </ul>	
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.</p>		<p>Amudat 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>	<ul style="list-style-type: none"> <li>• CAO / Amudat DLG appointed members to the District Physical Planning Committee as per letter Ref: CR/ADM/206/1 dated 29TH August 2018.</li> <li>• The committee had held one meeting; and the objective was to orient members on their roles and responsibilities. The date of the meeting could not be ascertained as minutes were not available at the time of assessment.</li> <li>• There was no book in which to record plans submitted for consideration.</li> </ul>	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>There minutes of the only meeting held were not submitted to PS / 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>The district did not have a physical development plan. Therefore, it was not possible to ascertain whether all infrastructure investments were consistent with the approved Physical Development Plan which was non-existent</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>There were no action area plans prepared due to low locally raised revenue (LRR).</p>	<p>0</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

Maximum 5 points on this performance measure.

• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.

The priorities in the Amudat DLG AWP for FY 2018/2019 were based on the outcomes of budget conference that was held on 1st November 2017.

For instance, under:

Health: 'Renovation of laboratory at Karita HC III' (Page 54 of AWP for FY 2018/2019 – Amudat DLG), and Report of Budget Conference (Page 3) - 'Renovation of working bench and laboratory at Karita HC III'.

Water: 'Siting of 7 deep boreholes' (Page 81 of AWP for FY 2018/2019 – Amudat DLG) and Report of Budget Conference (Page 3) - 'Drilling of 7 Boreholes'.



<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>The capital investments in the approved Annual work Plan for the FY 2018/2019 were derived from the Amudat Approved Second District Development Plan (2015/2016 – 2019/2020).</p> <p>For example, under:</p> <ul style="list-style-type: none"> <li>• Education: “Construction of a four-unit teachers’ house Katabok Primary School; and Construction of a four-unit teachers house at Nabokotom Primary School” in AWP for FY 2018/2019 (Page 62); and “Construction of teachers’ houses” in the District Development Plan, 2015/2016 – 2019/2020 (Chapter 4: Section 4.1.6: Education Department Five-Year Summary Plan – Page 173).</li> <li>• Administration: “Completion of Construction of District Chamber Hall” in AWP for FY 2018/2019 (Page 28); and “Construction of Resource Centre / Library” in the District Development Plan, 2015/2016 – 2019/2020 (Chapter 4: Section 4.1.1: Administration Department Five-Year Summary Plan – Page 138).</li> </ul>	
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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>Project profiles for all investments in the AWP for 2018/2019 were developed. However, minutes of the DTPC meeting during which the profiles were discussed were not availed.</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>The Annual Statistical Abstract was compiled and presented to the DTPC meeting held on 17th November 2017 (under Min. 27/11/1718/ADLG – District Statistical Abstract).</p>	<p>1</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>The infrastructure projects implemented during FY 2017/2018 (as indicated in the Local Government Quarterly Performance Report for FY 2017/2018 (Vote 581 – Amudat District – Quarter 4), were derived from the Annual Work Plan and Budget Estimates for FY 2017/2018.</p> <p>For example, under:</p> <p>Production &amp; Marketing: 'Construction of Production Store completed' (LG Quarter 4 Performance Report for FY 2017/2018 – Vote 581 Amudat - Page 50), and 'Construction of Production Store Completed' (Amudat DLG AWP and Budget – Page 43).</p> <p>Health: 'Completion of Construction of Maternity Ward in Karita HC III' (LG Quarter 4 Performance Report for FY 2017/2018 – Vote 581 Amudat - Page 55), and 'Construction of Maternity ward in Karita HC III' (Amudat DLG AWP and Budget – Page 47).</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. <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> </li> </ul>	<p>From the list provided by PDU, 20 out of 21 investment projects implemented in FY 2017/2018 were completed as per work plan. This was 95.2% completion rate.</p> <p>The uncompleted project was:</p> <ul style="list-style-type: none"> <li>• Construction of a two-classroom block with an Office, installation of a water harvesting tank of 6,000 litres and lightening arrestors at Nabokotom Primary School – Reference No. – Reference No. AMUD581Wrks/17-18/00008.</li> </ul>	<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>Of the 20 completed projects (out of 21), the total budget was UGX 1,212,384,901 and the actual expenditure was UGX 1,212,036,943. The expenditure was 99.97% of the budget.</p> <p>Examples of completed projects include:</p> <ul style="list-style-type: none"> <li>Construction of a three-stance pit latrine at Kales Girls Primary School - Reference No. AMUD581Wrks/17-18/00026. The budget was UGX 13,275,643 and the actual expenditure was UGX 12,294,800. The expenditure was 92.6% of the budget.</li> <li>Completion of a maternity ward at Karita HC III - Reference No. AMUD581Wrks/17-18/00015. The budget was UGX 76,537,700 and the actual expenditure was UGX 71,506,500. The expenditure was 93.4% of the budget.</li> </ul>	<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>Amudat DLG budgeted UGX 206,460,000 on O&amp;M during FY 2017/2018, and spent UGX 96,041,950.</p> <p>This was 46.5% of the budget for O&amp;M as per Draft Final Accounts for the Year Ended 30th June 2018 (NOT page numbered) and Amudat DLG Budget, Vote 581.</p>	<p>0</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>	<p>There were 10 HoD at U1 salary scale in the approved establishment / organisation structure. Six (6) were substantively appointed as per their appointment letters;</p> <ol style="list-style-type: none"> <li>1. D/CAO - Not availed</li> <li>2. CFO – 31st March 2016</li> <li>3. D/Planner - Not availed</li> <li>4. DEO – 31st March 2016</li> <li>5. D/CDO – 31st March 2016</li> <li>6. D/PO – 16th Marsh 2016</li> </ol> <p>Four (4) were performing duties of HoD as follows;</p> <ol style="list-style-type: none"> <li>7. Duties of the D/NRO were performed by an officer whose substantive appointment was Senior Environment Officer (U3) as per his appointment letter dated 17th March 2017</li> <li>8. Duties of the District Engineer were performed by an officer whose substantive appointment was Assistant Engineering Officer as per the appointment letter dated 18th April 2017</li> <li>9. Duties of the District Commercial Officer were performed by an officer whose substantive appointment was Assistant Animal Husbandry Officer, as per the appointment letter dated 10th October 2016</li> <li>10. The duties of the DHO were performed by an officer whose substantive appointment was Principal Medical Officer (U2S) as per the appointment letter 31st March 2016</li> </ol>	<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>	<p>There was no evidence that HoD were appraised. The district did not present appraisal reports for any of the HoD for FY 2017/18.</p>	<p>0</p>

The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.

Maximum 4 points on this Performance Measure.

• Evidence that 100 % of staff submitted for recruitment have been considered: score 2

Twelve (12) positions were submitted to the DSC for recruitment of new employees as per the submission letter ADM/CR/156/3 dated 19th February 2018, as follows;

#### Administration Department

1. District Engineer
2. Internal Auditor
3. Principal HRO
4. Procurement Officer
5. Parish Chiefs
6. Parish Chief

#### Finance Department

7. Principal Finance Officer
8. Senior Accounts Assistant
9. Accounts Assistant
10. Senior Planner

#### Natural Resources Department

11. Senior Lands Management Officer

#### Production and Marketing Department

12. District Commercial Officer

There was evidence that they were all considered during DSC meetings held on 23rd February 2018 as per minute serial number 1/2018

<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>Thirty-one (31) names of district employees were submitted to the DSC for confirmation of their appointment as follows;</p> <p>1. Twenty-five (25) names were submitted as per the submission letters of ADM/CR/159/2 dated 15th January 2018</p> <p>There was evidence that they were all considered by the DSC during its meeting held on the 23rd February 2018 as per DSC meeting serial number 23/2018, minute number 6/ADLG/2018</p> <p>2. Four (4) names were submitted as per the submission letter, ADM/CR/159/2 dated 25th March 2018</p> <p>There was evidence that they were all considered by the DSC during its meeting held on the 13th April 2018 as per as per DSC meeting serial number 24/2018-minute number 12/DSC/2018</p> <p>3. Twelve (12) names were submitted as per the submission letter, ADM/CR/159/2 dated 10th April 2018</p> <p>There was evidence that they were all considered by the DSC during its meeting held on the 13th July 2018</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>	<p>One disciplinary action case was submitted to the DSC as per submission letter, CR/ADM/157/5, dated 4th October 2017</p> <p>There was evidence that it was considered during the DSC meeting held on 23rd February 2018 as per DSC meeting serial number 23/2018, minute number 7/ADLG/2018</p>	<p>1</p>

