



## Local Government Performance Assessment

Buyende District

(Vote Code: 583)

Assessment	Scores
Accountability Requirements	50%
Crosscutting Performance Measures	63%
Educational Performance Measures	58%
Health Performance Measures	94%
Water Performance Measures	51%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Annual performance contract			
<p>LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.</p>	<ul style="list-style-type: none"> <li>• From MoFPED's inventory/schedule of LG submissions of performance contracts, check dates of submission and issuance of receipts and:               <ul style="list-style-type: none"> <li>o If LG submitted before or by due date, then state 'compliant'</li> <li>o If LG had not submitted or submitted later than the due date, state 'non-compliant'</li> </ul> </li> <li>• From the Uganda budget website: <a href="http://www.budget.go.ug">www.budget.go.ug</a>, check and compare recorded date therein with date of LG submission to confirm.</li> </ul>	<p>The LG submitted the PC to MoFPED through PBS system on Tuesday, July 24, 2018</p>	Yes
Supporting Documents for the Budget required as per the PFMA are submitted and available			
<p>LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY by 30th June (LG PPDA Regulations, 2006).</p>	<ul style="list-style-type: none"> <li>• From MoFPED's inventory of LG budget submissions, check whether:               <ul style="list-style-type: none"> <li>o The LG budget is accompanied by a Procurement Plan or not. If a LG submission includes a Procurement Plan, the LG is compliant; otherwise it is not compliant.</li> </ul> </li> </ul>	<p>The LG submitted a budget to the MoFPED on Wednesday, August 15, 2018 included a procurement plan for FY 2018/19</p>	Yes
Reporting: submission of annual and quarterly budget performance reports			

<p>LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)</p>	<p>From MoFPED's official record/inventory of LG submission of annual performance report submitted to MoFPED, check the date MoFPED received the annual performance report:</p> <ul style="list-style-type: none"> <li>• If LG submitted report to MoFPED in time, then it is compliant</li> <li>• If LG submitted late or did not submit, then it is not compliant</li> </ul>	<ul style="list-style-type: none"> <li>• The LG submitted the Annual Performance Report for the previous FY on 10/08/2018, (not as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015).</li> </ul>	No
<p>LG has submitted the quarterly budget performance report for all the four quarters of the previous FY by end of the FY; PFMA Act, 2015).</p>	<p>From MoFPED's official record/ inventory of LG submission of quarterly reports submitted to MoFPED, check the date MoFPED received the quarterly performance reports:</p> <ul style="list-style-type: none"> <li>• If LG submitted all four reports to MoFPED of the previous FY by July 31, then it is compliant (timely submission of each quarterly report, is not an accountability requirement, but by end of the FY, all quarterly reports should be available).</li> <li>• If LG submitted late or did not submit at all, then it is not compliant.</li> </ul>	<p>LG has submitted the quarterly budget performance report for all the four quarters. Through the PBS system of all quarters are as below:</p> <p>Q1 report submitted on 4th/12/2017</p> <p>Q2 report submitted on 21st /03/2018</p> <p>Q3 report submitted on 02/05/2018</p> <p>Q4 report submitted on 8th/08/2018</p> <ul style="list-style-type: none"> <li>• The LG submitted Q4 report for the previous FY on 10th /08/2018, (not as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015).</li> </ul>	No
Audit			
<p>The LG has provided information</p>	<p>From MoFPED's</p>	<p><i>Auditor General</i></p>	No

to the PS/ST on the status of implementation of Internal Auditor General and the Auditor General's findings for the previous financial year by end of February (PFMA s. 11 2g). This statement includes actions against all findings where the Internal Auditor and the Auditor General recommended the Accounting Officer to take action in line with applicable laws.

Inventory/record of LG submissions of statements entitled "Actions to Address Internal Auditor General's findings",

Check:

- 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.

The LG submitted the status of implementation of Auditor General's findings for the FY 2016/2017 to the PS/ST on 13 April 2018. Ref: CR/115/1 dated 02 April signed by the CAO. (The same document was received by Directorate of Internal Audit MoFPED on 07/April 2018. (submitted on time as per extension from end of Feb to April)

The Auditor General raised 3 queries in the report in a correspondence Dated 31 January 2018 from the PS/ST Ref IIA 50/260/01 received by Buyende Registry on 14 February 2018. All the three issues were responded to.

#### *Internal Auditor General*

The LG also provided information to PS/ST on the status of implementation Internal Auditor General's findings and it was received by PS/ST on 13 April 2018 (it was received by MoFPED registry on 12 April 2018 and Directorate of Internal Audit on 12 April 2018).

Most queries from the Internal Audit reports were responded to apart from only four queries .i.e.

1. Under collection of revenue (from Quarter 2 report)

2. Procurement /supplies/stores not taken on charge (from quarter 3 report)

3. Maintenance of 2 General Fund Account for the vote 583 (from quarter 4)

4. An Un-updated assets register. (Quarter 4)

Therefore, the LG was non-compliant because not all queries were responded to in the Status of Implementation of

		Internal Audit Findings.	
The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.		The LG had an unqualified audit opinion as per AG's Report.  <i>(Source: Report of the Auditor General to Parliament for FY ended 30 June 2018; Annexure IV; 4.2)</i>	Yes

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a district/ municipality has:</p> <ul style="list-style-type: none"> <li>• A functional Physical Planning Committee in place that considers new investments on time: score 1.</li> </ul>	<p>There was evidence that Buyende district has a functional Physical Planning Committee (PPC) which considers new investments.</p> <p>The Committee consists of 13 people. Letters of appointment of members were available eg a letter dated Feb. 26th, 2018, signed by Mr. Opolot Francis the Chief Administrative Officer (CAO). Earlier letters of appointment were written by the Deputy CAO Mr. Turyahikayo Norbert on October 21st, 2016. (under PPA part III sections 9-10)</p> <p>The committee has transacted business, has a plan registration book to register new investments, sits regularly on time to consider/approve plans submitted. Below are examples;</p> <ul style="list-style-type: none"> <li>• Under Min. 04/DPPC/28/3/2017/18 FY (presentation and approval of plans for renovation and remodelling of Kidera HCIV Laboratory.</li> </ul> <p>Health Department: Kidera HCIV Laboratory remodelling Submission date April 20th, 2018</p> <p style="text-align: right;">Approved date May 7th/2018</p> <ul style="list-style-type: none"> <li>• Under Min. No. 2/DPPC/10/08/2017/18 presentation, discussion and approval of plans for Flowerland PS ( Ntalumbya Richard and Namuyonga Jacqueline)</li> </ul> <ul style="list-style-type: none"> <li>o Plan submission date 2/8/2017</li> <li>o Plan approval date 31/08/2017</li> </ul> <p>(In FY 2017/18, the DPPC received 11 approval requests. All the submissions for new investments were considered within 30 days)</p>	<p>1</p>

<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that district/ MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD score 1.</li> </ul>	<p>The District submitted only 2 sets of minutes of 12th/05/2017 and 26th/08/2017 to the MoLHUD</p> <p>Records show that the Buyende District Physical Planning Committee sat seven (7) times ie</p> <ul style="list-style-type: none"> <li>- 7th/05/2018</li> <li>- 4th/04/2018</li> <li>- 24th /08/217</li> <li>- 9th/07/2018</li> <li>- 29th/06/2017</li> <li>- 8th/05/2017</li> <li>- 28th/03/2017</li> </ul>	<p>0</p>
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> <li>• All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0</li> </ul>	<p>The district has no Physical Plan, thus no infrastructure investments can be consistent with physical development which is not in place. Thus no plans have been approved following the Physical Plan developed by the district. The committee approves and controls physical developments in the sub counties as per Part V, section 40 of the Physical Planning Act 2010 sub section (1, 2, 3)</p>	<p>0</p>

