



Local Government Performance Assessment

Buliisa District

(Vote Code: 576)

Assessment	Scores
Accountability Requirements	67%
Crosscutting Performance Measures	27%
Educational Performance Measures	54%
Health Performance Measures	22%
Water Performance Measures	54%

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"> • 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"> o If LG submitted before or by due date, then state 'compliant' o If LG had not submitted or submitted later than the due date, state 'non-compliant' • From the Uganda budget website: www.budget.go.ug, check and compare recorded date therein with date of LG submission to confirm. 	<p>The LG submitted an Annual Performance Contract on 29th July 2018 within the extended deadline of 01st August, 2018 as provided by MoFPED.</p>	<p>Yes</p>
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"> • From MoFPED's inventory of LG budget submissions, check whether: <ul style="list-style-type: none"> 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. 	<p>The LG submitted a Budget that includes a Procurement Plan for the forthcoming FY on 29th July 2018 as per MOFPED data.</p>	<p>Yes</p>
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<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"> • If LG submitted report to MoFPED in time, then it is compliant • If LG submitted late or did not submit, then it is not compliant 	<p>The LG did not submit the Annual Performance Report for the previous FY 2017/2018. Q3 and Q4 performance reports were under compilation at the time of assessment.</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"> • 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). • If LG submitted late or did not submit at all, then it is not compliant. 	<p>Submission of the quarterly budget performance reports during FY 2017/2018:</p> <p>Quarter Date of submission Reference</p> <p>Quarter 01 27,November 2017 2017-2018_QuarterlyReport_Q1_576_BuliisaDistrict_12_5_20172_25_59PM</p> <p>Quarter 02 2nd March 2018 2017-2018_QuarterlyReport_Q2_576_BuliisaDistrict_3_2_20189_32_34AM</p> <p>Quarter 03 Still under compilation at the time of assessment.</p> <p>Quarter 04 Still under compilation at the time of assessment.</p>	<p>No</p>
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Audit

<p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General and the Auditor General's findings for the previous financial year by end of February (PFMA s. 11 2g). This statement includes actions against all findings where the Internal Auditor and the Auditor General recommended the Accounting Officer to take action in lines with applicable laws.</p>	<p>From MoFPED's Inventory/record of LG submissions of statements entitled "Actions to Address Internal Auditor General's findings",</p> <p>Check:</p> <ul style="list-style-type: none"> • If LG submitted a 'Response' (and provide details), then it is compliant • If LG did not submit a 'response', then it is non-compliant • If there is a response for all – LG is compliant • If there are partial or not all issues responded to – LG is not compliant. 	<ul style="list-style-type: none"> • The LG submitted the responses on the Internal Auditor General for the FY2016/17 on 31st October 2017, letter reference from CAO Ref: CR/115/1. The responses were received on 18th December 2017 by MOFPED, Accountant General, IGG, MOLG and Auditor General. • The LG submitted responses on the Auditor General report for 2016/17 on 17th April 2018 vide letter reference Ref: CR/BUL/152 which was received on 20th April 2018 by MOFPED, Auditor General and Parliamentary LGAC. The number of queries raised were the following which were all responded too. <ol style="list-style-type: none"> 1- Management of Road funds and equipment utilisation. 2. Local revenue collection and Management 3. Land matters 4. Status of schools and quality of Education 5. Health Care services and staffing 6. Operation Wealth creation Program. 	<p>Yes</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.</p>		<p>The report from the Auditor General for the FY 2017/18, Local Government Un qualified Opinion Schedule, for Hoima Branch No.35, for December 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"> • A functional Physical Planning Committee in place that considers new investments on time: score 1. 	<p>Evidence that the PPC is in place was presented as seen in the appointment letter of the Committee Members in a letter from the CAO dated 28th August 2017. No evidence that it considers investment on time was provided as no register was availed.</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"> • Evidence that district/ MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD score 1. 	<p>The DLG submitted two (2) sets of Minutes of the District Physical Planning Committee Meeting to the Ministry of Lands Housing and Urban Development (Office of the Commissioner Physical Planning Department) as shown hereunder: i. Minutes of meeting held on 27th March 2018, submitted on 16th April 2018. ii. Minutes of meeting held on 27th November 2017, submitted on 16th April 2018. In addition the assessment team was provided with evidence of submission of extracts : i. From the District Council meeting held on 15th March 2018 and submitted on 16th April 2018.</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"> • All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0 	<p>No evidence was provided during the time of assessment.</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"> • Action area plan prepared for the previous FY: score 1 or else 0 	<p>No evidence was provided during the time of assessment.</p>	<p>0</p>

<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2. 	<p>The LG's proposed priorities in the AWP were not based on outcomes of the Budget Conference as found in the conference report for BFP FY 2018/19 of 9th November 2017 as shown below:</p> <p>1. Education:</p> <p>a. Construction of 2 classroom block at Wanseko P/S is a priority area in the Budget Conference report but not found in the Education Department Work plan</p>	<p>0</p>
<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> • 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. 	<p>Capital investments in the approved Annual Work Plan for the current FY 2018/2019 are not derived from the approved Five-Year Development Plan pages as shown hereunder:</p> <p>Education:</p> <p>a. Construction of 2 classroom block at Wanseko P/S is not in the DDP only Nyamitete & Kiram PS are provided for (Page 80). It is however found in the AWP FY 2018/19 at Page 79. There is no record of Council approval of change.</p>	<p>0</p>

<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> • Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2. 	<p>No evidence of duly signed TPC minutes was provided during the assessment. Only the source document handwritten minutes of TPC meeting held on 6th March 2018 was seen.</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"> • 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. 	<p>No evidence of the Annual Statistical Abstract with gender disaggregated data is compiled.</p>	<p>0</p>
<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • 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 	<p>All infrastructure projects implemented by the LG in the previous FY 2017/2018 were derived from the Annual Work Plan as shown hereunder:</p> <p>Education:</p> <p>Completion of Education Offices at the District Headquarter was found in APC FY2017/18 work plan (Page 20) and in the procurement plan item 11.</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"> • 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"> o 100%: score 4 o 80-99%: score 2 o Below 80%: 0 	<p>At the time of the assessment, this was not verifiable since the APR for FY 2017/18 which would have had the details had not been prepared.</p>	<p>0</p>
<p>The LG has executed the budget for construction of investment projects and O&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"> • Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2 	<p>At the time of the assessment, this was not verifiable since the APR for FY 2017/18 which would have had the details had not been prepared.</p>	<p>0</p>
<p>The LG has executed the budget for construction of investment projects and O&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"> • Evidence that the LG has budgeted and spent at least 80% of the O&M budget for infrastructure in the previous FY: score 2 	<p>At the time of the assessment, this was not verifiable since the APR for FY 2017/18 which would have had the details had not been prepared.</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"> Evidence that the LG has filled all HoDs positions substantively: score 3 	<p>The following positions for HoD's are not filled substantively in respect of the approved District staff structure for 2017-2018:-</p> <ol style="list-style-type: none"> Deputy chief Administrative officer District production officer District Engineer Chief finance officer <p>The following positions for Heads of departments are filled substantively:-</p> <ol style="list-style-type: none"> District Education Officer District health officer District Natural resources officer District Community Development officer <p>The structure provides for 8 Heads of departments,</p>	0
<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2 	<p>Heads of departments were last assessed in the FY 2014-2015 as per the guidelines of MoPS (CIRCULAR STANDING INSTRUCTIONS OF 2016)</p> <p>Namely</p> <ol style="list-style-type: none"> Deputy chief Administrative officer (Ag) District production officer (Ag) District Engineer (Ag) Chief finance officer (Ag) District Education Officer District health officer District Natural resources officer District Community Development office 	0
<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that 100 % of staff submitted for recruitment have been considered: score 2 	<p>All vacant positions that were submitted to the DSC for recruitment were considered, as referenced by CAO's submission CR/BUL/156 Dated 19/2/2018, for 22 Health workers and 37 Production and marketing workers</p> <p>This was considered by DSC on 20/6/2018</p>	2