<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>Four (4) new employees were appointed and recruited into the district service as per DSC minute number 6/ADCS/2018 and their respective appointment letter dated 17th May 2018 as follows,</p> <ol style="list-style-type: none"> <li>1. Parish Chief - 2 Posts</li> <li>2. Accounts Assistant</li> <li>3. Lands Management Officer,</li> </ol> <p>and their "Acceptance of appointment" letters;</p> <p>as follows;</p> <ol style="list-style-type: none"> <li>1. Naluku Stephen, Parish Chief –</li> <li>2. 23rd May 2018</li> <li>3. Ndimor C. Rodah Parish Chief –</li> <li>4. 22nd May 2018</li> <li>5. Inyelle Jane Rose, Accounts Assistant – 21st May 2018</li> <li>6. Olupot Godfrey Lands Management Officer – 21st may 2918</li> </ol> <p>There was evidence that they accessed the payroll as per June 2018 IPPS payroll identification numbers seen as follows;</p> <ol style="list-style-type: none"> <li>1. Nakulu Stephen No.1025937</li> <li>2. Ngimor c. Rodah No. 1025928</li> <li>3. Inyelle Jane Rose No. 1025923</li> <li>4. Olupot Godfrey No. 1025919.</li> </ol>	<p>3</p>
<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>	<p>One employee, a Laboratory Assistant retired on 15th September 2017. There was no evidence that he accessed the retirement payroll.</p>	<p>0</p>



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>OSR collected in FY 2016/2017 (excluding sale of assets) was Shs. 56,600,209 whereas OSR collected in FY 2017/2018 was Shs. 57,515,300 which resulted into an increase of Shs. 915,091 as per the LG's Final Accounts for FY 2016/2017-page No.23 and Draft Final Accounts for FY 2017/2018-page No. 29.</p> <p>The percentage increase was: 1.6%</p> <p>Workings:</p> $915,091/56,600,209 \times 100 = 1.6\%$ <p>This increase which complied with the PFMA 2015 Section 45 (3) was attributed to the following factors:</p> <ul style="list-style-type: none"> <li>• The quarantine on cattle market as a result of Foot &amp; Mouth disease in the neighbouring Kween District was lifted in 2017/2018 thus the small increase in local revenue.</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.</li> <li>If more than +/- 10 %: Score 0.</li> </ul>	<p>Original budget for local revenue in FY 2017/2018 was Shs. 54,032,650 against which Shs. 57,515,300 was collected representing a budget out-turn of 106.4% as per the Draft Final Accounts for FY 2017/2018- page No.14.</p> <p>Therefore, the LG budget realisation was 106.4% over and above the planned local revenue for FY 2017/2018.</p> <p>Workings:</p> $57,515,300/54,032,650 \times 100 = 106.4\%$ <p>This excellent revenue collection ratio/budget realization which was in accordance with the LGFAR 2007 section 32 was attributed to the following factor:</p> <ul style="list-style-type: none"> <li>• The LG stepped up the revenue mobilization through a self –motivated Revenue Task Force.</li> </ul>	2

<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>The District collected Shs. 10,895,500 in FY 2017/2018 in respect of Local Service Tax.</p> <p>Source: Draft Final Accounts for FY 2017/2018-page No. 29.</p> <p>However, the District only transferred Shs, 6,640,000 to Amudat Town Council as per PV-3/5 dated 17th/5/2018 and retained Shs. 4,345,500 contrary to LGA Cap 243 as amended, Regulation 85 (4).</p> <p>No transfer was made to the rest of the 3 LLGs of Amudat, Loroos and Karita Sub-counties.</p> <p>In addition, the LG collected Shs. 2,000,000 from Business Licences in respect of Gold mining in Loroos Sub-county but there was no evidence of sharing with the beneficiary LLGs.</p>	<p>0</p>
<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>	<ul style="list-style-type: none"> <li>• Actual local revenue collected in FY 2016/2017 was Shs. 56,600,209 of which 20% equivalent to Shs. 11,320,042 was supposed to be the maximum expenditure for Council emoluments and allowances in FY 2017/2018. Source: Final Accounts for FY 2016/2017- page No.23.</li> <li>• However, actual expenditure on Council emoluments and allowances in FY 2017/2018 was Shs.23,836,538 representing 42.1% above the recommended 20% contrary to the 1st Schedule Regulation 4 of the LGA Cap 243 as amended.</li> </ul> <p>Source: Annexes to the Financial Statements – Trial Balance for FY 2017/2018.</p> <p>The District Chairperson sought authority from the Minister of Local Government on 5th/2/2018 Ref. CR/103 to spend Shs. 67,718,366 during FY 2017/2018 beyond 20% of actual local revenue for FY 2016/2017.</p> <p>A letter from the Minister of Local Government which granted the authority to the District Chairperson to overspend the 20% limitation was not availed to the assessment team at the time of assessment.</p> <ul style="list-style-type: none"> <li>• Workings: <math>23,836,538/56,600,209 \times 100 = 42.1\%</math></li> </ul>	<p>0</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>The district had no Senior Procurement Officer. Duties were performed by a Procurement Officer as per his appointment letter ADM/CR/168/1 dated 17th May 2018</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>The LG TEC conducted the evaluation of procurement items under both open and selective bidding on from 22nd to 25th January 2018 and submitted the report to the LG Contracts Committee. The evaluated projects included among others;</p> <ul style="list-style-type: none"> <li>Construction of a classroom block with an office, installation of water harvesting tank of 6000 litres and lightening arrestors at Nabotokom primary school.</li> <li>Completion of construction of Alakas piped water system gravity flow scheme.</li> <li>Construction of a two-unit staff house at Alakas HCII.</li> <li>Completion of a production store at the district headquarters.</li> <li>Construction of a 2-unit staff house, installation of water harvesting tank of 6000 litres and lightening arrestors at Kati Kit primary school</li> </ul>	<p>1</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>The LG Contracts Committee in a meeting held from 31st January to 2nd February 2018 under minute number 04/AMUD581/CC/30TH Jan-2nd Feb/17-18 awarded the evaluated projects that included; Construction of a classroom block with an office, installation of water harvesting tank of 6000 litres and lightening arrestors at Nabotokom primary school, Completion of construction of Alakas piped water system gravity flow scheme. , Construction of a two-unit staff house at Alakas HCII, Completion of a production store at the district headquarters, .Construction of a 2-unit staff house, installation of water harvesting tank of 6000 litres and lightening arrestors at Kati Kit primary school .</p> <p>The Contracts Committee based its decisions to award contracts for projects on the recommendations of TEC.</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>The District procurement and Disposal plan for FY 2018/2019 covered all the infrastructure projects as in the approved district annual work plan for example under the health department the following infrastructure projects were included; Completion of the district council hall, Construction of a 4 unit teachers staff house at Kalas girls primary school, renovation of subcounty administration block, construction of a girls dormitory at Dingdinga primary school and construction of 2 unit teachers house at Kati Kit primary school.</p> <p>The LG made procurements for 2017/18 FY in adherence to the procurement plan.</p>	<p>2</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>The district had prepared bid documents for infrastructure/investment projects for 2018/2019 FY by 30th August 2018</p>	<p>2</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>The district did not have an updated Contract register as the provided Contract register did not show detailed information. There was no information on amount paid on the contracts as well as the outstanding balance.</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):</li> </ul> <p>score 2.</p>	<p>The LG adhered with procurement thresholds for the projects implemented in 2017/18 FY. This was evidenced through the following awarded projects;</p> <ol style="list-style-type: none"> <li>1. AMUD581/Wrks/17/18/00008 Construction of a classroom block with an office, installation of water harvesting tank of 6000 litres and lightening arrestors at Nabotokom primary school worth 53,487,380 (open bidding).</li> <li>2. AMUD581/Wrks/17/18/00011 Completion of construction of Alakas piped water system gravity flow scheme worth 102,656,905 (open bidding).</li> <li>3. AMUD581/Wrks/17/18/00010 Construction of a two-unit staff house at Alakas HCII 52,484,000 (open bidding).</li> <li>4. AMUD581/Wrks/17/18/00028 Completion of a production store at the district headquarters 34,805,000 (selective bidding).</li> <li>5. AMUD581/Wrks/17/18/00009 Construction of a 2-unit staff house, installation of water harvesting tank of 6000 litres and lightening arrestors at Kati Kit primary school worth 51,507,600 (open bidding).</li> </ol>	<p>2</p>
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<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>The works projects implemented in 2017/18 were appropriately certified with interim certificates as indicated below:</p> <ul style="list-style-type: none"> <li>• Construction of a classroom block with an office, installation of water harvesting tank of 6000 litres and lightening arrestors at Nabotokom primary school was issued with interim certificate on 11/4/18.</li> <li>• Completion of construction of Alakas piped water system gravity flow scheme was issued with interim certificate on 7/3/18.</li> <li>• Construction of a two-unit staff house at Alakas HCII was an LLG project and the certificates were kept at the subcounty.</li> <li>• Completion of a production store at the district headquarters was issued with 2 interim certificates on 11/5/18 and 27/6/18.</li> <li>• Construction of a 2-unit staff house, installation of water harvesting tank of 6000 litres and lightening arrestors at Kati Kit primary school was issued with 2 interim certificates on 11/4/18 and 29/6/18.</li> </ul>	<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 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>There were no projects under implementation in 2018/2019 FY.</p>	<p>0</p>
<p>Financial management</p>			

The LG makes monthly and up to-date bank reconciliations

Maximum 4 points on this performance measure.

• Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4

The LG had not yet been rolled on IFMS. It operated 27 Cash books/ Bank Accounts a sample of which were:

- General Fund A/c.
- UNICEF A/c.
- District Regional Pastoral Livelihood Resilience Project A/c.
- NUSAF II Sub-Project A/c
- Administration A/c
- CBG A/c.

All the monthly bank reconciliations for FY 2017/2018 were prepared by the respective sector Accountants, reviewed by the District Accountant and approved by the CFO as per sampled June 2018 bank reconciliations below:

- General Fund A/c was reconciled on 30th/6/2018. Balance as per bank statement: 237,665 and Balance as per cash book: 237,665.
- UNICEF A/c was reconciled on 30th/6/2018. Balance as per bank statement: 43,534,890 and Balance as per cash book: 35,638,890.
- District Regional Pastoral Resilience Livelihood A/c was reconciled on 30th/6/2018. Balance as per bank statement was 3,682,756 and balance as per cash book: 3,485,000.
- NUSAF II Sub-Project A/c was reconciled on 30th/6/2018. Balance as per bank statement: 1,396,484,576 and Balance as per cash book: 15,284,792.
- Administration A/c was reconciled on 30th/6/2018. Balance as per bank statement: 63,807 and balance as per cash book: 3,818,509.
- CBG A/c was reconciled on 30th/6/2018. Balance as per Bank Statement: 12,580 and Balance as per Cash Book: (12,580)

However, for July August in FY 2018/2019 bank reconciliations had not been prepared except for District Regional Pastoral Livelihood Resilience Project and for only July 2018. The delays were attributed to late procurements of the 27 Cash books. They were not yet procured even as at 30th/9/2018.



<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>There was evidence of timely payment of suppliers during FY 2017/2018 as indicated below:</p> <ul style="list-style-type: none"> <li>• M/s Walakori &amp; Sons Family Enterprises request for payment of Shs. 13,104,000 dated 25th/5/2018 for supply of 72 desks to Katabok P/S was recommended for payment on 25th/5/2018 and was paid on 12th/6/2018 vide PV- 8/06 within 18 days.</li> <li>• M/s GEOMAX Engineering Ltd request for payment of Shs. 131,658,943 on 19th/12/2017 for construction of Alakas Piped Water Supply Scheme – Phase 2 was recommended for payment on 9th/1/2018 and paid on 2nd/2/2018 vide PV- 7/2. Within 45 days.</li> <li>• M/s Loilong &amp; Sons Ltd request for payment of Shs. 17,387,950 on 6th/6/2018 for construction of 4 stance latrine in Alakas RGC was recommended for payment on 12th/6/2018 and paid on 13th/6/2018 vide PV-5/6 within 7 days.</li> </ul>	<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 had a substantive District Internal Auditor (Achia Paul Richard) who was appointed by the District Service Commission on 22nd/5/2108 under DSC Min. 4/ADSC/2018.</p>	<p>1</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>The LG produced all the 4 quarterly internal audit reports for FY 2017/2018 in accordance with the LGA Cap 243 as amended section 90 (2) as indicated below:</p> <p>Q1 on 31st/10/2017 Unreferenced, addressed to District Chairperson &amp; copied to CAO &amp; LGPAC.</p> <p>Q2 on 31st/1/2018 Unreferenced, addressed to CAO, copied to District Chairperson and LGPAC.</p> <p>Q3 on 30h/4/2018 Unreferenced, addressed to CAO, copied to District Chairperson and LGPAC.</p> <p>Q4 on 29th/7/2018. Unreferenced, addressed to CAO, copied to District Chairperson and LGPAC.</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>	<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>The only evidence of information which the Accounting Officer provided to Council and LGPAC regarding status of implementation of internal audit findings for FY 2017/2018 was on un accounted for funds in 1st &amp; 2nd quarters as per his communication to all Heads of Department Ref. CR/ADM/250/6 dated 20th/4/2018 entitled "Response to Management Letter by the District Internal Auditor" copied to the District Chairperson and LGPAC.</p> <p>Status of implementation on other audit findings in 1st &amp; 2nd quarter as well as 3rd and 4th quarterly internal audit reports for FY 2017/2018 was not provided as required.</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>Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1.</li> </ul>	<p>All the 4 quarterly internal audit reports for FY 2017/2018 were submitted to the Accounting Officer and LGPAC as follows:</p> <p>Q1 on 31st/10/2017 Unreferenced, addressed to District Chairperson &amp; copied to CAO &amp; LGPAC.</p> <p>Q2 on 31st/1/2018 Unreferenced, addressed to CAO, copied to District Chairperson and LGPAC.</p> <p>Q3 on 30h/4/2018 Unreferenced, addressed to CAO, copied to District Chairperson and LGPAC.</p> <p>Q4 on 29th/7/2018. Unreferenced, addressed to CAO, copied to District Chairperson and LGPAC.</p> <p>However, there was no evidence that the 4 quarterly internal audit reports for FY 2017/2018 were reviewed and followed-up by the LGPAC as required as at the time of the assessment.</p> <p>LGPAC sat on 20th – 22nd/12/2017 to review 1st quarter internal audit report for FY 2017/2018 among others but which was deferred to the following sitting which had not taken place up to the time of assessment.</p>	<p>0</p>
<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG maintains an up- dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4</li> </ul>	<p>The LG assets register was maintained only for Motor vehicles but contrary to the format in the Local Government Accounting Manual 2007 i.e. Form AC 33(a) Register of Fixed Assets – General, Form AC 33(b) Register of Fixed Assets – Motor Vehicles &amp; Heavy Plants, Form AC 33(c) Register of Fixed Assets – Land &amp; Buildings.</p> <p>The other two sections of the assets register i.e. Register of Fixed Assets - Land &amp; Buildings and Register of Fixed Assets – General, were not maintained at all.</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>Amudat DLG obtained a Qualified "Except for "Audit Opinion for FY 2017/2018.</p>	<p>2</p>
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Governance, oversight, transparency and accountability