<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"><li>• Action area plan prepared for the previous FY: score 1 or else 0</li></ul>	<p>Action Area Plan was not prepared for the previous FY, the LG has no Physical Plan and note;(action area plans are not developed annually)</p>	<p>0</p>
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<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.</li> </ul>	<p>There was evidence that priorities in the AWP for the current FY are based on the outcomes of Budget conferences. A budget conference for FY 2018/19 was held on October 24th, 2018 at the district Hqs. Priorities in the Budget Conference Report (BCR) for the current FY were as below;</p> <p>Technical Services and Works page 3 BCR</p> <ul style="list-style-type: none"> <li>• Opening and gravelling of roads</li> <li>• Emergency repairs (especially culverts)</li> </ul> <p>Education and Sports; page 3 BCR</p> <ul style="list-style-type: none"> <li>• Construction of a seed school at Buyende S/County</li> <li>• Construction of 3 classroom block at 5 sites ( Busuuyi SDA, Mutali PS, Kigweri PS, Kasira Moslem PS, Kigeizire PS)</li> <li>• Supply of 3 seater desks to schools</li> <li>• Procurement of 513 three-seater desks</li> </ul> <p>Health page 4 BCR</p> <ul style="list-style-type: none"> <li>• Rehabilitation of medical stores at Buyende HCIII</li> </ul> <p>Water page 3 BCR</p> <ul style="list-style-type: none"> <li>• Drilling of 17 boreholes (hand pump)</li> <li>• Quality testing of water sources</li> <li>• Rehabilitation of 15 boreholes</li> <li>• Construction of latrines 93) stances at Katukiro Trading Centre</li> <li>• Supervision , monitoring and coordination</li> </ul> <p>Production page 4 BCR</p> <ul style="list-style-type: none"> <li>• Procurement of 2 motorcycles for extension workers</li> <li>• Completion of livestock market at Igwaya market</li> <li>• Procurement of office furniture&amp; 2 laptops</li> </ul>
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<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If differences appear, a justification has to be provided and evidence provided that it was approved by the Council. Score 1.</li> </ul>	<p>Buyende district has an approved 5 year Development Plan (2015/16-2019/2020 signed and stamped by NPA on 3/8/2017. Capital investments in the approved annual work plan for the current FY are derived from the approved five-year development plan as shown below;</p> <p>Technical Services and Works;</p> <p>AWP page 71 and DDP page166 XXiii</p> <ul style="list-style-type: none"> <li>• Opening and gravelling of roads</li> <li>• Emergency repairs (especially culverts)</li> </ul> <p>Education and Sports; AWP page63 and DDP page 164-165 and Xxii-XXiii</p> <ul style="list-style-type: none"> <li>• Construction of a seed school at Buyende S/County</li> <li>• Construction of 3 classroom block at 5 sites ( Busuuyi SDA, Mutali PS, Kigweri PS, Kasira Moslem PS, Kigeizire PS)</li> <li>• Supply of 3 seater desks to schools</li> <li>• Procurement of 513 three-seater desks</li> </ul> <p>Health AWP 61 page and DDP page160-164 and Xxi-XXii</p> <ul style="list-style-type: none"> <li>• Rehabilitation of medical stores at Buyende HCIII</li> </ul> <p>Water and Sanitation AWP page77 and DDP page 167-168 XXiii</p> <ul style="list-style-type: none"> <li>• Drilling of 17 boreholes (hand pump)</li> <li>• Quality testing of water sources</li> <li>• Rehabilitation of 15 boreholes</li> <li>• Construction of latrines 93) stances at Katukiro Trading Centre</li> <li>• Supervision , monitoring and coordination</li> </ul> <p>Production AWP page 50-51 and DDP page 158-160 XXI</p> <ul style="list-style-type: none"> <li>• Procurement of 2 motorcycles for extension workers</li> <li>• Completion of livestock market at Igwaya market</li> <li>• Procurement of office furniture&amp; 2 laptops</li> </ul>	
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<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2.</li> </ul>	<p>Buyende LG developed project profiles for FY 2017/18 dated May 3rd, 2018; profiles were presented to TPC and discussed in a meeting held on 21/03/2018 (TPC Min:BDLG/TPC/March 2018). Presentation and discussion of project profiles for FY 2018/19. The profiles seen are elaborate, for all projects and follow the format; they include work plan, M&amp;E strategy, M&amp;E plan, and EIA and mitigation plan.</p>	<p>2</p>
<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> <li>• Annual statistical abstract, with gender- disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum score 1.</li> </ul>	<p>Buyende LG with support from Uganda Bureau of Statistics compiled a Statistical Abstract FY 2018/19, dated May, 2018. It included gender disaggregated data: male and female, rural and urban population, disaggregated gender data by Council, district departments and other population segments. (Pages Vii, ix, 4 etc. The Abstract was presented to TPC meeting on May 7th, 2018 under TPC Min: 7: DTPC/7/5/2018.</p>	<p>1</p>

<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2</li> </ul>	<p>From the Annual Budget Performance Report for FY2017/18, all infrastructure projects implemented by the LG were derived from the AWP and budget approved; examples are captured below:</p> <p>Roads (APR pg 79)</p> <ul style="list-style-type: none"> <li>• District and Community roads maintenance, AWB page 56, and pg22 (shs. 322,515,000)</li> </ul> <p>Water and sanitation (APR pg 75)</p> <ul style="list-style-type: none"> <li>• Drilling of 17 boreholes AWB pg 61, ( shs 425,428,000)</li> <li>• Construction of 5 stance latrine as Budipa landing site AWB75 and 24 (shs 18,200,000)</li> </ul> <p>Education (APR page 64)</p> <ul style="list-style-type: none"> <li>• Construction of classroom blocks at Nakabira PS, and Butaswa PS AWP page 52 and budget page 18</li> </ul> <p>(Shs 162,000,000).</p> <ul style="list-style-type: none"> <li>• Latrine Construction at Kakooge, Wesunile, Butaswa, Nsomba PS respectively AWP 52 and budget pg 18 (shs 90,000,000)</li> <li>• Construction of a 2 unit classroom block at Bugeywa PS, Butansi S/C, and AWP page 46, and budget page 29</li> </ul> <p>Planning Unit</p> <ul style="list-style-type: none"> <li>• Construction of 3 classroom block and office and store at Namugongo PS, AWB page120. and budget 31</li> <li>• Partial procurement of a pickup vehicle for the Planning Unit/Dept. AWB page76 and budget page31.</li> </ul> <p>Production Department</p> <ul style="list-style-type: none"> <li>• Procurement of Tse-Tse Fly Control Nets, AWP page 43 and budget page 13</li> <li>• Construction of a Slaughter slab and drainage at Igwaya Market and Irundu RGC, AWPpage44 and budget page 13.</li> </ul>
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<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY.</li> <li>o 100%: score 4</li> <li>o 80-99%: score 2</li> <li>o Below 80%: 0</li> </ul>	<p>From the Annual Budget Performance Report, the infrastructure projects implemented by the LG were completed as per work plan by end of FY 2017/18.</p> <p>Roads</p> <ul style="list-style-type: none"> <li>• District and Community roads maintenance, APR page 79.</li> </ul> <p>100% completed on schedule</p> <p>Water and sanitation</p> <ul style="list-style-type: none"> <li>• Drilling of 17 boreholes APR pg75 completed 100%</li> <li>• Construction of 5 stance latrine at Budipa landing site</li> </ul> <p>APR page 75. 100% completed on schedule</p> <p>Education</p> <ul style="list-style-type: none"> <li>• Construction of classroom blocks at Nakabira PS and Butaswa PS, APR page 64. 100% completed on schedule</li> <li>• Latrine Construction at Kakooge, Wesunile, Butaswa, Nsomba PS respectively. APR page 64. 100% completed on schedule</li> </ul> <p>Planning Unit</p> <ul style="list-style-type: none"> <li>• Construction of 3 classroom block and office and store at Namugongo PS, APR page 93. 100% completed</li> <li>• Partial procurement of a pickup vehicle for the Planning Unit/Dept. APR page 93. Partial commitment 100% met.</li> </ul> <p>Production Department</p> <ul style="list-style-type: none"> <li>• Procurement of Tse-Tse Fly Control Nets, APR page 54</li> <li>• Construction of a Slaughter Slab and Drainage at Igwaya Market and Irundu RGC, APR page 93. Completed 100% on schedule</li> </ul> <p>-</p>	
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The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects during the previous FY

Maximum 4 points on this Performance Measure.

- Evidence that all investment projects in the previous FY

were completed within approved budget – Max. 15% plus or minus of original budget: score 2

From the Annual Budget Performance Report 2017/18 investment projects were implemented and completed within approved budget as shown below;

#### Education

- Construction of classroom blocks at Nakabira PS, and Butaswa PS

Total Budget shs 162,000, 000

Actual spent shs 162,000, ,000

#### Production

- Procurement of Tse-Tse Fly Control Nets,
- Construction of a Slaughter Slab and Drainage at Igwaya Market and Irundu RGC,

Budget for the two projects shs 53,643,000

Actual expense for the two projects shs 46,155,000

#### Planning Unit

- Construction of 3 classroom block, office and store at Namugongo PS
- Partial procurement of a pickup vehicle for the Planning Unit/Dept.