<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that 100 % of positions submitted for confirmation have been considered: score 1 	<p>All the staff that were submitted for confirmation in 2017-2018 were considered.</p> <p>It was a single submission made by CAO as referenced by CR/D/11150, considered by the DSC under its min.BUL/46/2018</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"> • Evidence that 100 % of positions submitted for disciplinary actions have been considered: score 1 	<p>During the FY 2017-2018, no disciplinary case submitted to the DSC for consideration.</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"> • 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 	<p>All staff that were recruited in the FY 2017-2018 accessed their salaries with in 2 months after their appointment.</p> <p>Reference was made to their appointment letters and posting instructions dates in relation to their slips.</p> <p>A case in point is Dr Atikoro Lorna a medical officer</p>	<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"> • 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 	<p>There was no evidence that 100% of the staff who retired during the previous financial accessed the pension pay roll with in 2 months.</p> <p>The PHO explained that out of the 5 steps taken to pay pensioners, only 2 are done at a District level. 3 steps which are final are taken by the MoPS. There was evidence that he prepared files timely though there was no acknowledgement of receipt of files by MoPS</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"> •• 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. • If the increase is from 5% -10 %: score 2. • If the increase is less than 5 %: score 0. 	<ul style="list-style-type: none"> • The OSR revenue for 2016/17 was UGX 318,888,504 adjusted with a one off disposal of Asset worth UGX 90,616,850 Leaving a Net Revenue of UGX 228,271,654 as shown in the Draft Financial statements prepared on 20th August 2018 and received by the Office of Auditor General of Hoima 31st August 2018, on page 22 Note 2. Local Revenue. The revenue reduced in FY 2017/18 to UGX 190,444,341, this is a reduction of Ugx 37,827,313 which translates to 16.5% reduction. 	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"> • If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10 %: then score 2. If more than +/- 10 %: Score 0. 	<ul style="list-style-type: none"> • From the Draft financial statements 2017/18, page 10 and 14 on the Statement of Appropriation Account, the Budget for Local revenue was projected at Ugx 350,755,000 and the Actual local revenue collection was Ugx 190,444,341. This translates into a revenue collection ratio of 54.2% which is outside the range of 10%. This is poor performance. 	0
<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2 	<ul style="list-style-type: none"> • Sec 85 of LGA (2) “In rural areas, revenue shall be collected by the sub county councils, and a sub county council shall retain 65 percent, or any other higher percentage as the district council may approve, of the revenue collected by it and pass the remaining percentage over to the district” • (4) “A district council may, with the concurrence of a sub county, collect revenue on behalf of the sub county council but shall remit 65 percent of the revenue so collected to the relevant sub county.” • In regard to (4) above the DLG collected Local Service tax from Payrolls which amounted to Ugx 38,477,707 and was supposed to be remitted to LLG, however by the time of assessment on 3rd and 4th September, no evidence was availed to us for this compliance. 	0

<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the 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 	<p>From the Draft financial statements of 2017/18 on page 22 (Note 2): Local revenue, collection for 2016/17 was Ugx 318,888,500 less Sale of Assets of Ugx 90,616,850 = 228,271,650. (20% of 228,271,650 is 45,654,330.)</p> <p>The Actual Expenditure on Statutory bodies, page 10 and 14 of the Draft financial statements shows Ugx 325,937,358 was spent. However GOU grants worth Ugx 251,972,931 was included which leaves Ugx 73,964,427 as expenditure from Local Revenue.</p> <p>This is more than Ugx 45,654,330 (20%) allowable. LGA CAP.243 First Schedule (4) and (4A). The LG did not comply with these regulations.</p>	<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"> 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 	<p>The LG recruited a Senior Procurement Officer During a DSC meeting that sat on 1/7/2018.</p>	<p>2</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"> Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1 	<p>Reports of the Evaluation Committee were submitted to the Contracts Committee during FY 2017/2018 on the following dates; 22/08/2017, 21st Dec. 2017 and 28th Dec. 2017</p>	<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"> Evidence that the Contracts Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1 	<p>From Contracts Committee and TEC minutes, the recommendations of the TEC were considered for the following sampled projects;</p> <p>Completion of District stores awarded to M/s Gilal Construction and suppliers ltd at a contract sum of UGX 58,833,620.</p> <p>Renovation of OPD at Biiso HC III awarded to Mutembe & Co. Ltd at a contract sum of UGX 16,865,025.</p> <p>Construction of Kitchen for in patients at Biiso HC III awarded to Balia Co. Ltd at a contract sum of UGX 21,933,250</p> <p>Renovation of OPD at Biiso HC III awarded to Mutembe & Co. Ltd at a contract sum of UGX 16,865,025.</p> <p>Construction of a placenta Pit at Bugana HC III awarded to General Services ltd at contract sum of UGX 7,001,000.</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"> a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2 	<p>a)The following projects are some of the infrastructure projects that appear in both the current FY approved work plan and procurement plan;</p> <ol style="list-style-type: none"> Construction of 5 stance vip latrine at Buliisa, Kisiabi and kijanji primary schools. Construction of classroom block at Ngwedo seed school. Deep borehole drilling. <p>b)Below are sampled implemented projects for the previous FY in adherence to the procurement plan;</p> <ol style="list-style-type: none"> Completion of District stores. Renovation of OPD at Biiso HC III Construction of Kitchen for in patients at Biiso HC III Renovation of OPD at Biiso HC III Construction of a placenta Pit at Bugana HC III 	<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"> • For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/ infrastructure by August 30: score 2 	<p>By the time of assessment, the LG had not prepared any bid document for projects meant for the current FY.</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"> • For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2 	<p>Whereas the LG had an updated contract register, there were only 4 projects with complete activity files. i.e</p> <ol style="list-style-type: none"> 1.Construction of 4 stance pit latrine at Kigwere HC II 2.Construction 5 stance VIP latrine at Kisansya P/S 3.Renovation of 2 classroom blocks at Butiaba P/S 4.Completion of District stores. 5.Several of other contracts didn't have complete procurement activity files. 	<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"> • For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2. 	<p>Adherence to procurement thresh holds was observed. For example;</p> <ol style="list-style-type: none"> 1.Completion of District stores - UGX 58,833,620-Open bidding 2.Drilling and installation of 6 deep boreholes- UGX 150M – Open bidding 3.Renovation of OPD at Biiso HC III - UGX 16,865,025-selective bidding 4.Renovation of OPD at Biiso HC III - UGX 16,865,025 – selective bidding 5.Construction of a placenta Pit at Bugana HC III - UGX 7,001,000.- selective bidding 	<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"> Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates <p>for all projects based on technical supervision: score 2</p>	<p>Certification for both interim and completion was based on technical supervision For example;</p> <p>Completion of District stores – interim certificate</p> <p>No. 1 - 25/10/2017</p> <p>NO.2 - 21/11/2017 and</p> <p>Practical completion certificate on 13/12/2017.</p> <p>Drilling and installation of 6 deep boreholes- interim certificate</p> <p>No. 1 - 29/06/2018</p> <p>Renovation of OPD at Biiso HC III - interim certificate</p> <p>No. 1 - 20/03/2018</p> <p>Construction of a placenta Pit at Bugana HC III - interim certificate</p> <p>No. 1 - 11/04/2018</p>	<p>2</p>
<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> 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 	<p>There were no projects activities commenced for the current FY at the time of assessment</p>	<p>0</p>
<p>Financial management</p>			
<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4 	<ul style="list-style-type: none"> The DLG had reconciliations for June 2018 but had no cashbooks nor Bank reconciliation for July 2018 by the date of our visit on 3rd and 4th September 2018. The LG was not up to-date at the time of assessment. This is against the LGFAR, Section 73 (1) and (2). 	<p>0</p>