<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 District Council met and discussed service delivery related issues as follows:</p> <ul style="list-style-type: none"> <li>• Min. 222/ADLG/04/2018 – Laying of 2018/2019 Draft Budget (Minutes of District Council meeting held on 5th April 2018).</li> <li>• Min. 212/ADLG/02/2018 –Approval of a Female Member of the District land Board (Minutes of District Council meeting held on 19th February 2018).</li> <li>• Min. 204/ADLG/12/2017 – Approval of Supplementary Budget; Min. 207/ADLG/12/2017 – Recommendations from Works and Technical Services Committee; and Min. 208/ADLG/12/2017 – Recommendations from Social Services Committee (Minutes of District Council meeting held on 19th December 2017).</li> <li>• Min. 187/ADLG/10/2017 – Approval of upgrading of Karita and Loroo Health Centres III to Health Centres IV and Alaka HC II to HC III; Min. 189/ADLG/10/2017 – Resolutions to Prohibit burning of grass in Amudat; and Min. 195/ADLG/10/2017 – Issues of Amudat Hospital (Minutes of District Council meeting held on 18th October 2017).</li> </ul>	<p>2</p>
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<p>The LG has responded to the feedback/complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• Evidence that LG has designated a person to coordinate response to feedback (grievance /complaints) and responded to feedback and complaints: score 1.</li> </ul>	<p>There was no officer designated a person to coordinate response to feedback.</p>	<p>0</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>At the time of assessment, there was no clear 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>The district had not displayed the Payroll and Pensioner Schedule on any public notice board at the Amudat District Headquarters.</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>	<ul style="list-style-type: none"> <li>• The procurement plan had not been displayed on any notice board at Amudat District headquarters.</li> <li>• However, information on 'Invitation for Open Bidding for Works and Revenue Collection, Framework Contracts, and Pre-Qualification for Works, Services, and Supplies for the FY 2018/2019' had been displayed on the Notice Board at the Administration Block at Amudat District Headquarters. Also, an advertisement appeared in the New Vision newspaper of 3rd September 2018.</li> </ul>	<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>Evidence was not provided to show that performance assessment results and implications, were published.</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>No evidence was availed at the time of assessment as the Registry at District Headquarters was locked. Therefore, it could not be ascertained whether the district had communicated and explained guidelines, circulars and policies issued by the national level to LLGs during FY 2017/2018.</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 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 district, in conjunction with the Office of the IGG, held one baraza in Amudat Town Council on 10th April 2018. The key issues tackled were:</p> <ul style="list-style-type: none"> <li>• Management of NUSAF 3 – in response to complaints of misuse of funds.</li> <li>• Misappropriation of UGX 470 million meant for tarmacking roads in Amudat Town Council.</li> <li>• Inadequate drilling of boreholes and poor maintenance of boreholes in Loroo Sub-county.</li> <li>• Allocation and drilling of boreholes exclusively in areas regarded as strongholds of the district leadership.</li> <li>• Poor state of the roads in Amudat district.</li> <li>• Unavailability of a Government Hospital in Amudat District.</li> <li>• Delay in electronic branding of cattle in Amudat District.</li> </ul> <p>The IGG team comprised of Mr. Mwebaza Peter, and Mr. Kiryowa Sharif.</p> <p>The district was represented by the CAO /Amudat (Mr. Alia Seraphine).</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>The district did not have any officer designated as Gender Focal Person but the CDO provided guidance and support to all 3 sub counties through training of sub counties staff on gender mainstreaming. The trained staff included sub county chiefs, CDOs and parish development committees. This was evidenced by the trainees' attendance lists and requisition for training funds form though there was no activity report written.</p>	<p>2</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 and social inclusions and that more than 90 % of previous year's budget for gender activities/ vulnerability/ social inclusion has been implemented: score 2.</li> </ul>	<p>The CDO planned a number of activities according to the 2018/19 work plan to strengthen gender roles through the following activities:</p> <ol style="list-style-type: none"> <li>1. Conducting quarterly meetings for women and youth councils.</li> <li>2. Provide support to disability groups.</li> <li>3. Support functional adult literacy activities.</li> </ol> <p>This was evidenced the availability of the above activities in the district AWP 2018/2019 (pages 69 and 70).</p> <p>The budget allocated for gender mainstreaming activities in 2017/18 FY was 4,000,000 and it was fully utilised as evidenced by payment vouchers number 11/5 worth 4,000,000 dated 18/5/2018.</p>	<p>2</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>Environmental screening was done for only the water projects as the environment officer reported that she was not facilitated to screen for other projects. Therefore, only one out the five sampled projects (Alakas piped water scheme) was screened.</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>There were only two out of the five sampled where there was evidence that the LG had integrated environmental and social management and health and safety plans in the contract bid documents. This was only evidenced by budget included in BOQ for environmental restoration. For example, Construction of a classroom block with an office, installation of water harvesting tank of 6000 litres and lightening arrestors at Nabotokom primary school had a budget of 150,000 and the Completion of a production store at the district had a budget of 30,000. The rest of the 3 sampled projects did not provide for environment in their bid documents/BOQs.</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>The projects sampled were implemented on both district-owned land and community land. The district land was donated by the community though there was no agreement written between the two parties. It was revealed that the district was in the process of surveying the land on which the district headquarters were located</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 completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1</li> </ul>	<p>The Environmental and Social Mitigation Certification Form was not completed for any of the sampled completed projects and the reason was lack of a budget.</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 contract payment certificated includes prior environmental and social clearance (new one): Score 1</li> </ul>	<p>The contract payments for sampled projects were effected without seeking for any environmental and social clearance as a requirement.</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 explained that she was not part of the project monitoring team and therefore was not able to write any monthly reports as she did not visit any of the projects during their implementation.</p>	<p>0</p>
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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>The LG Department of Education had 11 governments P/S and a total of 79 schools including community, ECD centres and secondary schools. For the 11 schools, there were 95 teachers and enrolment of 6254 learners.</p> <p>There was evidence that for FY 2018/19, under Vote 581, the LG budgeted 766,383,460 million for wages for all teachers including the 79</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 Staff list obtained indicated that most of the schools had at least 7 teachers per school and 1 Head Teacher. However, 4 out of 11 schools had less than 7 teachers deployed:</p> <ul style="list-style-type: none"> <li>Looro P/S had 7 teachers including a head teacher.</li> <li>Lokales P/S had 6 teachers</li> <li>Alakas P/S had 6 teachers</li> <li>Akorikeyya P/S had 6 teachers.</li> </ul>	0
<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>If 100%: score 6</li> <li>If 80 - 99%: score 3</li> <li>If below 80%: score 0</li> </ul> </li> </ul>	<p>The LG filled 95 positions of primary school teachers. With a ceiling of 131 teachers, the LG filled 72.5 % (below 80% minimum score=0) of the positions for primary school teachers.</p>	0

<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>The LG Department of Education had filled 1 position for Inspector of Schools. The senior inspector of schools position, was vacant.</p> <p>Mr. Lingaa Emmanuel was the substantively appointed inspector of schools. Appointed on 18/04/2017.</p> <p>The department had no Wage Bill to appoint the Senior inspector of schools as per the structure.</p>	<p>6</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>There was evidence that the LG had submitted a recruitment plan to HRM for 52 Primary teachers on 30/05/2018, after the required date of 30th / 04:</p> <ul style="list-style-type: none"> <li>• 6 deputy head teachers</li> <li>• 5 Education assistants</li> <li>• 6 Senior Education Assistants</li> <li>• 31 Education Assistants recruitment.</li> <li>• 5 Education Assistants on replacement.</li> </ul>	<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 LG did not submit a recruitment plan for 1 senior inspector of schools to fill the gap at the department because there was no wage bill.</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 district had one (1) Inspector of Schools. There was no evidence that his performance was appraised</p>	<p>0</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 <ul style="list-style-type: none"> <li>o 90 - 100%: score 3</li> <li>o 70% and 89%: score 2</li> <li>o Below 70%: score 0</li> </ul> </li> </ul>	<p>The District had eleven (11) primary schools and therefore 11 Head Teachers. There was no evidence that they were appraised.</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 received and circulated the following circulars/guidelines and policies:</p> <ul style="list-style-type: none"> <li>- On 11/7/2018. The national schools sanitation guidelines were disseminated and acknowledged by the head teachers of 6 primary schools including Kanta, Ding dinga, Katabok, Akorikeya, Kalas and Katikig.</li> <li>• Teachers guide on conflict.</li> <li>• National strategy for girls' education.</li> <li>• Conflict &amp; disaster risk management - Guidelines on violence against Children, acknowledgement for all the above was done on 11/7/2018</li> </ul>	<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>There was no evidence that the LG department had a meeting with head teachers to explain the guidelines and circulars disseminated.</p>	<p>0</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>There was evidence that the LG department of Education inspected some schools as follows:</p> <ul style="list-style-type: none"> <li>• Term III inspection was done and report dated 19/1/2018. 30 out of 79 schools were inspected according to the report.</li> <li>• Term II inspection was done and report written on 11/10/2018. The inspection period was July to September, 30 schools out of 79 were inspected as per the inspection report</li> <li>• Term I inspection was done and reported on 18/4/2018. The inspection period was Jan-March 2018.</li> <li>• However, only 30 schools out of 79 registered and licenced schools were inspected.</li> </ul> <p>Thus, school inspection for the 3 terms was at 37.9 %, below 50 % for a score.</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 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>There was no evidence that the department had a meeting to discuss the findings of the school inspection reports. The sector committee also did not meet to discuss the reports of school inspection.</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>There was no evidence that the LG Department of Education submitted School inspection report to DES.</p> <p>The inspector of school informed the assessment team that the reports had not yet been submitted and he was planning to do so</p> <p>The matrix of submission obtained from DES did not indicate that the reports were submitted.</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 inspection recommendations are followed- up: score 4.</li> </ul>	<p>There was no evidence that the school inspection recommendations from the reports were followed up since there was no discussion of the recommendation.</p>	<p>0</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>There was no evidence that the school list and the PBS generated lists were consistent and accurate as there was no PBS list provided at the LG for comparison at the time of the assessment.</p> <p>The list which the District Planner provided was an enrolment list of schools but not PBS generated.</p>	<p>0</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>Enrolment data from the 11 schools were not compared with the PBS list because the latter was not provided to the assessment team for review.</p>	<p>0</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 Social Services Committee met and discussed service delivery issues during FY 2017/2018 as per:</p> <ul style="list-style-type: none"> <li>• Minutes of the Committee meeting held on 11th – 12th April 2018 (under Min. 07/SSC/ADC/04/2018 – Presentation of Draft Budget for FY 2018/2019 by Heads of Department).</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>There were no independent reports availed to show that the social Services Committee presented issues that required approval to Council.</p> <p>However, from the minutes of Council, it was established that the Social Services Committee presented issues for approval during the Council meeting held on 19th December 2017 (Min. 208/ADLG/12/2017 – Recommendations from Social Services Committee).</p>	2
<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>There was evidence that SMCs' in sampled schools were functional:</p> <ul style="list-style-type: none"> <li>• Loro P/S SMC meeting was held on 8/6/2018 the Agenda was on Review of the Schools annual work plan.</li> <li>• Nabokotom P/S SMC meeting was held on 18/2/2018. The meeting was on poor enrolment and late reporting of teachers.</li> <li>• Katabok SMC meeting was held on 3/8/2018. The Agenda was on Absenteeism of girls from school and</li> <li>• Katikit P/S SMC meeting took place on 2/2/2018. The Agenda of the meeting was on change of the school signatories and Communication from the SMC chairperson among other Agenda</li> <li>• Kalas Boys P/S SMC meeting was on 1/6/2018 to review the schools plan.</li> </ul>	5
<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>There was evidence on the notice board at the DEO's office that the list of schools receiving non-wage recurrent grants was made public.</p> <p>The list was dated 16/8/2018, for 17,062,958.</p>	3
Procurement and contract management			