Budget for the two projects shs 139,751,000

Actual expense for the two shs 139,240,000

<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has budgeted and spent at least 80% of the O&amp;M budget for infrastructure in the previous FY: score 2</li> </ul>	<p>Expenditure on O&amp;M for infrastructure was 98.2% above the 80% required to be spent on infrastructure</p>	<p>2</p>
<p>Human Resource Management</p>			

<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has filled all HoDs positions substantively: score 3</li> </ul>	<ul style="list-style-type: none"> <li>• The LG has 11 HoDs in its approved structures</li> </ul> <p>Of these 7 are substantively filled while 4 are not substantively filled, these positions are;</p> <ul style="list-style-type: none"> <li>o District planner. Mr Mugulesi Gideon who is acting was recommended for promotion as per letter dated 27/4/2018.</li> <li>o Chief Finance Officer</li> <li>o District Natural Resources Officer</li> <li>o District Engineer</li> </ul> <p>? These positions were advertised and a process is going on for filling although some like District Engineer was advertised 3 times for filling but was not filled mainly because no suitable candidates applied.</p> <ul style="list-style-type: none"> <li>• The details of sampled HoDs are indicated in the table below:</li> </ul> <ul style="list-style-type: none"> <li>• DHO appointed under min.no BYD/DSC/3/2018</li> <li>• Chief Internal Auditor appointed on min. BYD/DSC/15/17</li> <li>• District Community Development Officer appointed on min BYD/DSC/33/17 (6)(II)</li> <li>• DEO appointed under Min. No BYD/DSC/28/2017</li> <li>• Senior Procurement Officer appointed under Min.no BYD/DSC/17/2017(B)I)</li> <li>• District Production officer appointed under Min. No. BYD/DSC/4/2018</li> <li>• Principle Human Resource Officer appointed under Min. No. BYD/DSC/23/2018(B)(3) has not yet assume duty although he signed the acceptance</li> </ul>	<p>0</p>
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<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• Review of personal files and appraisal files containing performance agreements and reports of the HoDs both substantive and those in acting position revealed the following findings.</li> <li>• District Health Officer was appraised</li> <li>• District Education officer was appraised</li> <li>• District Natural Resources Officer was appraised</li> <li>• District Production Officer was appraised</li> <li>• Acting District Planner was appraised</li> <li>• District Community Development Officer was appraised</li> <li>• Acting District Engineer was appraised</li> <li>• Acting CFO was appraised</li> <li>• Senior Procurement Officer was appraised</li> <li>• Chief Internal Auditor was appraised</li> <li>• Acting Principle Human Resource Officer was appraised</li> </ul> <p>Therefore appraisal was 100 percent</p>	<p>2</p>
<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100 % of staff submitted for recruitment have been considered: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• Reviewed the register of submissions and declaration of vacancies from the CAOs office to the DSC as per letters dated 8th Sept 2017 and 29th Jan 2018 and 11th April 2018. Findings from the review revealed that:</li> <li>• Overall 120 staff position were submitted on letter dated 8th Sept 2017 Ref NO: CR:156/1</li> <li>• The commission met under Min. No. BYD/DSC/26/2017 and shortlisted and recruited 120 staff.</li> <li>• Between January and May 2018 the DSC interviewed the candidates that had expressed interest and recruited staff.</li> </ul> <p>Therefore all submissions were considered.</p>	<p>2</p>

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

Maximum 4 points on this Performance Measure.

- Evidence that 100 % of positions submitted for confirmation have been considered: score 1

- Evidence from the register of submissions from the CAOs office to the DSC. Findings from the review revealed that:

Letter of submission dated 7th Sept 2017, 9th Nov 2017 and 23rd Jan 2018 were considered under minutes BYD/DSC/26/2017, BYD/DSC/37/2017, BYD/DSC/40/2017, BYD/DSC/21/2018.

#### Examples

Bakaise Julius education assistant was confirm,ed

Lyindha Edward education assistant was confirmed

Babise Aggrey Health Officer was confirmed

Alitubera Rebecca Nursing Officer was confirmed

Banganzi Moses Health Educator was confirmed

Luwano John Francis Office Attendant was confirmed

Balikowa John Bosco Education Assistant was confirmed

Sendawula Ronald Assistant Statistical Officer was confirmed

<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100 % of positions submitted for disciplinary actions have been considered: score 1</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence from submission lists shows that some staff recommended for disciplinary were disciplined while others were not considered for disciplinary action.</li> </ul> <p>Examples;</p> <p>Mr. Elimu Bernard Community Development Officer</p> <p>Interdicted under letter dated 23rd May 2018</p> <p>Mr. Basomerani Badrew Head Teacher Lukotaime p/s and Nandawula Samia Head Teacher Budiope p/s were involved in exam malpractice and Submission letter from CAO dated 24th August 2017 recommended for reprimand and a correspondence from DSC dated 22nd Sept 2017 need for more information.</p> <ul style="list-style-type: none"> <li>• Submission letter ref. ADM/157 dated 13th Oct 2017 for disciplinary action for absenteeism of some staff in the health sector was not considered because there is no correspondence from DSC to that effect.</li> <li>• Another submission for disciplinary action from CAO to DSC ref. CR/157/01 dated 13th July 2017 was not considered</li> </ul>	<p>0</p>
<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence from recruited staff lists and salary payroll show that 76 staff were recruited in financial year 2017/2018 and all of them accessed payroll in two months. Two members of staff Mr. Bwisuka Emmanuel and Mr. Kawuzi Godfrey for the positions of Assistant Animal Husbandry whose position was not yet captured by Public Service. Examples of those who accessed in time are;</li> </ul> <p>Isabirye Anthony was appointed on 18th JAN2018 and accessed payroll on 10th March 2018,</p> <p>Wabuyi Philip was appointed on 10th May 2018 and accessed payroll on 15th June 2018,</p> <p>Bazaale Olivia was appointed 20th March2018 and accessed payroll on 15th May 2018</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"> <li>• Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• All the 11 staff that were retired, none accessed pension payroll in two months. examples of these are;</li> </ul> <p>Wandera Babi Kigulu p/s</p> <p>Tuyoole Margret Kigweri p/s</p> <p>Irumba Alex Ngole p/s</p> <p>Baligeya Sebastian Wandago p/s</p> <p>Namwase Joyce Nkondo Muslim p/s</p> <p>Bataire Elizabeth St. Jude Katogwe P/S</p> <p>Walusa Simon Naloose P/S</p> <p>Wakida Micheal Namusikizi P/S</p> <p>Mr. Bagoole Fredrick Ndorwa P/S</p> <p>Mutaki Margret Kamugowa P/S</p> <p>Tibigwayo Wilber Bupioko P/S</p> <p>Therefore 00 percent accessed pension payroll.</p>	<p>0</p>
<p>Revenue Mobilization</p>			
<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• If increase in OSR (excluding one/off, e.g. sale of assets) from previous FY but one to previous FY is more than 10 %: score 4.</li> <li>• If the increase is from 5% -10 %: score 2.</li> <li>• If the increase is less than 5 %: score 0.</li> </ul>	<p>The LG registered a total of 91,058,020 of OSR (Net of One offs) for FY 2017/2018 as shown in the financial accounts 2017/18 Pg15 Statement of Financial performance verified by the statement of revenue(local) collected during the year ended 30 June 2018.</p> <p>For FY 2016/17 the LG registered Shs 114,355,275 as shown in The financial accounts 2016/17 Pg 12 (Statement of Financial performance and Statement of Arrears of revenues Pg 23).</p> <p>There was a decrease of 20% (shs 23,297,255)</p> <p>The LG attributes the decrease in revenue to the water weed on Lake Kyoga which stagnates fishing yet it is one of their major sources of revenue.</p> <p>Charcoal is also another source of revenue that is difficult to monitor because charcoal traders move late in the night making it difficult to collect revenue from them.</p>	<p>0</p>