<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2. 	<ul style="list-style-type: none"> • From the sample of payments made during the financial year from Health department worth Ugx 35,213,738, Education department worth Ugx 104,231,041 and Water and Sanitation worth Ugx 196,140,000. These payments were made within one months of requisitions being raised. The LG was compliant in this area. 	2
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG has a substantive Senior Internal Auditor: 1 point. • LG has produced all quarterly internal audit reports for the previous FY: score 2. 	<ul style="list-style-type: none"> • The DLG doesn't have a substantial Senior Internal Auditor. They have an Examiner of Accounts who was appointed on 17th April 2009 under minute DSC Min.03/2009 and has been acting as Head of Audit since 2014. 	0
<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"> • LG has produced all quarterly internal audit reports for the previous FY: score 2. 	<p>Only Three Quarters namely 1, 3 & 4 were prepared. Quarter 1 on 30/10/2017, Quarter 2 Not Produced, Quarter 3 on 30/4/2018 and Quarter 4 on 30/7/2018. This is against LGFAR 12 (e) "to prepare internal audit quarterly reports for submission to the council within one month at the end of each quarter"</p>	0
<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 evidence is action on ONLY 2 quarterly reports, namely Quarter 1, Min.5/BUL LGPAC/2/2018 and Quarter 3, Min.10/BUL LGPAC/8/2018. There's no evidence for follow up of Quarter 4 and Quarter 2 was not prepared.</p>	0

<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1. 	<p>There's evidence of submission of only three quarters.</p> <p>Quarter 1. 30/10/2017</p> <p>Quarter 2. No submission</p> <p>Quarter 3. 30/4/2018</p> <p>Quarter 4. 30/7/2018</p> <p>LG PAC has only reviewed Quarter1, Min.5/BUL LGPAC/2/2018 and Quarter 3, Min.10/BUL LGPAC/8/2018.</p>	0
<p>The LG maintains a detailed and updated assets register Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the LG maintains an up- dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4 	<ul style="list-style-type: none"> The DLG maintains an Asset register that is not as per format in the Accounting Manual. It's not up to date, since the Asset (s) acquired during the FY2017/18 was not posted. Example is Education Department Land bought worth Ugx 18,000,000, it was not on the Register and furthermore doesn't have a land title. All the VIP Latrines constructed during the financial year in Schools and Health Centres in the Kigwere, Biiso and Kihungya Sub Counties were not posted in the Asset register as of our visit on 3th-4th September 2018. 	0
<p>The LG has obtained an unqualified or qualified Audit opinion</p> <p>Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY:</p> <ul style="list-style-type: none"> Unqualified audit opinion: score 4 Qualified: score 2 Adverse/disclaimer: score 0 	<ul style="list-style-type: none"> The Auditor General FY 2017/18 Report, Local Governments Unqualified Opinion Schedule for Hoima Branch No 35, for December 2018. 	4
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"> Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2 	<p>The LG Council meets and discusses service delivery related issues as hereunder:</p> <p>i. Where a meeting was held on 20th May 2018 under Min. COU 53/5/2017/18 presentation and approval of the District Budget for FY 2018/19 where among others they considered revenue results (budget performance) from FY 2017/18.</p> <p>ii. Meeting held on 29th June 2018, under Min COU 64/6/2017/18: "Presentation of the State of the District Address/Report for FY 2017/18".</p>	2

<p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> • Evidence that LG has designated a person to coordinate response to feedback (grievance /complaints) and responded to feedback and complaints: score 1. 	<p>No evidence of a focal person designated to coordinate response to feedback was presented at the time of assessment.</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"> • 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 	<p>No evidence was provided during the assessment.</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"> • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2 	<p>No current payroll or pensioner schedules were found on the public notice boards. A payroll dated 07th November 2013 was found on the display at the main administration block.</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"> • Evidence that the procurement plan and awarded contracts and amounts are published: score 1. 	<p>No procurement plan was found on display. However evidence of awarded contracts was found on display at the notice boards at PDU. e.g. award of Kigoya Fish Landing Market to Kigoya Market vendors and fish mongers cooperative society limited displayed on 11 July 2018.</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"> 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. 	<p>No evidence that LG performance assessment results for FY 16/17 were published was found during the assessment.</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"> Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1 	<p>No evidence was provided. Only minutes of DTPC held on 6/3/2018 were seen in the source document (non-printed/signed). Under agenda item 5 "Dissemination of IPF for formulation of detailed budget as per Second Budget Call circular on finalisation of detailed budget estimates and ministerial policy statements for FY 2018/19 was seen as an indication of dissemination.</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"> 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. 	<p>No evidence was provided during the assessment. However the Assessment Team was informed that a Baraza was organised by RDC & CAOs office at Community Ground in Buliisa town discussing service delivery attended by all HOD. Citizens concerned about roads, drugs in health centre, education(attendance of teachers)</p>	<p>0</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"> 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. 	<p>Officer didn't provide any information to ascertain this. He kept on waiting for a colleague whom he claimed had the office keys where information was</p>	<p>0</p>