<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>The procurement input dated 18/1/2017 was submitted to PDU before 30th April 2017</p> <ul style="list-style-type: none"> <li>• Construction of a unit teachers house, installation of a 6000-water tank and lightening arresters at Katikits P/S and Naboktom P/S</li> <li>• Construction of a two stance VIP latrine at Kalas Girls P/S and Karita P/S.</li> <li>• completion of a 2-classroom block, installation of 6000 litre water tank and lightening arresters at Lopedot P/S.</li> </ul>	<p>4</p>
<p>Financial management and reporting</p>			
<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>There was evidence of timely certification and recommendation of suppliers for payment during FY 2017/ 2018 by the Education department as indicated in the sampled payments below:</p> <ul style="list-style-type: none"> <li>• M/s Walakori &amp; Sons Family Enterprises request for payment of Shs. 13,104,000 dated 25th/5/2018 for supply of 72 desks to Katabok P/S was certified under Interim Certificate No. 2 dated 25th/5/2018, recommended for payment on 25th/5/2018 and was paid on 12th/6/2018 PV- 8/06 within 18 days.</li> <li>• M/s Alakas Trading Co. Ltd request for payment of Shs. 13,500,000 dated on 3rd/5/2018 for supply of 72 desks to Nabokotom P/S was certified under Interim Certificate No. 1 dated 11th/5/201 8, recommended for payment on 14th/5/2018 and paid on 14th/5/2018 vide PV-4/5 within 11 days.</li> <li>• M/s Walakori &amp; Sons Family Enterprises request for payment of Shs. 13,104, 000 dated 24th/4/2018 for supply of 72 desks for Lopedot P/S was certified under Interim Certificate No. 1 dated 24th/4/2018, recommended for Payment on 24th/4/2018 and paid on 26th/4/2018 vide PV-13/4 within 2 days.</li> </ul>	<p>3</p>

<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>The Education department submitted the annual performance report for the FY 2017/2018 (including all four quarterly reports) to the Planner on 26th September 2018 (as per Email from the PBS – Re: Reg. Head of Department Validation’ dated 26th September 2018 alerting the Planner / Amudat DLG about the submission by the Department)</p> <p>The submission was made after the deadline of 15th July 2018.</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>The LG Education department had 7 internal audit findings in FY 2017/2018 but there was evidence of only one query that was cleared i.e. unaccounted for funds and information provided to the internal audit on the status of its implementation as at the time of this assessment.</p> <p>The pending internal audit queries raised in FY 2017/2018 were as follows:</p> <ol style="list-style-type: none"> <li>1. Lack of books of accounts in all the 11 P/S.</li> <li>2. High labour turn-over in P/S – 31 teachers left in FY 2017/2018 and were not replaced.</li> <li>3. Non-appointment of substantive Deputies in P/S.</li> <li>4. Low syllabus coverage in P/S.</li> <li>5. Poor record keeping in P/S.</li> <li>6. Non-involvement of SMCs in budgeting for UPE funds.</li> </ol>	<p>0</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</li> </ul> <p>on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills, etc.: Score 2</p>	<p>On 11/7/2018 National strategy for girls' education, keeping safe at School guidelines were disseminated through the head teachers of 7 primary schools, an acknowledgement note was available for the list of guidelines received for the different schools at the DEOs office.</p>	2
<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>The LG in collaboration with gender department issued and explained guidelines on sanitation for girls and PWD in P/S. The head teachers received guidelines on Understanding &amp; Managing Menstruation on 11/7/2018 and the National Schools Sanitation guidelines also on the 11/7/2018. Seven (7) schools received these guidelines.</p>	2
<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>There was evidence from the sampled and visited schools that</p> <p>SMCs' met the gender requirement.</p> <p>The 5 sampled schools:</p> <ul style="list-style-type: none"> <li>• Katikit P/S had 6 female members out of 13 members</li> <li>• Nabokotom P/S had 4 female members out of 7.</li> <li>• Katabok P/S had 3 female members out of 9.</li> <li>• Kalas Boys P/S had 5 female members out of 13</li> <li>• Kalas girls P/S had 6 female members out of 13.</li> </ul>	1

<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated 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 dissemination of the environment guidelines in schools by the environment officer.</p>	<p>0</p>
<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated 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>There were no screening forms to indicate that education projects were subjected to environment screening before execution.</p>	<p>0</p>
<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated 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 checked whether the mitigation plans are complied with: Score 1</li> </ul>	<p>There was no evidence of education project site visitation report as required</p>	<p>0</p>

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>The DLG Health department had filled the structure for health workers with a wage bill provision from PHC wage FY 2018/2019 as indicated below:</p> <ul style="list-style-type: none"> <li>• Out of 253 health staff establishment for Amudat DLG as per the PHC staff structure for 2018/2019, 25 were on temporary basis leaving 228.</li> <li>• Out of 228 staff on the wage bill provision, only 68 had been filled representing 30%.</li> </ul>	0
<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>The LG Health department had submitted a comprehensive recruitment plan to HRM for FY 2018/2019 as indicated below:</p> <ul style="list-style-type: none"> <li>• A non-referenced letter from Ag. DHO to Human Resource Officer entitled “Requisition letter to fill vacant positions in Health department for FY 2018/2019” dated 15th/6/2018.</li> </ul>	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>The district had eight (8) health facilities and therefore 8 Officers in Charge of health facilities as follows;</p> <p>Health Center III - 3</p> <p>Health Center II - 5</p> <p>There was evidence that only three (3) Officers in Charge of Health Centers were appraised as per the appraisal reports seen, representing 38% compliance. The three Officers in Charge were appraised on the following dates;</p> <ol style="list-style-type: none"> <li>1. Omac Francis, Enrolled Nurse Lokales HC II – 29th June 2018</li> <li>2. Nakiutu Allen, Clinical Officer, Karita HC III – 27th June 2018</li> <li>3. Atai Catherine, Enrolled Nurse, Alakas HC II – 27th July 2018</li> </ol>	0
<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 Health department had deployed health workers in line with the list submitted with the budget for FY 2018/2019 as indicated in the 5 sampled health facilities below:</p> <ol style="list-style-type: none"> <li>a) Amudat Hospital Approved 175 and filled 39.</li> <li>b) Loro HCIII Approved 9 and filled 4.</li> <li>c) Achorchori HCII Approved 9 and filled 1.</li> <li>d) Amudat Town Council HCII Approved 9 and filled 3</li> <li>e) Alakas HCII Approved 9 and filled 5.</li> </ol>	4
Monitoring and Supervision			