<p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10 %: then score 2. If more than +/- 10 %: Score 0.</li> </ul>	<p>The total Local Revenue Budgeted for FY 2017/2018 was Shs 170,200,001 as shown in “BUDGET APPROVAL SPEECH FOR 2017/2018 FINANCIAL YEAR” dated 4 May 2017 Ref: Fin 583/2 under Buyende District Approved Revenue Estimates for FY 2017/18.</p> <p>The actual local revenue collected was shs 91,058,020 for FY 2017/2018 as per the Financial statements under “Statement of Financial Performance” the Financial statements were stamped by OAG-Jinja branch and and MoFPED on 29 August 2018</p> <p>The budget realisation was -30% (shs 79,141,981)</p>	<p>0</p>
<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2</li> </ul>	<p>The LG collected a total of shs 36,442,915 but it did not remit any mandatory share of local revenue to LLGs. The CFO attributed this to low revenues yet the District had a lot of pending issues.</p>	<p>0</p>
<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the total Council expenditures on allowances and emoluments- (including from all sources) is not higher than 20% of the OSR collected in the previous FY: score 2</li> </ul>	<p>From the Financial statements of 2017/2018 the council expenditures were shs 41,780,000 compared to revenue of shs 91,058,020 (2016/17). This indicated 46% of OSR which is above the threshold of 20%.</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"> <li>• Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2</li> </ul>	<p>Senior Procurement Officer (SPO) position was substantially filled as indicated in the letter dated 23rd March 2018 under the District Service Commission (DCS) Minute Number: BYD/DSC/12/2018 (1) signed by CAO.</p> <p>Procurement Officer (PO) position was substantially filled under the District Service Commission (DCS) Minute Number: BYD/DSC/1/2018 (1) as indicated in the letter dated 18th January 2018 signed by CAO.</p>	<p>2</p>
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<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1</li> </ul>	<p>Technical Evaluation Committee (TEC) produced and submitted reports to the Contracts Committee (CC). For example;</p> <ol style="list-style-type: none"> <li>TEC report dated 16th October 2017 recommended M/s M.M Development (U) Ltd for the Construction of a 3 Classroom Block at Nakabira COPE P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00001) at a cost of UGX 78,977,990 including all contingencies.</li> <li>TEC report dated 31st July 2017 recommended Bazira Consultants Ltd for the Construction of a 3 Classroom Block at Namugongo P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00003) at a cost of UGX 78,519,712 including all contingencies.</li> <li>TEC report dated 6th July 2017 recommended Sseka Group of Companies for the Construction of a 5-stance lined VIP latrine at Butaswa P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00015) at UGX 17,758,410.</li> <li>TEC report dated 31st July 2017 recommended M/S Galaxy Agro Tech (U) Ltd for the Lot 1 Boreholes drilling, Pump testing, Casting and Installation of 6 boreholes under RWSCG in FY 2017/18 Lot 1 (Proc Ref No: BUYE 583/WRKS/2017-18/00004) at UGX 136,453,200.</li> <li>TEC report dated 31st July 2017 recommended M/S Galaxy Agro Tech (U) Ltd for the Lot 2 (Proc Ref No: BUYE 583/WRKS/2017-18/00005) at UGX 159,195,400.</li> <li>TEC report dated 31st July 2017 recommended M/S Galaxy Agro Tech (U) Ltd for the Lot 3 (Proc Ref No: BUYE 583/WRKS/2017-18/00006) at UGX 159,195,400.</li> <li>TEC report dated 16th October 2017 recommended Bazira Consultants Ltd for the Supply and Delivery of Borrow Pits (Gravel pits) to Ndalike-Bugaya-Igoola road under framework contract under URF (Proc Ref No: BUYE 583/Supls/2017-18/00006) at UGX 16,380,000.</li> </ol>	
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<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the Contracts Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1</li> </ul>	<p>Contracts Committee (CC) considered recommendations of the TEC. For example,</p> <p>i. Under CC Minute Number 117/DCC/2017 (1) dated 16th October 2018, CC approved the recommendations of TEC for the Construction of a 3 Classroom Block at Nakabira COPE P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00001) at a cost of UGX 78,977,990 including all contingencies.</p> <p>ii. Under CC Minute Number 097/DCC/2017, the CC approved the recommendations of TEC for the Construction of a 3 Classroom Block at Namugongo P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00003) at a cost of UGX 78,519,712 including all contingencies.</p> <p>iii. Under CC Minute Number 124/DCC/2017, the CC approved the recommendations of TEC for the Construction of a 5-stance lined VIP latrine at Butaswa P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00015) at UGX 17,758,410.</p> <p>iv. Under CC Minute Number 097/DCC/2017/(5), the CC approved the recommendations of TEC for Lot 1 Boreholes drilling, Pump testing, Casting and Installation of 6 boreholes under RWSCG in FY 2017/18 Lot 1 (Proc Ref No: BUYE 583/WRKS/2017-18/00004) at UGX 136,453,200.</p> <p>v. Under CC Minute Number 097/DCC/2017/ (3), the CC approved the recommendations of TEC for the Lot 2 (Proc Ref No: BUYE 583/WRKS/2017-18/00005) at UGX 159,195,400.</p> <p>vi. Under CC Minute Number 097/DCC/2017/ (3), the CC approved the recommendations of TEC for Lot 3 (Proc Ref No: BUYE 583/WRKS/2017-18/00006) at UGX 159,195,400.</p> <p>vii. Under CC Minute Number 117/DCC/2017/(1), the CC approved the recommendations of TEC for the Supply and Delivery of Borrow Pits (Gravel pits) to Ndaliike-Bugaya-Igoola road under framework contract under URF (Proc Ref No: BUYE 583/Supls/2017-18/00006) at UGX 16,380,000.</p>	<p>1</p>
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<p>The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.</p> <p>Maximum 2 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2</li> </ul>	<p>The current Procurement plan for FY 2018/19 that was approved by Council on 30th August 2018 does not cover all infrastructure projects in the current approved and AWP/B for FY 2018/19.</p> <p>This was because MFPED revised guidelines for budgeting for the seed schools when the final AWP 2018/19 had been submitted to MFPED based on the first IPFs. Hence some projects in the procurement plan FY 2018/19 are not shown in the current AWP for FY 2018/19 because of the adjustments in the education sector.</p>	<p>0</p>
<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/ infrastructure by August 30: score 2</li> </ul>	<p>A total of 19 bid documents for infrastructure projects had been prepared by PDU and dully approved by the contracts committee on 11th July 2018 which was before 30th August 2018. The percentage was calculated to be 85.7%.</p> <p>There was only 1 bid document for shortlisting of all providers for revenue collection of revenue from the 48 centres (i.e. landing sites, markets, etc). Infrastructure project in the road sector were under force on account and thus did not require bid documents except those under supply of road construction materials e.g Borrow pits, culverts, etc.</p>	<p>2</p>

<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p>	<ul style="list-style-type: none"> <li>• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2</li> </ul>	<p>There was an updated contract register with complete procurement activity files for all procurements made in FY 2017/18. For example, from a sample of 5 projects with serial numbers listed below;</p> <ul style="list-style-type: none"> <li>• Construction of a 3 Classroom Block at Nakabira COPE P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00001).</li> <li>• Serial Number (S/N) 5: Construction of a 3 Classroom Block at Namugongo P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00003).</li> <li>• Construction of a 5-stance lined VIP latrine at Butaswa P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00015) at UGX 17,758,410.</li> <li>• Serial Number (S/N) 6: Boreholes drilling, Pump testing, Casting and Installation of 6 boreholes under RWSCG in FY 2017/18 under Lot 1 (Proc Ref No: BUYE 583/WRKS/2017-18/00004) at UGX 136,453,200.</li> <li>• Serial Number (S/N) 8: Boreholes drilling, Pump testing, Casting and Installation of 6 boreholes under RWSCG in FY 2017/18 under Lot 2 (Proc Ref No: BUYE 583/WRKS/2017-18/00005) at UGX 159,195,400.</li> <li>• Serial Number (S/N): 2 Boreholes drilling, Pump testing, Casting and Installation of 6 boreholes under RWSCG in FY 2017/18 under Lot 3 (Proc Ref No: BUYE 583/WRKS/2017-18/00006) at UGX 159,195,400.</li> </ul>
<p>Maximum 6 points on this performance measure.</p>		

<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p>	<ul style="list-style-type: none"> <li>• For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.</li> </ul>	<p>Buyende DLG adhered to the procurement thresholds. For example, from the sampled projects below, indicated compliance with the procurement thresholds &amp; method of procurement.</p> <p>Open Domestic Bidding (ODB) applied on Construction of a 3 Classroom Block at Nakabira COPE P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00001).</p> <p>Open Domestic Bidding (ODB) applied on Construction of a 3 Classroom Block at Namugongo P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00003).</p> <p>Restrictive Domestic Bidding (ODB) applied on Construction of a 5-stance lined VIP latrine at Butaswa P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00015) at UGX 17,758,410.</p> <p>Open Domestic Bidding (ODB) applied for Boreholes drilling, Pump testing, Casting and Installation of 6 boreholes under RWSCG in FY 2017/18 Lot 1 (Proc Ref No: BUYE 583/WRKS/2017-18/00004) at UGX 136,453,200.</p> <p>Open Domestic Bidding (ODB) applied on Lot 2 (Proc Ref No: BUYE 583/WRKS/2017-18/00005) at UGX 159,195,400.</p> <p>Open Domestic Bidding (ODB) applied on Lot 3 (Proc Ref No: BUYE 583/WRKS/2017-18/00006) at UGX 159,195,400.</p>
<p>Maximum 6 points on this performance measure.</p>		