<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> 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. 	<p>No information accessed to establish whether the gender focal point and CDO had planned minimum 2 activities for current FY to strengthen women's roles and address vulnerability and social inclusions.</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"> 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 	<p>There was no EIA done for all projects implemented during the previous FY.</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"> Evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1 	<p>Only one environmental safety measure of planting neem trees at each borehole was seen in only one bid document of Drilling and installation of 6 boreholes, the other projects bid documents had no environmental and social management and health and safety plans.</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"> • Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1 	<p>Apart from projects implemented in Government schools and Health centers, there was no proof of ownership for any of projects implemented especially the water projects, 1.e Drilling and installation of 6 boreholes.</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"> • Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1 	<p>No single completed project had Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO.</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"> • Evidence that the contract payment certificated includes prior environmental and social clearance (new one): Score 1 	<p>No single contract payment certificate included prior environmental and social clearance.</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"> • Evidence that environmental officer and CDO monthly report, includes a) completed checklists, b) deviations observed with pictures, c) corrective actions taken. Score: 1 	<p>There were no reports seen to this effect.</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"> 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 	<ul style="list-style-type: none"> Basing on the letter addressed by DEO to CAO of Buliisa as at 26th Feb 2018 indicating the schools list of 31 P/S govt aided and staff list indicating 394 personels recruited and deployed... Compute 394 teaching staff /31 schools= on average 12 teachers per school; an indication that the LG budgeted , and meets minimum. 	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"> 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 	<ul style="list-style-type: none"> Basing on schools /staff list examined in DEOs office, and the physical verification carried out at the sampled schools, Buliisa LG meets the minimum standards as below: Key SL- Staff Lists, and PV- Physical Verification from sampled schools. Wanseko SL- 14, while PV-13; Ngwedo SL- 12, and PV -12; Buliisa SL-14, and PV-14; Kibambura SL- 8, and PV-8. 	4
<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has filled the structure for primary teachers with a wage bill provision <ul style="list-style-type: none"> If 100%: score 6 If 80 - 99%: score 3 If below 80%: score 0 	<ul style="list-style-type: none"> Basing on the letter addressed by DEO to CAO about the Teaching personnel status as at 26th Feb. 2018, the wage bill can only support 395 teachers (recruited and deployed). While the total ceiling provision by public service is 457 teachers. Leading to a shortfall of 63 personnel. $395/457 * 100 = 86\%$ 	3
<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6 	<ul style="list-style-type: none"> The approved and adopted staff structure for Buliisa LG (pg 2), as of 6th Feb, 2017 for 2016/17, the structure from Min. of Public Service provides for two positions of inspectors but Buliisa LG has filled one inspector of schools due to the wage bill. (He is called MR MUGISA JAMES.) 	0

<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"> • Primary Teachers: score 2 	<ul style="list-style-type: none"> • No recruitment plan for primary teachers seen at time of assessment, with claims that they have used the same wage bill for the last two years. 	0
<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"> • School Inspectors: score 2 	<ul style="list-style-type: none"> • No recruitment plan for school inspectors seen at time of assessment, due to claims that they have used the same wage bill for the last two years. 	0
Monitoring and Inspection			
<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"> • 100% school inspectors: score 3 	<p>There was no evidence to show that all inspectors of schools were appraised. The District had only 1 inspector of schools by the names of James Mugisa, whose personal file was not accessed to confirm that he was appraised by his supervisors (the District staff structure provides for 2 inspectors of schools),</p>	0
<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"> • Primary school head teachers o 90 - 100%: score 3 o 70% and 89%: score 2 o Below 70%: score 0 	<p>There was no evidence that the LG Education department had appraised all head teachers for previous financial year</p>	0

<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"> 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 	<p>Circulars Communicated by Education departement;</p> <ul style="list-style-type: none"> Concept paper for national P/S Music, Dance, and Drama festival 2018; SLOGAN: A Malaria free school is my responsibility; THEME: Enhance a childs quality learning for development through Mass Action Against Malaria. Schools and other institutions calendar 2018; Dated 2nd October 2017 by PS – MOES. Joint stakeholders’ on teachers and learners Absenteeism; Dated 28th Nov, 20117; Signed by PS-MOES. Guidelines on school charges; Dated 24th Oct, 2017. Signed by PS - MOES 	1
<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"> 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 	<ul style="list-style-type: none"> End of term III, DEOs meeting with headteachers on 7th Dec, 2017 at Buliisa P/S; Minute no. 6/12/2017: Communication of circulars from Moes. Circulars disseminated include; School charging policy and School calendar 2018. All the 4 schools sampled for circulars commonly had among others; The MDD malaria free school and schools and other institutions calendar. 	2
<p>The LG Education Department has effectively inspected all registered primary schools2</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> 100% - score 12 90 to 99% - score 10 80 to 89% - score 8 70 to 79% - score 6 60 to 69% - score 3 50 to 59 % score 1 Below 50% score 0. 	<p>The LG has 31 govt schools and 16 registered private, total 47 P/S.</p> <ul style="list-style-type: none"> Term II Joint monitoring and support supervision 14th – 17th Aug 2017: 16 schools inspected. Beginning of term I monitoring 2018 report – 30 Government aided schools inspected. Status report on private schools 4th Mar, 2018 indicates 16 private schools inspected in term I. Therefore $16+30=46$. Then $(46/47)*100=98\%$ Results from sampled schools shows number of times inspected in a year against minimum standards (Once per term- for 3 terms in a year) as below; Wanseko $2/3=67\%$, Ngwedo $2/3=67\%$, Buliisa $2/3=67\%$, and Kibambura $3/3=100\%$, respectively. The average% of inspection for sampled schools is $(67+67+67+100)=75\%$ The overall average for both sampled schools and from inspection reports $(98\%+75\%)/2=87\%$ 	8