<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 Ag. DHO had communicated all guidelines, policies, circulars issued by MoH in FY 2017/2018 to health facilities as evidenced in the 5 sampled health facilities.</p> <p>The communication by Ag. DHO on 21st/8/2017 to health facilities was on the following policies and circulars:</p> <ul style="list-style-type: none"> <li>Marburg Prevention.</li> <li>Trachoma Signs and Symptoms Risk factors.</li> <li>Keeping Uganda Polio free.</li> <li>HMIS, 009 Nutrition Addendum 2014 – MoH.</li> <li>Documentation Journal for Quality Improvement Activities HMIS Form 00114 - 2016</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>The Ag. DHO held meetings with health facility in-charges and among others explained guidelines, policies, circulars issued by national level as evidenced in the 5 sampled health facilities.</p> <p>At the 5 visited health facilities namely Amudat Hospital, Amudat Town Council HCII, Loro HCIII, Achorichor HCII and Alakas HCII, the following were explained to the in-charges:</p> <ul style="list-style-type: none"> <li>Quality of core performance card.</li> <li>National Medical Store Delivery Schedule.</li> <li>Performance Graphs – 2018/2019.</li> <li>Quality Improvement Project among others.</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>Although Amudat LG neither had a District Hospital nor a HCIV, it formed a partnership and formed a HCIV within which they created a HSD comprising of the DHT and Hospital staff.</p> <p>The created HSD then conducted the quarterly support supervision 100% of Amudat Hospital and HCIV as indicated below:</p> <ul style="list-style-type: none"> <li>• Q1: Supervised Amudat Hospital COU (PNFP) &amp; HCIV on 10th/10/2017.</li> <li>• Q2: Supervised Amudat Hospital COU (PNFP) &amp; HCIV on 8th/1/2018.</li> <li>• Q3: Supervised Amudat Hospital COU (PNFP) &amp; HCIV on 10th/4/2018.</li> <li>• Q4: Supervised Amudat Hospital COU (PNFP) &amp; HCIV on 4th/7/2018.</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 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>There was evidence that the created HSD had supervised lower level health facilities in FY 2017/2018 as indicated below:</p> <p>Q1 supervision was conducted in:</p> <ol style="list-style-type: none"> <li>1. Amudat Town Council HCII on 11th/10/2017.</li> <li>2. Loro HCII on 12th/10/2017.</li> <li>3. Achorichor HCII on 13th/10/2017.</li> <li>4. Alakas HCII on 16th/10/2017.</li> <li>5. Cheptapoyo HCII on 17th/10/2017.</li> <li>6. Karita HCIII on 18th/10/2017</li> <li>7. Lokales HCII on 19th/10/2017.</li> </ol> <p>Q2 supervision was conducted in:</p> <ol style="list-style-type: none"> <li>1. Amudat Town Council HCII on 10th/1/2018.</li> <li>2. Loro HCII on 11th/1/2018.</li> <li>3. Achorichor HCII on 12th/1/2018.</li> <li>4. Alakas HCII on 15th/1/2018.</li> <li>5. Cheptapeyo HCII on 16th/1/2018.</li> </ol>	<p>3</p>

6. Karita HCIII on 18th/1/2018.

7. Lokales HCII on 22nd/1/2018.

Q3 supervision was conducted ib:

1. Amudat Town Council on 11th/4/2018.

2. Loroo HCII on 13th/4/2018.

3. Achorichor HCII on 16th/4/2018.

4. Alakas HCII on 17th/4/2018.

5. Cheptapoyo HCII on 19th/4/2018.

6. Karita HCIII on 23rd/4/2018

7. Lokales HCII on 24th/4/2018.

Q4 supervision was conducted in:

1. Amudat Town Council HCII on 5th/7/2018.

2. Loroo HCII on 6th/7/2018.

3. Achorichor HCII on 9th/7/2018.

4. Alakas HCII on 11th/7/2018.

5. Cheptapoyo HCII on 12th/7/2018.

6. Karita HCIII on 13th/7/2018.

7. Lokales HCII on 17th/7/2018.

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

Maximum 10 points for this performance measure

- 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

There was evidence that all the 4 quarterly reports were discussed and used to make recommendations for corrective actions in FY 2017/2018 as indicated below:

- Q1 supervision meeting held on 10th – 11th /10/2017 Min. 4: The issues were conflict of duties affecting timeliness of surveillance submission in Amudat Hospital & HCIV, lack of staff houses in Amudat Town Council HCII. The recommendations were that the in-charge should specify roles and responsibilities of each staff and Amudat Town Council HCII should plan for twin staff house..
- Q2 supervision meetings held on 11th – 12th/1/2018 Min. 1: The issues were poor record keeping in Loroo HCIII and screening of children at OPD in Achorichor HCII. The recommendations were that the in-charge Loroo HCIII should improve on record keeping by creating records office within OPD and that all children were screened for malnutrition in Achorichor HCII.
- Q3 Supervision meeting held on 17th/4/2018 Min. 1: The issue discussed was no fence for facility protection in Alakas HCII and the recommendation was that the in-charge should lobby for fencing from the Sub-county budget.
- Q4 supervision meetings held on 4th – 17th/7/2018 discussed the issue of understaffing in all the health facilities and the recommendation was that the LG should lobby for recruitment of health staff.

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

Maximum 10 points for this performance measure

- Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6

There was evidence that the recommendations were followed up and specific activities undertaken for correction as indicated below;

1. Q1: Amudat Hospital & HCIV.

Corrective actions taken:

- Roles and Responsibilities were spelt out for each staff and performance was according to his/her job description.
- Construction of twin staff houses in Amudat Town Council HCII was in progress.

2. Q2: Loroo HCII.

Corrective action taken:

- There was a record section created in OPD and record keeping improved.
- All children attending OPD were screened for malnutrition.

3. Q3: Alakas HCII.

Corrective action taken:

- There was a promise that the Sub-county Chief of Amudat Sub-county would handle the issue of fencing the facility.

4. Q4:

Corrective action taken:

The understaffing issue in all the health facilities had been addressed by the Ag. DHO & CAO and the recruitment plan for FY 2018/2019 had been submitted.

<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>There was no evidence that the LG had submitted accurate/consistent data regarding the health facilities receiving PHC funding as per HMIS reports and PBS.</p> <p>The Ag. DHO did not avail any documentary evidence addressing the subject though he claimed that it was submitted.</p>	<p>0</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>The Social Services Committee met and discussed service delivery issues during FY 2017/2018 as per:</p> <ul style="list-style-type: none"> <li>Minutes of the Committee meeting held on 11th – 12th April 2018 (under Min. 07/SSC/ADC/04/2018 – Presentation of Draft Budget for FY 2018/2019 by Heads of Department).</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>From the minutes of Council, it was established that the Social Services Committee presented health issues for approval during the Council meeting held on 19th December 2017 (Min. 208/ADLG/12/2017 – Recommendations from Social Services Committee).</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 health facilities had functional HUMCs established, meetings held and discussion of budget and resource issues on quarterly basis as per the 5 sampled health facilities indicated below:</p> <ul style="list-style-type: none"> <li>• Amudat Hospital Management Board had 25 members and held their Board meetings on 4th/8/2018, 22nd/10/2017 and 9th/6/2018 representing 75%. Issues discussed included lack of salary increment under Min. 02/08.</li> <li>• Amudat Town Council HCII had 5 members of HUMC and held 1 meeting on 18th/7/2017 representing 25%. Issues discussed included infrastructure which needed to be speeded up since the health facility was still in Town Council building and had no vital structures like patients pit latrine and water supply..</li> <li>• Alakas HCII had 5 members of HUMC and held their meetings on 1st/11/2017, 22nd/2/2018 and 7th/6/2018 representing 75%. Issues discussed included support staff like cleaners who needed close supervision as they were not doing their work properly.</li> <li>• Achorichor HCII had 5 members of HUMC and held their meetings on 12th/10/2017, 11th/1/2018, 13th/4/2018 and 6th/7/2018 representing 100%. Issues discussed included lack of fencing at the facility, expired drugs among others.</li> <li>• Loro HCIII had 7 members of HUMC and held their meetings on 11th/10/2017, 10th/1/2018, 11th/4/2018 and 5th/7/2018. Issues discussed included failure to utilize information collected by VHT for planning and monitoring the health facility, failure to supervise VHT among others.</li> </ul> <p>The average percentage was 74.2%.</p>
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<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>There was no evidence that the LG had publicized health facilities receiving PHC non-wage recurrent grants as the DHO did not provide any and there was none that could be located on the facility notice boards.</p>	<p>0</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 LG Health department did not submit input to procurement plan to the PDU by 30th April 2018 as required.</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 LG Health department submitted form PP1 to the PDU on 14/06/ 2018 for 2018/19 procurement items that included the construction of a staff house at Alakas HC II and the completion of a maternity ward at Karita HC III.</p>	<p>2</p>



<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4.</li> </ul>	<p>There was evidence that the DHO had certified and recommended suppliers timely for payment as per the sampled payments below:</p> <ul style="list-style-type: none"> <li>M/s Loilong &amp; Sons Ltd request for payment of Shs. 17,387,950 on 6th/6/2018 for construction of 4 stance latrine in Alakas RGC was certified under Interim Certificate No. 1 dated 12th/6/2018, recommended for payment on 12th/6/2018 and paid on 13th/6/2018 vide PV-5/6 within 7 days.</li> <li>M/s Koropot Suppliers &amp; Construction Works Ltd request for payment of Shs. 27,471,500 dated 20th/3/2018 was certified under Interim Certificate No. 1 dated 5th/4/2018, recommended for payment on 5th/4/2018 and was paid on 6th/4/2018 vide PV- 2/4 within 17 days.</li> <li>M/s ASLI ENERGY request for payment of Shs. 1,600,000 dated 7th/2/2018 for supply of fuel for Amudat Laboratory Hub activities for January, February &amp; March 2018 was recommended for payment on 7th/2/2018 and was paid on 20th/2/2018 vide PV- 3/2 within 13 days.</li> </ul>	<p>4</p>
<p>Financial management and reporting</p>			
<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 Health department submitted the annual performance report for the FY 2017/2018 (including all four quarterly reports).</p> <p>However, no evidence was availed to ascertain when the submission was made to the Planner to establish whether it was by mid-July (or after) for consolidation.</p>	<p>0</p>