<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates</li> </ul> <p>for all projects based on technical supervision: score 2</p>	<p><u>Not all works</u> projects implemented in the previous FY 2017/18 were appropriately certified. Interim and completion certificates a few projects based on technical supervision were on file and attached to the payment vouchers. For example,</p> <ul style="list-style-type: none"> <li>Interim completion Certificate number 1 issued on 5th January 2017 and Interim Completion Certificate number 2 issued on 21st February 2018 signed by the District Engineer, District Education Officer and CAO were attached to the payment certificate/vouchers for the Construction of a 3 Classroom Block at Nakabira COPE P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00001).</li> <li>Project files for most completed infrastructure projects did not have progress reports based on technical supervision attached to payment vouchers. User departments mainly considered payment vouchers as interim or completion certificates.</li> </ul>	0
<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2</li> </ul>	<p>There was no works project for the current FY 2018/19 that was implemented so that the LGPA Assessor can visit the sites to ascertain if projects were clearly labelled (site boards) indicating the name of the project, contract value, the contractor; source of funding and expected duration.</p>	2
Financial management			
<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4</li> </ul>	<p>The LG was up to date with monthly bank reconciliations up to the time of the assessment as evidenced below from a sample of 5 Bank accounts;</p> <p>1. BUYENDE DISTRICT GENERAL FUND-Centenary Bank</p> <p>A/c No. 6412100001</p> <p>The last reconciliation for the month of August was on the 31 August 2018 and endorsed by the CFO. Hence the bank reconciliation statements were up to date to the time of the assessment.</p> <p>July 2017 was reconciled on 31 July 2017</p>	4

Dec 2017 reconciliation was done on 08 Jan 2018.

Nov 2017 reconciliation was done on 10 Dec 2017.

June 2018 reconciliation was done on 30 July 2017

2. BUYENDE DISTRICT NATURAL RESOURCES- Centenary Bank

A/c No- 6410500082

Aug 2018 reconciliation was made on 03 Sept 2018

July 2017 reconciliation was done on 07 Aug 2017

Dec 2017 reconciliation was done on 12 Jan 2018

June 2018 reconciliation was done on 30 June 2018

3. BUYENDE DISTRICT COMMUNITY DEVELOPMENT- Centenary Bank

A/c No.- 302253000041

Aug 2018 reconciliation was done on 31 Aug 2018

July 2017 reconciliation was done on 07 Aug 2017

Dec 2017 reconciliation was done on 08 Jan 2018

June 2018 reconciliation was done on 30 June 2018

4. BUYENDE EDUCATION-CENTENARY BANK

A/c No. 6410500004

Aug 2018 reconciliation was done on 30 August 2018.

July 2017 reconciliation was done on 14 August 2017

Sept 2017 reconciliation was done on 10 Oct 2017.

Dec 2017 reconciliation was done on 08 Jan 2018

June 2018 reconciliation was done on 30 June 2018

5. BUYENDE DISTRICT HEALTH- Centenary Bank

A/c No. 6410500084

Aug 2018 reconciliation was done on 31 Aug 2018

		<p>March reconciliation was done on 01 April 2018</p> <p>June 2018 reconciliation was done on 30 June 2018.</p> <p>Note: All reconciliation statements were signed by the CFO as required by the Local Government Financial and Accounting Regulations 2007. Part VII Sec 73.</p>	
<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• If the LG makes timely payment of suppliers during the previous FY</li> <li>– no overdue bills (e.g. procurement bills) of over 2 months: score 2.</li> </ul>	<p>The LG made timely payments to suppliers during FY 2017/2018 as evidenced by the sample below;</p> <p>MM Developments Limited Contract No. BUYE 583/WRKS/2017-18/00001 (shs 33,419,112) for construction of 3-classroom block with office, store and installation of lightening conductor at Nakabira Cope Primary School. A requisition for payment of Shs 33,419,112 was made on 12 March 2018, certified/recommended by the DEO on 26 March 2018 and paid on 05 April 2018 Voucher No. 1347, Cheque No. 000714.</p> <p>Payment requisition for Total (U) Ltd Kamuli was made on 02 March 2018 for the supply of Fuel for Health sector for an amount of shs 1,020,000. This was approved/recommended by the DHO on 02 March 2018 and paid on 14 March 2018 Voucher No. 1550, Receipt No. 229 Cheque No. 000710.</p> <p>Talya General Contractors Limited Contract No. BUYE 583/WRKS/2017-18/00013 (shs. 17,250,000) for construction of 5 stances lined pit latrine at Kabbaale Primary School. A requisition for payment of shs 14,735,593 was made on 10 February 2018, recommended/certified (01) on 21 February 2018 and paid on 22 February 2018 Voucher No. 1550 Cheque No. 000701.</p> <p>Galaxy contract for pump testing, casting and installation of 7 boreholes Lot 1 Contract No. BUYE 583/WRKS/17-18/00004 &amp; BUYE 583/WRKS/17-18/00005 dated 21 August 2017 (Shs 129,137,188). Payment request of shs129,137,188 was made on 11 December 2017, certified (No. 01) on 19 December 2017 and it was paid on 19 December 2017.</p> <p>Sseka Group of Companies Contract No. BUYE/583/WRKS/2017-18/00005 for construction of 5- stances VIP lined pit latrine at Butaswa Primary School. A requisition for payment of Shs 15,169,896 was made on 10 January 2018, certified (No. 01) by DEO on 19 January 2018 and paid on 19 January 2018 Rec No. 704 Chq No.</p>	<p>2</p>

		<p>000697.</p> <p>Davis and Shirtliff contract for Renovation of Inyingo mini piped water system Contract No. BUY/WRKS/17-18 0023 (Shs 16,401,410) dated 21 August 2017. Payment request of Shs 740,600 was made on 02 November 2017, certified by DWO on 20 March 2018 and paid on 11 April 2018 Voucher No. 1347</p> <p>The sampled suppliers were all paid within a time frame of less than 2 months.</p>	
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has a substantive Senior Internal Auditor: 1 point.</li> <li>• LG has produced all quarterly internal audit reports for the previous FY: score 2.</li> </ul>	<p>The LG had a Principal Auditor – (Okello James Andrew Onyango) Appointed under DSC Min.No. BYD/DSC/15/2017.Ref: CR/160/01, Letter was signed and stamped by the CAO on 11 May 2017.</p>	1

The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations

Maximum 6 points on this performance measure.

• LG has produced all quarterly internal audit reports for the previous FY: score 2.

Internal Audit had all the reports for the four quarters.

Quarter 1 report dated 20 Nov 2017

Quarter 2 report dated 10 April 2019

Quarter 3 report dated 11 June 2018

Quarter 4 report dated 28 August 2018

*References to Internal Audit meeting minutes.*

1. The meeting held on 11 June 2018 that had 3 members in attendance. BDLG/17/MIN 04.06.2017/2018: SIGNING AUDIT REPORT FOR QUARTER 3. The quarter 3 report was signed by the Chairperson/Principal Internal Auditor.

2. The meeting held on 30 August 2018 Ref: BDLG/IA/MIN No.02.08/2018/2019: COMMUNICATION FROM CHAIRPERSON

The last bullet of this meeting was; the chairperson thanked the team for having the Quarter 4 report submitted.

3. According to the minutes of the meeting held on 08 April 2018 under BDLG/IA/MIN.04.04.2017/18: OFFICIAL SIGNING OF QUARTER 2 MANDATORY AUDIT REPORT: under resolutions column the chairperson signed the report.

4. According to the minutes of the meeting held on 20 November 2017 Ref: BDLG/IA/03.11.2017/18: SIGNING OF MANDATORY AUDIT REPORT FOR QUARTER ONE 2017/18; The audit report was discussed but had issues which were rectified and the Secretary was responsible for its finalisation by 23 November 2017.

The LG produced all the 4 quarterly reports for FY 2017/2018.



<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 LG did not provide information to the Council and the LG PAC on the status of implementation of internal audit findings because not all quarterly reports for FY 2017/2018 were submitted to PAC.</p> <p>Internal Audit produced all quarterly reports but did not submit them to PAC. Furthermore, in all the minutes of the Internal Audit meetings held there was no minute discussing submissions to PAC or council.</p>	<p>0</p>
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The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations

Maximum 6 points on this performance measure.

• 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.

Not all internal Audit reports for FY 2017/2018 were submitted to LG Accounting Officer and LG PAC as elaborated below;

Quarter 1 report dated 20 November 2017 was submitted to PAC on 23 November 2017.

Quarter 2 report dated 10 April 2018 was submitted to CAO (Accounting Officer) on 17 April 2018

Quarter 3 report dated 11 June 2018 was submitted CAO

Quarter 4 report dated 28 August 2018 was submitted to CAO (Accounting officer) on 30 August 2018

*In reference to LG PAC minutes;*

PAC meeting held on 17th and 18th July 2017; BDLG/PAC/MIN No. 04.06/2016/2017: RESPONSES TO AUDIT QUERIES.