<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4 	<ul style="list-style-type: none"> • Inspection report indicates teachers found absent at opening of term III on 18th September 2017. • Invitation letter signed by CAO to errant teacher dated 31st Oct, 2017, to appear before rewards and sanctions committee as follows: Lower Buliisa on 9/11/2017 and Upper Buliisa on 10/11/2017. • The committee exonerated some while others were cautioned with warning letters to take opening of term serious. 	4
<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the 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 	<ul style="list-style-type: none"> • Assessor couldn't access evidence of submission of reports to DES, because the Inspector of schools who with such data was sick and away out of office. 	0
<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the inspection recommendations are followed- up: score 4. 	<ul style="list-style-type: none"> • At Buliisa P/s, the inspector of schools visited on 15/8/2017; recommended against the identified gap that teachers were not displaying results of their pupils. • In H/teacher - teachers meeting, on 23/8/2017, Min.4/8/2017: Academic performance; all heads of department and deputies should ensure all teachers have schemes of work and lesson plan, and all teachers must display pupils results after tests or exams. 	4

<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"> • Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> o List of schools which are consistent with both EMIS reports and PBS: score 5 	<ul style="list-style-type: none"> • The registered and licensed private and government p/s with EMIS number in DEOs office tallies with the list of MOES; (16+31)=47 schools respectively. 	5
<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"> • Enrolment data for all schools which is consistent with EMIS report and PBS: score 5 	<ul style="list-style-type: none"> • No information was available at time of time of assessment due to absence of inspectorate custodian. 	0
<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"> • 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 	<p>The Council Committee for Education met and discussed service delivery issues as evidenced by its report to the District Council meeting of 30th May 2018 under Min.COU/52/5/2017/18: "Presentation of Sectoral Committee reports". In addition, the Committee discussed service delivery as seen in its report to the District Executive Committee dated 17th October 2017.</p>	2
<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"> • Evidence that the education sector committee has presented issues that require approval to Council: score 2 	<p>The Committee in its report to Council on 30th May 2018 vide: Min.COU/52/5/2017/18: "Presentation of Sectoral Committee reports", sought approval to have DTPC provide for latrines for Kijagi PS.</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"> • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80 % schools: score 0 	<ul style="list-style-type: none"> • P/S sampled have functional SMCs; Appointed, inaugurated and inducted on 15/05/2017; include Kibambura, Ngwedo, Buliisa, Wanseko and Uganda martyrs. • But no reports seen submitted to DEOs office, however SMC reports at schools were seen (3 reports each for the term) • There is resource discussion in every term for approval of usage of UPE grants. • H/Teachers (SMC secretaries) provide accountability to SMC after expenditure and thereafter submit to Education Audit department. 	3
<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"> • Evidence that the LG has publicised all schools receiving non-wage recurrent grants <p>e.g. through posting on public notice boards: score 3</p>	<ul style="list-style-type: none"> • No posting seen on all LG notice boards. • But in all schools sampled, UPE capitation grant was displayed for all terms. 	0
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"> • 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 	<ul style="list-style-type: none"> • Basing on approved sector AWP Form 4A for 2017/18 seen, and a sample of projects was done including; latrine construction for Waiga and Kisiabi P/S, and DEOs office completion for operation. • Procurement requests for Latrine construction and completion of plumbing works in DEOs office were prepared and signed by user department (DEOs office), then submitted to Finance, and CAOs office and finally to PDU on same date of 17/7/2017 – before 30 April.. Each project files with all technical requirements. 	4
Financial management and reporting			
<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3. 	<ul style="list-style-type: none"> • From the sampled payments made to Munyomo Robert, Balia Company LTD, Mitmag Enterprises Ltd, Aprusari Investments Co. Ltd, Muyomba General Enterprises and Ultra Star Limited, worth Ugx 104,231,041 which was spent on Land, Emptying Toilets, Construction of 5 Stance VIP Latrines, connecting generator power, office equipment and Septic Tank and Soak Pit construction. All these payments were made on time and mostly within a week after requisition for payment was raised. 	3

<p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by 15th of July for consolidation: score 4 	<p>At the time of assessment no evidence was provided since Q3 & Q4 reports for FY 2016/17 were still under preparation.</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"> 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"> If sector has no audit query score 4 If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 If all queries are not responded to score 0 	<ul style="list-style-type: none"> Two queries (1) Non functionality of Kirama Vocational Institute- Kigwera Sub County. This one is still outstanding. (2) Lack of Acknowledgement receipt of 5,000,000 from Aprusni Investment Company. 	<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"> Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills, etc.: Score 2 	<ul style="list-style-type: none"> No evidence of guidelines seen at time of assessment on how they were disseminated. 	<p>0</p>

<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • Toilet s stances for both females and males are separate. These guidelines are for all SFG grants, of which the department enforce with guidance from community development officer (CDO). Also during site visits to ensure projects compliance to Gender, and during dissemination of gender related trainings, the department does monitoring in team. • Classroom and toilet construction must have ramps for access to PWDs. • There is a budget for each school to buy sanitary materials like pads and clothes (Lesu) to wrap around in case of emergency. • In sampled schools (Kibambura, Ngwedo, Wanseko and Buliisa P/s), the position of senior women teacher's position is filled. 	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"> • Evidence that the School Management Committee meets the guideline on gender composition: score 1 	<ul style="list-style-type: none"> • SMCs meets gender guidelines – composition on founding body is; Kibambura has 2/6 females, Ngwedo – 2/6, Wanseko 2/6, Buliisa 2/6 	1
<p>LG Education department has ensured that guide-lines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 1: 	<ul style="list-style-type: none"> • No evidence seen; no circular, no minutes of meeting, but claims that these are crosscutting issues they talk on and emphacise always whenever they meet. • But sampled schools visited have a rubbish pit, trees planted, paspulum grass. • BUT Kibambura p/s is supported by partner called LACWADO and good number of Accasia trees planted. 	0
<p>LG Education department has ensured that guide-lines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • 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 	<p>Not applicable as the department in the previous year did not have construction projects.</p>	1