<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>The LG Health department had 4 internal audit findings in FY 2017/2018 but there was evidence of only one query that was cleared i.e. unaccounted for funds and information provided to the internal audit on the status of its implementation as at the time of this assessment.</p> <p>The pending internal audit queries raised in FY 2017/2018 were as follows:</p> <ol style="list-style-type: none"> <li>1. LG Health department had not submitted their Q1 Progress Report to the line ministry.</li> <li>2. Sanitation &amp; Hygiene in all Health Units was very poor.</li> <li>3. Proper books of accounts not maintained for Sector Grants.</li> </ol>	<p>0</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</li> </ul> <p>% women: score 2</p>	<p>There was evidence that the HUMC met the gender composition as per guidelines as seen in the 5 sampled lower health facilities below:</p> <ul style="list-style-type: none"> <li>• Amudat Town Council HCII HUMC had 5 members of which 2 were men and 3 were female representing 60%</li> <li>• Alakas HCII HUMC had 5 members of which 1 was a male and 4 were female representing 80%.</li> <li>• Loro HCIII had 7 members of which 4 were male and 3 females representing 43%.</li> <li>• Achorichor HCII had 5 members of which 3 were male and 2 were female representing 40%</li> <li>• Amudat Hospital COU (PNFP) had 15 members of which 10 were male and 5 were female representing 33%.</li> </ul> <p>Therefore, on average <math>(256/5) =</math></p> <p>There was evidence that the recommendations were followed up and specific activities undertaken for correction as indicated below;</p>	<p>2</p>

1. Q1: Morulinga HCI I& Ngoleriet HCII

Corrective action taken:

- Fridges were repaired and could function well so as to maintain cold chain for UNEPI.

2. Q2: Ngoleriet HCII.

Corrective action taken:

- The solar lighting system was repaired.

3. Q3: Morulinga HCII.

Corrective action taken:

- VHT were supported and could sensitize the community on health issues like good nutrition and environmental health.

4. Q4: Morulinga HCIII.

Corrective action taken:

The Nursing Officer in-charge took over the MCH services.

51.2% of the 5 sampled facility HUMCs met the gender composition as required.

<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>The LG issued guidelines on how to manage sanitation in health facilities from 25th /7 – 30th/8/2017 during the supervision visits by DHT as indicated in the 3 out of the 5 sampled health facilities below:</p> <ol style="list-style-type: none"> <li>At Amudat Hospital COU (PNFP), Amudat Town Council HCII &amp; Alakas HCII the guidelines issued were: <ul style="list-style-type: none"> <li>Bath structures and how to prevent drainage from blockage – 2016.</li> <li>Guideline on proper hand washing using Tip Top facility and soap after using pit latrine – 2012.</li> <li>Guideline on how to keep latrines clean and covered – 2017.</li> </ul> </li> </ol> <p>Note: Those guidelines were issued during 3rd quarter support supervision from 10th - 23rd/4/2018.</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>The Health facility infrastructure projects implemented in 2017/18 FY were not environmentally screened before approval of construction as the environmental officer cited lack of budget as the reason for not conducting environment screening.</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 check whether the mitigation plans are complied with: Score 2</li> </ul>	<p>No site visits were conducted by the environmental officer as she claimed was not part of the project monitoring team</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>There was evidence that the LG had issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal.</p> <p>The following were posted on the notice boards as indicated in the 3 out of the 5 sampled health facilities:</p> <ul style="list-style-type: none"> <li>Guidelines on use of colour coded bins - 2017</li> <li>Placenta pit management – 2017</li> <li>Use of heavy gloves and face masks and gumboots for cleaners - 2016</li> <li>Non-touch hand washing using Tip Top where one steps on water handle - 2014</li> </ul>	<p>4</p>

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>From the review of the AWP and data from MoWE indicated that, Amudat District safe water coverage average was at 56.5%. There were three (3) sub counties that were found to have safe water coverage below the district average. These were;</p> <p>Karita S/C 49%, Loroo S/C 48% and Amudat T S/C 54%.</p> <p>AWP and Budget for FY 2018/19 indicated that Sector Development grant of Ushs 487,030,968 was planned.</p> <p>The AWP and Budget 2018/19 indicated the following projects had been planned for FY 2018/19:</p> <ul style="list-style-type: none"> <li>• 5 New bore holes siting and drilling at a cost of Ush 24,592,443 each</li> <li>• 20 Rehabilitations of boreholes at a cost of Ushs 3,213,580 each</li> <li>• Construction of 1 PWS scheme at a cost of Ushs 147,780,500</li> <li>• Design of 1 PWS scheme at a cost of Ushs 25,372,640.</li> </ul> <p>Amudat S/C was allocated the Construction of PWS scheme and 4 borehole rehabilitation of boreholes, Karita S/C was allocated a design for the PWS scheme and 6 borehole rehabilitation projects while Loroo S/C was allocated 6 borehole rehabilitation projects.</p> <p>The 5 new boreholes had not yet been allocated to sub counties by the time of the assessment. The DWO explained to the Assessment team that the allocation of new boreholes to sub counties was pending awaiting a District planning and Advocacy meeting which was to decide where to allocate the new water sources, however no specific date for the meeting</p>	0

		<p>was revealed to the Assessment team.</p> <p>Therefore, the total budget allocations to sub counties with safe water coverage below district average was calculated to be 46.11% by the time of the assessment.</p>	
<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:</li> </ul> </li> </ul> <p>Score 15</p> <ul style="list-style-type: none"> <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>	<p>The review of Annual progress reports submitted to MoWE (Quarter 1 to Quarter 4 reports) and sample site visits revealed that;</p> <ul style="list-style-type: none"> <li>• First Quarter Report dated 20th October 2017, ten (10) boreholes were rehabilitated.</li> <li>• Second Quarter Report dated 05th February 2018, 10 boreholes were rehabilitated.</li> <li>• Third Quarter report Dated 7th May 2018, 1 design (feasibility study) for a PWS scheme at Dingdinga was completed and construction of a PWS scheme at Alakas was commenced.</li> <li>• Fourth Quarter report dated 16th July 2018, 6 hand pump boreholes and 2 production wells were drilled.</li> </ul> <p>However, by the time of the assessment, the DWO could not present the AWP and budget for FY 2017/18 to verify whether the implemented projects were the exact ones planned. The DWO said that a copy of the AWP 2017/18 had been taken to Moroto by one of the district staff hence not available for review by the time of the assessment.</p>	<p>0</p>
<p>Monitoring and Supervision</p>			

<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>A review of Site progress reports presented to the Assessment team, it was found out that;</p> <ul style="list-style-type: none"> <li>• 20 borehole rehabilitation projects were monitored and supervised as evidence by the progress report dated 16th February 2018.</li> <li>• Progress report dated 26th June 2018 revealed that 2 production wells had been monitored and supervised.</li> <li>• Progress report dated 30th July 2018 revealed that the DWO monitored and supervised the siting and drilling of 5 hand pump boreholes.</li> </ul>	<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 no evidence that the district had submitted accurate/consistent data for the previous FY. The DWO did not present the AWP 2017/18 nor Performance contract to verify the data obtained from the MoWE</p>	<p>0</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 listed in the MIS report provided by the MoWE reflected 7 New Deep boreholes, 20 boreholes for rehabilitation, Design study 1 Piped Water supply scheme, Construction of 1 PWS scheme and construction of 1 VIP latrine.</p> <p>However, DWO did not present the Performance contract and PBS for the assessment team to verify the consistency of the data.</p>	<p>0</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 DWO did not present any procurement plan submitted to PDU that covers all the investment items in the approved sector AWP and budget for FY 2018/19.</p> <p>Instead the DWO explained that he had submitted procurement requisitions to PDU which were found not compliant.</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>There was no proof of appointment of Contract manager for WSS projects in the district by the district neither was there a contract management plan presented to the assessment team.</p> <p>The DWO instead presented proof of the site meetings held evidenced by the minutes;</p> <p>For instance, minutes of the inception site meeting held on 21st February 2018 for the siting and drilling of 5 boreholes and inception site meeting for Alakas piped water supply dated 22nd February 2018 were presented to the Assessment team.</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 water and sanitation facilities constructed as per design(s): score 2</li> </ul>	<p>The contractor for M/S East Africa Boreholes Ltd had not yet completed the works as per design by the time of Assessment.</p> <p>Progress report for siting and drilling of 5 boreholes dated 30th July 2018 together with the site visit by the Assessment team revealed that the contractor had not constructed water troughs as indicated in the contract agreement and no tree seedlings had been planted by the time of the assessment and the DWO recommended that the contract should not be paid until the above works were completed.</p> <p>The sampled water facilities were,</p> <ul style="list-style-type: none"> <li>Kompas BH (Karita S/C)</li> <li>Koopulio BH (Karita S/C)</li> <li>Ashokonion Production well (Karita S/C),</li> <li>Dingdinga production well (Amudat S/C)</li> <li>Piped Water Supply Scheme at Alakas</li> </ul>	<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 contractor handed over all completed WSS facilities: score 2</li> </ul>	<p>The contractor had not yet completed the works as per the contract hence no hand over report was prepared.</p>	<p>0</p>