Quarter 1 audit queries were discussed and recommendations availed from Page 14 to 21.

PAC meeting held on 16 March 2018: BDLG/PAC/MIN.03.03/2016/2017: FINALIZATION OF REPORTS

Quarter 1 report was again discussed and finalized.

All minutes were signed by the Secretary and Chairperson.

Without discussion of the 4 quarterly reports by PAC, it could not give recommendations and neither could the Internal Audit department give an implementation status.

Note: Both minutes referenced here were held in the year 2017/2018 (basing on the dates when they were held) but the Min references have the year 2016/2017.

<p>The LG maintains a detailed and updated assets register Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG maintains an up- dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4</li> </ul>	<p>The LG maintains an Assets register but it is missing vital information like cost of the assets.</p> <p>Education and Sports assets, Management and support services assets, Production and Marketing assets among others have no costs attached and the date when they were purchased or first used by the LG.</p> <p>Apart from the above comments; the format used is not the one required by the Accounting manual (Form AC 33 (a), (b), etc)</p>	<p>0</p>
<p>The LG has obtained an unqualified or qualified Audit opinion</p> <p>Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY:</p> <ul style="list-style-type: none"> <li>• Unqualified audit opinion: score 4</li> <li>• Qualified: score 2</li> <li>• Adverse/disclaimer: score 0</li> </ul>	<p>The LG had an unqualified audit opinion as per AG's Report.</p> <p><i>(Source: Report of the Auditor General to Parliament for FY ended 30 June 2018; Annexure IV; 4.2)</i></p>	<p>4</p>
<p>Governance, oversight, transparency and accountability</p>			

<p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2</li> </ul>	<p>District Council sitting on 30th/August 2018: under BDLG/DLC/Min 8. 2018/2019. Approval of adjusted work plan for education sector based on the new planning guidelines issued by MoFPED to condition the grants in education.</p> <p>Council sitting of 29th/05/2018: under BDLG/DLCmin.No0305FY2017/18 Presentation and discussion of standing committee recommendations; Irundu –Muulu road be given the first priority in the first quarter of the FY 2018/19</p> <p>Under the same minute, Council adopted recommendations from the committee on social services which included; Expired school bodies be identified and new members appointed by relevant authorities before close of FY 2017/18</p> <p>Under BDLG/DLC Min No. 0405, 2017/18 FY, Council approved the Budget 2018/19 (worth 20,915,547,112).</p> <p>Council sitting of 28th/9/2017, BDLG/DLC Min. No. 05.09.2017/18. Presentation and discussion of standing committee recommendation from Finance, Planning, Administration and Works;</p> <ul style="list-style-type: none"> <li>- Monitoring of government projects to be done jointly by all leaders in quarter 2</li> <li>- Technical staff to make comprehensive report on performance of local revenue on forest products</li> <li>- Elevation of HCII to HCIII of NGandho, Kagulu, Kakooge, Bukungu, and Iringa</li> <li>- Water harvesting tanks to be procured to cater for water harvesting at health facilities</li> </ul>	<p>2</p>
<p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 1.</li> </ul>	<p>Buyende District CAO has appointed a staff Mr Batuli Yafesi, the communications Officer- Buyende DLC to coordinate response to feedback (grievance/complaints) from citizens and responded to feedback and complaints.</p> <p>A letter dated Feb 5th, 2018; Signed by the CAO Mr Opolot Francis was available.</p>	<p>1</p>

<p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• The LG has specified a system for recording, investigating and responding to grievances, which should be displayed at LG offices and made publically available: score 1</li> </ul>	<p>LG has specified a system for recording, investigating and responding to grievances, register/ file kept by the feedback manager. received and analysed are channeled to responsible departments or offices for response. some issues made public through community engagement meetings. when the communications officer/ Feedback manager is cleared by CAO and Chairperson LCV, some issues are responded to on radio talk shows every week conducted by Communications officer</p>	<p>1</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<p>Evidence that the LG has published:</p> <ul style="list-style-type: none"> <li>• The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2</li> </ul>	<p>Buyende District LG has published information on noticeboard ie, LG staff payroll (Aug.2018), invoice register-pensioner payment schedule (August (2018)).</p>	<p>2</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the procurement plan and awarded contracts and amounts are published: score 1.</li> </ul>	<p>The procurement plan, awarded contracts and amounts, Best evaluated bidders, prequalification list and framework contract 2018/2019 are well displayed on public noticeboards</p>	<p>1</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG performance assessment results and implications are published e.g. on the budget website for the previous year (from budget requirements): score 1.</li> </ul>	<p>Buyende DLG performance assessment results and implications for FY 2016/17 are published to the citizens (not to the budget website). The district Council sat on 30th/8/2018 and CAO presented the LGPA 2016/17 results under council minute BDLG/DLC/Min. 07.08.2018/2019. Buyende DLG got 47% overall score. Council resolved that the LG should make early preparations for the next LGPA 2017/2018.</p>	<p>1</p>

<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1</li> </ul>	<p>There was evidence that the district has communicated and explained guidelines, circulars and policies issued by the national level to LLGs eg Budget call circular FY 2018/19 was circulated to Senior Assistant Secretaries (SAS) by the planer on March 21st, 2018 TPC meeting and through emails.</p> <p>Under BDLG/DTPC/March 2018; Dissemination of Guidelines and IPF for FY 18/19</p> <p>This included:</p> <ul style="list-style-type: none"> <li>- Key policy issues regarding budgeting FY 2018/19</li> <li>- Indicative planning figures (Departments and LLGs)</li> </ul> <p>DDEG guidelines were also disseminated in a TPC meeting and by email, also on noticeboards (how the grant should be spent, eligibility and ineligible areas, percentage allocation</p> <p>Also attendance list under page 1 of TPC meeting was available</p>	<p>1</p>
<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that LG during the previous FY conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc.) with the public to provide feed-back on status of activity implementation: score 1.</li> </ul>	<p>The LG in the previous FY conducted discussions with citizens. The LG has is in contact with citizens through the media. Annual schedule of radio talk shows was available with the Communications Officer (the LG has 2 hours contact per week) on two different Radio Stations. – KBS FM and SSebo FM</p>	<p>1</p>
<p>Social and environmental safeguards</p>			