<p>LG Education department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none">• The environmental officer and community development officer have visited the sites to check whether the mitigation plans are complied with: Score 1	<p>Not applicable as above</p>	<p>1</p>
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Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>LG has substantively recruited primary health care workers with a wage bill provision from PHC wage</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY</p> <ul style="list-style-type: none"> • More than 80% filled: score 8 • 60 – 80% - score 4 • Less than 60% filled: score 0 	<ul style="list-style-type: none"> • 352 posts available as per the MoH approved structure; 245 posts filled as per the payroll for July 2018 and 107 posts vacant as at the time of assessment. This denotes that 69.6% of the approved posts are filled. • Advertisement for vacant posts was done through the office of the PS MoH and deadline of submission of applications was 22nd February 2018. • Wage IPF for current FY was UGX 2,890,949,999. Utilised Wage for current FY was UGX 2,871,516,684. Unutilised Wage for current FY was UGX 19,433,315 	4
<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/request to HRM for the current FY, covering the vacant positions of primary health care workers: score 6</p>	<ul style="list-style-type: none"> • No comprehensive recruitment plan was availed at the time of assessment • No letter of submission to HRM by the department was availed at the time of assessment • 352 posts available as the MoH approved structure, 245 posts filled as per the payroll for July 2018 and 107 posts vacant as at the time of assessment 	0
<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"> o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0 	<p>There was no evidence that Health unit in charges had been appraised for the previous FY</p>	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"> 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 	<ul style="list-style-type: none"> Reviewed a report on HRH addressed to PS MoH on 21st July 2018 with a list of 249 health workers deployed by facility. A review of the July 2018 payroll showed that 245 staff were paid that month. Kigwera HCII located in a rural setting had 10 staff deployed as per the list to PS MoH but on ground 9 staff were observed on the facility staff list as deployed. The missing staff was identified as AKUGIZIBWE Scovia, an Enrolled Midwife. Buliisa HCIV located in an urban setting had 48 staff deployed as per the list to PS MoH but on ground 49 staff were observed on the facility staff list as deployed. It was further observed that 6 staff (1 SNO, 2 ENs, 1 EM, 1 PHDO and 1 Porter) recorded at the facility to be on payroll did not appear on the list submitted to PS MoH for the same facility. <p>The above observations show that the department never deployed staff as per the list submitted to PS MoH. Attempts by the Biostatistician, to explain this deviation were not fully convincing as he claimed the discrepancies came as a result of transfers made earlier in June 2018 yet the list to MoH was dated 21st July 2018</p>	0
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"> 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 	<ul style="list-style-type: none"> No evidence was availed by the DHO 	0
<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"> 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 	<ul style="list-style-type: none"> No evidence was availed by the DHO 	0

<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>	<ul style="list-style-type: none"> • One support supervision report in Q3 FY17/18 dated 12th January 2018 was availed and it recorded ONLY three facilities that had been visited i.e. Avogera HCII, Kigwera HCII and Buliisa General Hospital. Buliisa HCIV was never recorded in this report as having been visited. 	<p>0</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"> • If 100% supervised: score 3 • 80 - 99% of the health facilities: score 2 • 60% - 79% of the health facilities: score 1 • Less than 60% of the health facilities: score 0 	<ul style="list-style-type: none"> • No support supervision report by the HSD was availed. • It was observed that since the district has only one HSD, the support supervision role was left to the office of the DHO alone. However, the HSD received PHC funds whose guidelines require provision of a budget & work plan in this area at that level. • Furthermore, a review of Buliisa HCIV PHC budget & work plan where the HSD in-charge sits, which bore a stamp dated 2nd July 2018, revealed that there was no budget line for support supervision . The previous year's budget was not availed at the time of assessment. 	<p>0</p>
<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • Only one support supervision report in Q3 FY17/18 by the DHT dated 12/1/2018 was availed • Minutes for extended DHT meetings in Q1 (8/8/17), Q2 (4/10/17) and Q4 (April 2018) were availed but these were all not signed apart from that of Q4 where only the minute secretary signed. • DHT minutes for Q2 (31/10/17) were availed but were not signed. The CAO was recorded as the Chairperson • All the availed minutes didn't have discussion of support supervision reports on the agenda neither did the minutes have any record of the chairperson communicating the findings & recommendations during support supervision. No other evidence was availed to confirm discussion of quarterly reports both at DHO & HSD levels 	<p>0</p>

<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6 	<ul style="list-style-type: none"> • No evidence was availed • Kigwera HCII was sampled and their Supervision Log Book reviewed. It was observed that the DHT wrote some recommendations in this book during the Q2 17/18 support supervision. However, no evidence was availed to confirm follow-up and corrective actions taken by the facility based on the recommendations. 	0
<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"> • Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> o List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10 	<ul style="list-style-type: none"> • A list of 8 health facilities that received PHC Non-Wage in FY 17/18 was availed with the DHO's stamp dated 2nd August 2018. • Review of the HMIS reports posted in DHIS2 showed reports from 8 facilities, similar to those in the provided list by the DHO • The PBS health report was availed and it showed a record of the same 8 facilities as provided in the DHO's list. 	10
Governance, oversight, transparency and accountability			
<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the 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 	<p>No evidence of Committee Minutes/Reports was provided on the discussion of Health issues.</p>	0

<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the health sector committee has presented issues that require approval to Council: score 2 	<p>The Committee for Health met and discussed service delivery issues as evidenced by the Council in its meeting of 29th June 2018 where a report on status of implementing Council approvals considered the staff recruitment in the health facilities under Min. COU/64/6/2017/18: Presentation of the State of the District Address/Report for FY 2017/18.</p>	2
<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"> If 100% of randomly sampled facilities: score 6 If 80-99 %: score 4 If 70-79 %: score 2 If less than 70%: score 0 	<ul style="list-style-type: none"> Avogera HCII HUMC established, availed minutes for one meeting in Q2 (4/12/17) out of the four mandatory meetings. PHC funds received were reported under Min.4/01/17 Kigwera HCII HUMC established, availed minutes for two meetings in Q2 (14/10/17 & 23/12/17) out of four mandatory meetings. Sampled minutes dated 23/12/17 and observed resource issues discussed under Min V/12/17. Buliisa HCIV HUMC established, availed minutes for one meeting in Q4 (7/6/18) out of four mandatory meetings. Work plan & budget discussed under MIN 08/HUMC/02/2018 Buliisa GH HUMC established, availed minutes for three meetings; Q1 (30/8/17), Q2 (21/11/17) & Q3 (7/3/18) out of four mandatory meetings. Sampled Q1 minutes and observed resource issues discussed under Min 2, 3 & 4. No minutes however, clearly brought out discussion of the budget & work plan. <p>Full marks were denied due the fact that non of the sampled facilities had held the four mandatory HUMC meetings</p>	0
<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"> 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 	<ul style="list-style-type: none"> No evidence was observed on public notice boards or the budget website 	0
Procurement and contract management			

<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"> 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 	<ul style="list-style-type: none"> No evidence was availed at the time of assessment 	0
<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"> Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2. 	<ul style="list-style-type: none"> No evidence was availed at the time of assessment. The submission period was changed to 30th September 2017 of the previous FY 	0
<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"> Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4. 	<ul style="list-style-type: none"> From the sampled payments made during the FY 2017/18, from the following vendors: Kiganja Contractors, Mihigo and Sons General Enterprises Ltd and Monaco Contractors Ltd, worth Ugx 35,213,738, for the following activities, DHO Office repairs and Construction of 4 stance VIP Latrines, the payments were made within a week after they were requisitioned for. 	4
Financial management and reporting			