The district has appointed Contract Manager and has effectively managed the WSS contracts

Maximum 8 points for this performance measure

- If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2

The DWO presented a certificate dated 24th August 2018 of substantial completion of construction of Alakas Piped Water Supply scheme phase.

Since the contractor had not yet completed some of the works for the boreholes, no completion certificates had been issued.

However, some interim certificates had been prepared and issued by the DWO;

For instance;

- M/S Geomax Equipment Ltd requested for payment of Ushs 131,658,943 for construction of Alakas Piped Water Supply dated 19th Dec 2017 and DWO prepared interim payment certificate on 9th January 2018.

- M/S Jaber Contractors Ltd submitted request for payment of Ushs 75,000,000 for construction of Alakas Piped water supply scheme phase 2 dated 5th March 2018 and DWO prepared interim payment certificate on 7th March 2018.

- M/S East Africa Boreholes Ltd submitted request for payment of Ushs 56,000,000 for siting and drilling of 5 boreholes dated 26th June 2018 and DWO prepared interim payment certificate on 26th June 2018.

<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>There was evidence that the District Water department had timely certified and recommended suppliers for payment as per the sampled payments below:</p> <ul style="list-style-type: none"> <li>M/s GEOMAX Engineering Ltd request for payment of Shs. 131,658,943 dated 19th/12/2017 for construction of Alakas Solar Powered Mini Piped Water Supply System Phase 1 was certified under Interim Certificate No. 2 dated 9th/1/2018, recommended for payment on 9th/1/2018 and was paid on 2nd/2/2018 vide PV-7/2 Within 45 days.</li> <li>M/s Jaber Contractors Ltd request for payment of Shs. 75,000,000 dated 5th/3/2018 for completion of Alakas Piped Water Supply Scheme – Phase 2 was certified under Interim Certificate No. 1 dated 7th/3/2018, recommended for payment on 7th/7/2018 and was paid on 7th/3//2018 vide PV-6/3 within 2 days.</li> <li>M/s East Africa Boreholes Ltd request for payment of Shs. 56,000,000 dated 26th/6/2018 for Siting and Drilling of 5 Deep Boreholes was certified under Interim Certificate No. 1 dated 26th/6/2018, recommended for payment on 26th/6/2018 and was paid on 29th/6/2018 vide PV- 9/6 within 3 days.</li> </ul>	<p>3</p>
<p>Financial management and reporting</p>			
<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 Water department submitted the annual performance report for the FY 2017/2018 (including all four quarterly reports).</p> <p>However, no evidence was availed to ascertain when the submission was made to the Planner to establish whether it was by mid-July (or after) for consolidation.</p>	<p>0</p>

<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 District Water department had 3 internal audit findings in FY 2017/2018 but there was evidence of only one query that was cleared i.e. unaccounted for funds and information provided to the internal audit on the status of its implementation as at the time of this assessment.</p> <p>The 2 pending internal audit queries raised in FY 2017/2018 were as follows:</p> <ol style="list-style-type: none"> <li>1. Budget work plans for FY 2017/2018 were not complied with.</li> <li>2. Non-award of contract for Rehabilitation of 2 Boreholes worth Shs. 76,117,916 – works done by Water Engineer on Force Account.</li> </ol>	0
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 Works and Technical Services Committee met and discussed service delivery issues during FY 2017/2018 as per:</p> <ul style="list-style-type: none"> <li>• Minutes of the Committee meeting held on 11th – 12th 2018 (under Min. 07/WKT/ADC/4/2018 – Presentation of Draft Budget for FY 2018/2019 by Heads of Department).</li> </ul>	3

<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>There were no independent reports available to show that the social Services Committee presented issues that required approval to Council.</p> <p>However, from the minutes of Council, it was established that the Works and Technical Services Committee presented issues for approval during the Council meeting held on 19th December 2017 (Min. 207/ADLG/12/2017 – Recommendations from Works and Technical Services Committee).</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 DWO explained to the assessment team that there was display of AWP, Budget and Water Development grant releases and expenditure on the notice board but due to limited space on the notice board it had been removed by the time of assessment.</p> <p>However, a copy of the displayed information indicating grant release of quarter 1 FY 2018/19 dated 16th August 2018 was found kept well in the file at CFO office. It indicated budget of Ushs 449,530,027 and quarter 1 release of Ushs 141,385,796.</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 WSS projects visited did not have labels as required with exception of VIP latrine at Alakas which had been satisfactorily labelled.</p> <p>The rest of the sampled projects were not clearly labelled indicating name of contractor, Name of project, date of construction and source of funds.</p> <p>The visited facilities were;</p> <ul style="list-style-type: none"> <li>Kompas BH (Karita S/C)</li> <li>Koopulio BH (Karita S/C)</li> <li>Ashokonion Production well (Karita S/C),</li> <li>Dingdinga production well (Amudat S/C)</li> <li>Piped Water Supply Scheme at Alakas</li> <li>VIP latrine at Alakas</li> </ul>	<p>0</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 no evidence that information on tenders and contract awards had been displayed on the District Notice board by the time of the assessment and no copies had been kept on file.</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>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 to prove that the communities applied for water/public sanitation facilities for current FY. The DWO did not present any application letter from the community and also no proof of community contribution towards the construction of facilities was presented to the Assessment team.</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 have 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 no evidence to prove that WSC were functional. All the WSS facilities visited by the assessment team were not fenced, not well maintained and no proof of collection of O&amp;M.</p> <p>The DWO referred the assessment team to the Assistant Water officer in charge of mobilization to check the list of water and Sanitation Committees but no list was presented to the assessment team by the Assistant Water Officer in charge of mobilisation.</p>	<p>0</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>The Environment screening reports for all WSS projects implemented were well filled and available on file for review. The environmental screening reports for the sampled facilities were completed on different dates as follows:</p> <ul style="list-style-type: none"> <li>Alakas Piped Water Supply Scheme dated 17th April 2018.</li> <li>Ashokonion production well dated 10th April 2018</li> <li>Kompas hand pump borehole dated 10th April 2018.</li> <li>Dingdinga production well dated 10th April 2018.</li> <li>Koopulio hand pump borehole dated 10th April 2018.</li> </ul>	<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>From the review of the Environmental Screening reports, the assessment team revealed that unacceptable environmental concerns identified were cutting of trees around the drilling area and the mitigation measures put in place was to plant at least 5 tree seedlings after the completion of the works before hand over of the projects.</p> <p>However, the contractor had not completed the works for the trees to be planted.</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>From the review of sampled contract documents, Item 1.6 of BOQ, indicates the clause of Environmental mitigation measures. Contracts documents sampled were for;</p> <ul style="list-style-type: none"> <li>Siting and drilling of five deep hand pump bore holes. Contract ref: AMUD581/Wrks/2017-2018/00014.</li> <li>Construction of Piped Water Supply Scheme at Alakas. Contract ref: AMUD581/Wrks/17-18/00011.</li> <li>Construction of 4-stance VIP Public Latrine at Alakas. Contract Ref: AMUD581/Wrks/17-18/00027.</li> </ul>	<p>1</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 no WSC members list presented to the assessment team for review. DWO did not present the software progress reports to the assessment team for review. The DWO referred the assessment team to the Assistant Water officer in charge of mobilization, however there was evidence presented to the assessment team.</p>	<p>0</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>The DWO revealed to the assessment team that the department had planned and implemented 1 sanitation facility in the FY 2017/18.</p> <p>The 4-stance VIP public latrine constructed at Alakas was visited by the assessment team and found that it had separate stance for men, women and PWDS.</p> <p>However, there was no provision for ramp and Support handles in the stance for PWDs.</p>	<p>0</p>
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