<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG gender focal person and CDO have provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities score 2.</li> </ul>	<p>Gender focal person (GFP) &amp; DCDO provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities. For example,</p> <p>In a letter dated 21st Feb 2018, the DCDO Disseminated Guidelines on gender mainstreaming and budgeting to all HoDs/Sector heads (i.e Finance, HR, Planning, Health Natural Resources, Education, Water, Works, Health, PDU, and administration, etc)</p> <p>Report on training of community and Sub County leaders on the National Strategy to end teenage pregnancies and early marriages.</p> <p>Third quarter CBD department implementation report FY 2017/18 dated 16th April 2018 on GBV coordination committee meetings, Technical staff made workplans for implementation of GBV prevention measures.</p> <p>Water Sector has a CDO attached to it to mainstream gender in waster sector activities. Involved in sensitization, orientation of water user committees a mong other activities in the water sector.</p> <p>Second quarter CBS department activity implementation report dated 15th Feb 2018. For example, Sub County Technical Planning Committees (STPC) meetings were held at Sub county level. They discussed GBV, child neglect, and land issues.</p>
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<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the gender focal point and CDO have planned for minimum 2 activities for current FY to strengthen women's roles and address vulnerability and social inclusions and that more than 90 % of previous year's budget for gender activities/ vulnerability/ social inclusion has been implement-ted: score 2.</li> </ul>	<p>The gender focal point and CDO planned 2 activities for current FY 2018/19 to strengthen women's roles and address vulnerability and social inclusion. Activities included</p> <ul style="list-style-type: none"> <li>• Under the Gender Mainstreaming output, CBS planned to hold meetings for the Technical and political staff as indicated on page 160 of the approved Annual Workplan FY 2018/19 on estimated at UGX 523,000.</li> <li>• Under the Children &amp; Youths Services output, CBS planned to handle child abuse cases, settle 135 cases for children, and celebrate the Day of the African Child indicated on page 161 of the approved Annual Workplan FY 2018/19.</li> <li>• Under the Community Services output, CBS planned to hold departmental review meetings estimated at UGX 500,000 as indicated on page 158 of the approved Annual Workplan FY 2018/19.</li> <li>• Sensitization of S/C and Community leaders on the New Policy on early marriages and teenage pregnancies for 180 people estimated at UGX 2 million.</li> </ul> <p>However, out of the total expenditure of UGX 165,558,243 less the wage bill of UGX 93,612,675 in FY 2017/18 for CBS, only UGX 71,945,568, was spent on gender activities/vulnerability/social inclusion (43.5%) which was less than 90%.</p>
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<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 1</li> </ul>	<p>Records on files from a sample of 5 projects below showed that the all projects were screened by the SEO and Health Inspector using ESSF forms signed on 18th September 2017 by the Senior Environment Officer (SEO).</p> <p>Subsequently, Environment and social management plans (ESMPs) were developed between 12th-18th September 2017 per project indicating project phase, negative environment and social impacts, mitigation measures, implementation agency, frequency of monitoring, cost, and capacity building needs but not budgeted for by user departments.</p> <p>i. Construction of a 3 Classroom Block at Nakabira COPE P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00001).</p> <p>ii. Construction of a 3 Classroom Block at Namugongo P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00003).</p> <p>iii. Construction of a 5-stance lined VIP latrine at Butaswa P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00015) at UGX 17,758,410.</p> <p>iv. Boreholes drilling, Pump testing, Casting and Installation of 6 boreholes under RWSCG in FY 2017/18 Lot 1 (Proc Ref No: BUYE 583/WRKS/2017-18/00004) at UGX 136,453,200.</p> <p>v. Lot 2 (Proc Ref No: BUYE 583/WRKS/2017-18/00005) at UGX 159,195,400.</p> <p>vi. Lot 3 (Proc Ref No: BUYE 583/WRKS/2017-18/00006) at UGX 159,195,400.</p>	<p>0</p>
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<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1</li> </ul>	<p>Buyende District LG did not integrate environmental and social management and health and safety plans in the contract bid documents. For example, the sampled bid documents/BoQs for all infrastructure projects listed below in the water sector, education sector, works and production did not have environmental, social, health and safety issues and mitigation measures incorporated and budgeted for.</p> <p>Construction of a 3 Classroom Block at Nakabira COPE P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00001).</p> <p>Construction of a 3 Classroom Block at Namugongo P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00003).</p> <p>Construction of a 5-stance lined VIP latrine at Butaswa P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00015) at UGX 17,758,410.</p> <p>Boreholes drilling, Pump testing, Casting and Installation of 6 boreholes under RWSCG in FY 2017/18 Lot 1 (Proc Ref No: BUYE 583/WRKS/2017-18/00004) at UGX 136,453,200.</p> <p>Lot 2 (Proc Ref No: BUYE 583/WRKS/2017-18/00005) at UGX 159,195,400.</p> <p>Lot 3 (Proc Ref No: BUYE 583/WRKS/2017-18/00006) at UGX 159,195,400.</p>	<p>0</p>
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<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1</li> </ul>	<p>Buyende District LG did not integrate environmental and social management and health and safety plans in the contract bid documents. For example, the sampled bid documents/BoQs for all infrastructure projects listed below in the water sector, education sector, works and production did not have environmental issues and mitigation measures incorporated and budgeted for.</p> <p>Construction of a 3 Classroom Block at Nakabira COPE P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00001).</p> <p>Construction of a 3 Classroom Block at Namugongo P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00003).</p> <p>Construction of a 5-stance lined VIP latrine at Butaswa P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00015) at UGX 17,758,410.</p> <p>Boreholes drilling, Pump testing, Casting and Installation of 6 boreholes under RWSCG in FY 2017/18 Lot 1 (Proc Ref No: BUYE 583/WRKS/2017-18/00004) at UGX 136,453,200.</p> <p>Lot 2 (Proc Ref No: BUYE 583/WRKS/2017-18/00005) at UGX 159,195,400.</p> <p>Lot 3 (Proc Ref No: BUYE 583/WRKS/2017-18/00006) at UGX 159,195,400.</p>	<p>1</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1</li> </ul>	<p>Not all completed projects had Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO in the previous FY 2017/18. It has not been a practice to involve CDO and SEO in certification of completed projects in Buyende District LG.</p>	<p>0</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the contract payment certificated includes prior environmental and social clearance (new one): Score 1</li> </ul>	<p>There was no evidence on file that the contract payment certificate included prior environmental and social clearance. For example, Payment vouchers/certificates for the following 5 sampled projects did not have prior environmental and social clearance by the SEO at interim or completion stage.</p> <p>Construction of a 3 Classroom Block at Nakabira COPE P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00001).</p> <p>Construction of a 3 Classroom Block at Namugongo P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00003).</p> <p>Construction of a 5-stance lined VIP latrine at Butaswa P/S (Proc Ref No: BUYE 583/WRKS/2017-18/00015) at UGX 17,758,410.</p> <p>Boreholes drilling, Pump testing, Casting and Installation of 6 boreholes under RWSCG in FY 2017/18 Lot 1 (Proc Ref No: BUYE 583/WRKS/2017-18/00004) at UGX 136,453,200.</p> <p>Lot 2 (Proc Ref No: BUYE 583/WRKS/2017-18/00005) at UGX 159,195,400.</p> <p>Lot 3 (Proc Ref No: BUYE 583/WRKS/2017-18/00006) at UGX 159,195,400.</p>	<p>0</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that environmental officer and CDO monthly report, includes a) completed checklists, b) deviations observed with pictures, c) corrective actions taken. Score: 1</li> </ul>	<p>The Environmental Officer and CDO did not get involved in monitoring and certification of completed infrastructure projects to determine if the Environment, Social, Health and Safety mitigation measures that were proposed in the Bid documents/BoQs were fully, partially or not adhered to by the contractors. Hence there was no monthly report that includes; a) completed checklists, b) deviations observed with pictures, c) corrective actions taken.</p>	<p>0</p>

583 Buyende District Education Performance Measures 2018

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4</li> </ul>	<p>Local Government budgeted for the Head Teachers and minimum of 8 teachers and above per school. As of current FY 2017/2018, Buyende Local Government had a total of 1,055 teachers all on payroll as of 6th/09/2018 indicated in the PBS system.</p>	4
<p>The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school (or minimum of a teacher per class for schools with less than P.7) for the current FY: score 4</li> </ul>	<p>Local Government deployed Head Teachers a minimum of 8 teachers and above for the current FY 2018/19. This was observed in the 5 sampled schools which included:</p> <ul style="list-style-type: none"> <li>Buyende P/S</li> <li>Baganzi P/S</li> <li>Wesunire P/S</li> <li>Buseeta P/S</li> <li>Bugaya P/S</li> </ul> <p>That had Head teachers, Deputy Head teachers and Assistants Education Officers fully deployed</p>	4

<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has filled the structure for primary teachers with a wage bill provision <ul style="list-style-type: none"> <li>o If 100%: score 6</li> <li>o If 80 - 99%: score 3</li> <li>o If below 80%: score 0</li> </ul> </li> </ul>	<p>Local Government filled the structure for primary teachers with a wage bill provision. However according to the current FY approved teachers were 1,343, as the required teachers per wage bill provision was 1,058 and positions filled were 1,055.</p>	<p>6</p>
<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6</li> </ul>	<p>Local Government substantively filled all positions of school inspectors as per staff structure. Education department has 2 DIS that include: Matega Charles date of appointment 7th /06/2016 under District Service Commission (DSC) minute number BYD/DSC/76/2016 , Gwolaba Aaron date of appointment 16th /5/2012 under DSC minute number BYD/DSC/34/2012 signed by the CAO.</p>	<p>6</p>
<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> <li>• Primary Teachers: score 2</li> </ul>	<p>Local Government Education didn't submit a recruitment plan to the District Service Commission to fill the vacant posts for Head Teachers and teachers. Positions of primary Head teachers and teachers in schools were already substantially filled during the previous FY 2017/2018. However observed a gap of 16 Head teachers, 43 Deputy head teachers and 324 Education Assistants as indicated previous FY 2017/2018.</p>	<p>2</p>

<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> <li>• School Inspectors: score 2</li> </ul>	<p>Local Government Education didn't submit a recruitment plan to the District Service Commission to fill the vacant posts for school Inspectors. Positions of school Inspectors were already substantially filled during the previous FY 2017/2018. However observed a gap of 16 Head teachers, 43 Deputy head teachers and 324 Education Assistants as indicated previous FY 2017/2018.</p>	<p>2</p>
<p>Monitoring and Inspection</p>			
<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> <li>• 100% school inspectors: score 3</li> </ul>	<ul style="list-style-type: none"> <li>• There are only 3 School Inspectors namely Gwolaba Aaron was appraised by DEO on 2nd July 2018 Mateke Charles was appraised by DEO on 30th June 2018 Waiswa Dhauke was appraised by DEO on 14th July 2018</li> </ul> <p>All of them were appraised.</p>	<p>3</p>