<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> 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 	<p>At the time of assessment no evidence was provided since Q3 & Q4 reports for FY 2016/17 were still under preparation.</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"> If sector has no audit query: Score 4 If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: Score 2 points If all queries are not responded to Score 0 	<ul style="list-style-type: none"> Two queries; (1) Inadequate facilities in Health Units. Example Lack of running water, security fences around premises, transport for referrals, insufficient staff houses and lack of maternity services in Kigwera, Avongera, Bugoigo, Kihungya and Bitiaba Health Centres. (2) Poor management of Assets e.g. Non Utilization of the District Health Store. <p>All these still outstanding</p>	<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"> Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines (i.e. minimum 30 % women: score 2 	<ul style="list-style-type: none"> Kigwera HCII HUMC members list had 6 members (3 males & 3 females) Avogera HCII HUMC members list had 6 members (4 males & 2 females) Buliisa GH HUMC members list had 10 members (7 males & 3 females) 	<p>2</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"> Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2. 	<ul style="list-style-type: none"> No evidence was availed at the time of assessment 	0
<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"> 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 	<ul style="list-style-type: none"> No evidence was availed at the time of assessment 	0
<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"> The environmental officer and community development officer have visited the sites to check whether the mitigation plans are complied with: Score 2 	<ul style="list-style-type: none"> No evidence was availed at the time of assessment 	0
<p>The LG Health department has issued guidelines on medical waste management</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> Evidence that the LG has issued guidelines on medical waste management, including guidelines (e.g. sanitation charts, posters, etc.) for construction of facilities for medical waste disposal: score 4. 	<ul style="list-style-type: none"> No evidence was availed at the time of assessment <p><i>In conclusion, it's important to note that the key substantive staff in the DHO's office (including the DHO himself), were barely 3 months old in office at the time of this assessment as they had just been recruited and given appointment letters in Q4 of FY 2017/2018. Furthermore, it was reported that the Ag. DHO in office at that time never handed over office officially neither was the recruited DHO oriented appropriately on how to successfully manage the office. The red flags were several but these are key among them which I believe led to the under performance in a number of performance measures against which the department was assessed.</i></p>	0

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"> • 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"> o If 100 % of the budget allocation for the current FY is allocated to S/Cs below average coverage: score 10 o If 80-99%: Score 7 o If 60-79: Score 4 o If below 60 %: Score 0 	<ul style="list-style-type: none"> • Three sub-counties; i.e. Butiaba (31%), Buliisa (59%), and Kigwera (64%) are below district's safe water coverage (70%) • All the three sub-counties are targeted in FY 2018/19: <ul style="list-style-type: none"> o Butiaba: soon-to-be commissioned large-scale piped water supply and sanitation project through the Water and Sanitation Development Facility – Central o Buliisa: three deep boreholes (DBH) to be drilled; four DBHs to be rehabilitated; and one 5-stance VIP latrine o Kigwera: two DBHs due for rehabilitation; Total EP-funded upgrade of Wanseko piped water supply and sanitation project; one 5-stance VIP latrine; and rehabilitation of extra DBHs financed by Total EP (number to be determined) • Investments in the low-coverage sub-counties amount to UGX 174 million, which is 61% of the water and sanitation conditional grant FY 2018/19 budget (UGX 286 million) 	4

<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"> • 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. o If 100 % of the water projects are implemented in the targeted S/Cs: Score 15 o If 80-99%: Score 10 o If 60-79: Score 5 o If below 60 %: Score 0 	<ul style="list-style-type: none"> • As per Q4 submission dated July 9, 2018 three capital projects were implemented in FY 2017/18, viz.: <ul style="list-style-type: none"> o Drilling and installation of 6 DBHs o Rehabilitation of 10 DBHs o Design of Kabolwa water supply and sanitation system o Construction of a VIP 5-stance lined latrine at Kisansya • As per FY 2017/18 progress reports, the low-coverage sub-counties were catered for via the water grant as follows: <ul style="list-style-type: none"> o Buliisa: design of Kabolwa WSS; installation of three DBHs; and rehabilitation of three DBHs o Kigwera: one DBH rehabilitated; and construction of a 5-stance VIP lined latrine at Kisansya • The large-scale WSS project serving Butiaba SC is on course for commissioning in September 2018. In capital terms, at least three-quarters of WSS projects were implemented in the low-coverage sub-counties 	5
Monitoring and Supervision			
<p>The district Water department carries out monthly monitoring of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the district Water department has monitored each of WSS facilities at least annually.</p> <ul style="list-style-type: none"> • If more than 95% of the WSS facilities monitored: score 15 • 80% - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60% - 69% monitored: score 5 • 50% - 59%: score 3 • Less than 50% of WSS facilities monitored: score 0 	<ul style="list-style-type: none"> • Construction supervision and monitoring reports for the WSS projects presented in Performance Measure 2 were reviewed as follows: <ul style="list-style-type: none"> o Installation of six DBHs (by East African Boreholes Ltd): reported dated July 5, 2018 o Rehabilitation of 10 DBHs (by hand pump mechanics association): report dated March 13, 2018 o No evidence of implementation monitoring was presented for the 5-stance VIP facility at Kisansya • 2 out of 3 Projects: 67% 	5

<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"> Evidence that the district has submitted accurate/consistent data for the current FY: Score 5 List of water facility which are consistent in both sector MIS reports and PBS: score 5 	<ul style="list-style-type: none"> Buliisa reported FY 2017/18 achievements in quarters 3 and 4 For Q3, the LG reported on progress of design of Kabolwa PWS and borehole rehabilitation, while data for borehole rehabilitation and public sanitation facility was submitted in Q4 The list of facilities submitted via MoFED's PBS and captured in MoWE's MIS records is as follows: <ul style="list-style-type: none"> Drilling and installation of 6 DBHs Design of Kabolwa water and sanitation system Rehabilitation of 10 DBHs Construction of a 5-stance lined VIP latrine at Kisansya 	5
<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"> List of water facility which are consistent in both sector MIS reports and PBS: score 5 	<ul style="list-style-type: none"> The list of facilities submitted via MoFED's PBS, which is similar to MoWE's MIS records is as follows: <ul style="list-style-type: none"> Drilling and installation of 6 DBHs Design of Kabolwa water and sanitation system Rehabilitation of 10 DBHs Construction of a 5-stance lined VIP latrine at Kisansya The relevant MoWE MIS file: Quarterly Achievements FY 2017/18 	5
Procurement and contract management			
<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>	<ul style="list-style-type: none"> At the time of assessment, the DWO was yet to finalize submission of procurement requests to the PDU The PDU records confirm the above 	0

<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"> • 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 	<ul style="list-style-type: none"> • Whereas regular site visits are conducted, the Assessor was not furnished with a contract management plan 	<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"> • If water and sanitation facilities constructed as per design(s): score 2 	<ul style="list-style-type: none"> • The bidding document for the 6 No. DBHs issued August 4, 2017 details technical specifications for the same • Field assessment was conducted for four DBHs within Buliisa sub-county and the public sanitation facility at Kisansya (Kigwera sub-county) – and it was established the facilities were built as per designs • Locations of sampled WSS facilities are presented in Performance Measure 11 	<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"> • If contractor handed over all completed WSS facilities: score 2 	<ul style="list-style-type: none"> • The sampled DBHs were handed over and commissioned on June 29, 2018; while the sanitation facility's completion report is dated April 25, 2018. 	<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"> • If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2 	<ul style="list-style-type: none"> • The Project Managers certified and prepared completion reports dated as follows: <ul style="list-style-type: none"> o Drilling and installation of six DBHs (by East African Boreholes) – June 29, 2018 o Rehabilitation of 10 DBHs (by HPMA) – March 15, 2018 o 5-stance sanitation facility (by Mihigo and Sons) – March 28, 2018 	<p>2</p>

<p>The district Water depart- ment has certified and initi- ated payment for works and supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 	<ul style="list-style-type: none"> From the payment samples of the following vendors: East Africa Boreholes Ltd, Mihingo and Sons General Enterprise Ltd, Shataman Contractors (U) Ltd and Sags Geo Consultants Ltd, worth Ugx 196,140,986 for the following activities: Drilling and installation of 6 deep bore holes, 5 stance Lined VIP Latrines, design of Kabowa Solar powered water supply system and Consultancy on supervision of sitting and drilling boreholes, all the payments were made within a week for requisitions being made. 	3
Financial management and reporting			
<p>The district Water department has submitted annual reports (including all quarterly reports) in time to the Plan- ning Unit</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid- July for consolidation: score 5 	<p>At the time of assessment no evidence was provided since Q3 & Q4 reports for FY 2016/17 were still under preparation.</p>	0
<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"> 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"> If sector has no audit query score 5 If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0 	<ul style="list-style-type: none"> Three queries <ul style="list-style-type: none"> (1) Irregularities in the operation of water boards of Biiso, Butiaba and Wanseko. (Lack of updated asset register, lack of customer register, lack of reports from private operators and fees payment, faulty bulk meters and lack of plumbers). During LGPAC meeting on 28/2/2018, Min.5/BUL LGPAC/2/2018, Water Board Activities taken over by the Centre and tasked to address the irregularities. (2) Delays in implementation of water activities in Kijangi, Kisomere and Bukindwa Villages. (3) Un Accounted for Ugx 34,271,000 by Buliisa Hand Pump Mechanics. During LGPAC Meeting held on 8/8/2018, Min.10/BUL LGPAC/8/2018, the status of implementation of activities in the above three villages was done and the 34,271,000 was fully accounted for, hence LGPAC cleared the queries. 	3
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"> 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 	<p>The Committee for Water met and discussed service delivery issues was evidenced by its report to the District Executive Committee dated 17th October 2017 where among others it reported on the need to sensitize communities on fulfilling the six (6) critical requirements for a new water source.</p>	<p>3</p>
<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"> Evidence that the water sector committee has presented issues that require approval to Council: score 3 	<p>The Committee in its report to Council on 30th May 2018 vide: Min.COU/52/5/2017/18: "Presentation of Sectoral Committee reports", sought approval to have DTPC provide for latrines in rural growth centres where Council approved prioritization of Kabolwa as and when funds would be available.</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"> 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. 	<ul style="list-style-type: none"> The Water Department does not share info with the public as neither info on the Water Grant nor Annual Workplan is displayed on the LG's notice boards 	<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"> All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2 	<ul style="list-style-type: none"> The sampled projects are furnished with required details as follows: <ul style="list-style-type: none"> Borehole #1: Kigoya Village, Buliisa sub-county Funding: Poverty Action Fund; Date: 21.06.18 Contractor: East African Boreholes Ltd Borehole #2: Nyapeya Village, Buliisa T/C Funding: UNICEF; Date: FY 2017/18 Contractor: HPMA Borehole #3: Kifoogo Village, Buliisa sub-county Funding: Poverty Action Fund; Date: 22.06.18 Contractor: East African Boreholes Ltd 5-stance lined VIP latrine: Walukuba sub-county Funding: DWSCG ; Date: FY 2016/17 Contractor: Gilal Ltd 	2
<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"> Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2 	<ul style="list-style-type: none"> Tendering and contracting info is not displayed on the LG's notice boards 	0
<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> If communities apply for water/ public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1 	<ul style="list-style-type: none"> Community applications to the Water Department are on file. Successful applications reviewed include: <ul style="list-style-type: none"> Avogera Health Centre (Ngwendo sub-county): request dated March 12, 2018 for repair of borehole Uribo village (Buliisa sub-county): community meeting of July 4, 2018 seeking intervention to rehabilitate a borehole Kigwera sub-county BH committee: request dated April 9, 2018 for repair of borehole 	1

<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> Water and Sanitation Committees that are functioning evidenced by either: i) collection of O&M funds, ii) carrying out preventive maintenance and minor repairs, iii) facility fenced/protected, or iv) they have an M&E plan for the previous FY: score 2 <p>Note: One of parameters above is sufficient for the score.</p>	<ul style="list-style-type: none"> All the sampled WSS facilities are well-fenced, indicating respective WSCs are functional 	<p>2</p>
<p>Social and environmental safeguards</p>			
<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> Environmental screening for WSS projects is yet to be institutionalised in Buliisa. The natural resources department cited inadequate coordination as barrier to screening. 	<p>0</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"> Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1 	<ul style="list-style-type: none"> No follow-up made as environmental screening is not a practice 	<p>0</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"> Evidence that construction and supervision contracts have clause on environmental protection: score 1 	<ul style="list-style-type: none"> The bidding document for the 6 No. DBHs issued August 4, 2017 provides for tree planting, drainage and fencing all the sites The successful bidder (East African Boreholes Ltd) was bound the aforesaid document 	<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"> • 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 	<ul style="list-style-type: none"> • The training report dated March 5, 2018 for establishment of WSCs indicates their composition and position of members • Of the sampled WSS facilities, women on average make up four of the 7-member committees • Women on the sampled WSCs mainly take up treasurer and/or secretary roles 	<p>3</p>
<p>Gender and special needs-sensitive sanitation facilities in public places/ RGCs provided by the Water Department.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3 	<ul style="list-style-type: none"> • Assessment was done for public sanitation facilities built in the last two FYs (typically LGs construct at least one public sanitation facility every FY), and it was established the 5-stance VIP latrine facilities at Kisansya (Kigwera sub-county) and Kaluka (Walukuba sub-county) are sex-separated. The facilities also have adequate provision for PWDs. 	<p>3</p>