<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> <li>• Primary school head teachers o 90 - 100%: score 3</li> <li>o 70% and 89%: score 2</li> <li>o Below 70%: score 0</li> </ul>	<p>Evidence from the school's lists show that there are 91 primary schools each with a Head teacher.</p> <p>Records from the office of the DEO show the performance agreements and reports of 82 Head Teachers were fully signed showing appraisal.this gives approximately 82 percent</p> <p>Examples are</p> <p>Kyewonda Wilson</p> <p>HT Kidera Primary School</p> <p>Musubare Charles</p> <p>HT Buyanja Primary School</p> <p>The head teachers for secondary schools were all new in the schools and their performance agreements were not available because of the new appointments, the CAO had had a meeting with them to prepare performance agreement but by the time of assessment they were not available.</p>	2
<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1</li> </ul>	<p>LG Education department communicated and explained circulars issued by the national level in the FY 2017/18. For example, in the 5 sampled schools, it was observed that these documents were on file or displayed/ received by the Head teachers ie.</p> <ul style="list-style-type: none"> <li>• Circulars on feeding programs in Education Institutions issued by MoES on 22nd/06/2017</li> <li>• Early grade reading Issued by MoES on 6th/02/2017.</li> <li>• Circulars on immunization against cancer of the cervix issued by MoES on 9th/04/2018.</li> <li>• Tracking daily attendance issued by MoES 30th/ 06/ 2017</li> </ul>	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"> <li>• Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level: score 2</li> </ul>	<p>LG Education department didn't hold meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level FY 2017/18. Chief Administrator and the DEO only commented on the circulars and each head teacher picked a copy after head teachers meeting at the District.</p>	<p>0</p>
<p>The LG Education Department has effectively inspected all registered primary schools</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> <li>o 100% - score 12</li> <li>o 90 to 99% - score 10</li> <li>o 80 to 89% - score 8</li> <li>o 70 to 79% - score 6</li> <li>o 60 to 69% - score 3</li> <li>o 50 to 59 % score 1</li> <li>o Below 50% score 0.</li> </ul> </li> </ul>	<p>Out of the total 91 registered and licensed schools in Buyende DLG, a total of 95 schools (19%) were inspected in term 1 and term 2.</p> <p>LG Education department 1st term only 15 schools were visited out of 91 schools. 2nd term only 80 schools were visited. As of the 5 sampled schools that include: Buyende P/S, Baganzi P/S, Wesunire P/S, Buseete P/S, and Bugaya P/S confirmed school inspection by DIS on the following dates (15th /08/2017), (10th /11/2017), (31st /07 /2017), in previous FY 2017/18.</p>	<p>0</p>

<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4</li> </ul>	<p>LG Education department discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations. For example,</p> <p>On 12th /6/2018 the Education department held a meeting for disseminating inspection report for term I, 2018. During the meeting DIS cited 95% of the teachers had approved schemes of work aligned to National curriculum and used for teaching. As the 5 sampled schools ie Wesunire P/S, Buseete P/S it was observed that the Education department provided recommendations from the inspection reports and followed up.</p>	<p>4</p>
<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2</li> </ul>	<p>LG Education department submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports. Report was received on 18th /05/2018 was delivered by Kalulu Joseph Moses and received by Kironde Winnie</p>	<p>2</p>

<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the inspection recommendations are followed- up: score 4.</li> </ul>	<p>School inspection recommendations are followed up as the 5 sampled schools. It was indicated in the school summary report</p>	<p>4</p>
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> <li>o List of schools which are consistent with both EMIS reports and PBS: score 5</li> </ul> </li> </ul>	<p>There was no evidence on file that the education department submitted accurate /consistent data (i.e List of schools which are consistent with both EMIS reports and PBS) in current FY 2018/19. This was because the MoES expected to use NIRA however NIRA never completed school registration.</p>	<p>0</p>
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<p>Evidence that the LG has submitted accurate/consistent data:</p> <ul style="list-style-type: none"> <li>• Enrolment data for all schools which is consistent with EMIS report and PBS: score 5</li> </ul>	<p>There was no evidence on file that the education department submitted accurate /consistent data (i.e enrollments which are consistent with both EMIS reports and PBS) in current FY 2018/19. This was because expected to use NIRA however NIRA never completed school registration.</p>	<p>0</p>
<p>Governance, oversight, transparency and accountability</p>			

<p>The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc. during the previous FY: score 2</li> </ul>	<p>Council committee sitting on 15/3/2018 under BDLG/SSC/min. no 05.03/2017/18; presentation and discussion of departmental work plans: Budget desk to find money for co-curricular activities; cutting tree in the road reserves to make furniture for schools</p> <p>Committee meeting on 11/4/2018 under BDLG/SSC/mn.no 04.112017/2018 presentation of Boards and Commissions report</p> <p>Compliance gaps in regard to capitation grant to schools were observed by LGPAC was discussed.</p> <p>Council Committee meeting on 8/9/2017; BDLG/SSC/Min.No. 06 DEO presented to the committee departmental reports.</p> <ul style="list-style-type: none"> <li>• St. Marys Namusita to be considered for USE program</li> <li>• Codding and register of all schools and present to council</li> <li>• Regularising teachers in the service of Buyende district</li> <li>• Capitation grants; strengthening inspection of schools and projects teachers houses and provision o school f furniture</li> </ul>	<p>2</p>
<p>The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the education sector committee has presented issues that require approval to Council: score 2</li> </ul>	<p>There was evidence that sectoral committee on education presented to council issues for approval.</p> <p>Council committee sitting on 23rd/July 2018: under BDLG/SSC/Min.No. 06. 2018/2019. recommended to Council approval of adjusted work plan for education sector based on the new planning guidelines issued by MoFPED to condition the grants in education.</p>	<p>2</p>

<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO/ MEO)</p> <ul style="list-style-type: none"> <li>• 100% schools: score 5</li> <li>• 80 to 99% schools: score 3</li> <li>• Below 80 % schools: score 0</li> </ul>	<p>Not all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO and MEO), since there was no evidence on file that all schools had functional SMCs. According to the reports submitted in the DEOs office for the previous financial year 2017/2018. According to the DEO and the reviewed SMCs files submitted to the Education Department only membership and appointment letters were submitted as the minutes of their meeting remained in schools. The DEO said minutes for their meetings remain at the schools reason that they would be bulky for them yet there is little space in the DEOs office.</p>	<p>0</p>
<p>The LG has publicised all schools receiving non- wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has publicised all schools receiving non-wage recurrent grants</li> </ul> <p>e.g. through posting on public notice boards: score 3</p>	<p>All schools receiving non-wage recurrent grants were publicized through posting on public notice boards. For example, on 6th/06/2018 the LG Education department publicized all the 91 primary schools receiving non-wage recurrent grants through posting on public notice board for Q1, Q 2, and Q4(Term 2) at DEOs office outside noticeboard. More so all the 5 sampled primary schools posted their non-wage recurrent grants in the head teacher's office for previous FY 2017/2018.</p>	<p>3</p>
<p>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

Maximum 4 for this performance measure

- 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

All investment items in the approved sector annual work plan and budget were submitted on time by 30th April 2017 in the previous FY 2017/18.

Procurement inputs were submitted April, 30th, 2017. For example, Bataswa P/S submitted a requisition for the construction of a 3 block with office and store and installation of lightening conductor with a budget of UGX 79,500,000 and Kibaale construction of 5 stance VIP latrine block with a requisition of UGX 18,000,000 to PDU on 30th April 2017 to the Procurement Unit.

Financial management and reporting

<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3.</li> </ul>	<p>The Education department certified and recommended suppliers for payment on time as evidenced in the sample of 5 taken.</p> <p>Barike Investments Contract No. BUYE 583/WRKS/2017-18/00002 (Contract Amount-Shs 77,939,702) for construction of 3-classroom block, office, store and installation of lightening conductor of Butaswa Primary School. A requisition for an amount of Shs 35,072,503 was made on 17 November 2017 and it was certified/recommended by DEO on 21 November 2017.</p> <p>MM Developments Limited Contract No. BUYE 583/WRKS/2017-18/00001 (33,419,112) for construction of 3-classroom block with office, store and installation of lightening conductor at Nakabira Cope Primary School. A requisition for payment of Shs 33,419,112 was made on 12 March 2018 and certified/recommended by the DEO on 26 March 2018.</p> <p>Talya General Contractors Limited Contract No. BUYE 583/WRKS/2017-18/00013 (shs. 17,250,000) for construction of 5 stances line pit latrine at Kabbaale Primary School. A requisition for payment of shs 14,735,593 was made on 10 Feb 2018 and recommended/certified (01) by DEO on 21 Feb 2018.</p> <p>Sseka Group of Companies Contract No. BUYE/583/WRKS/2017-18/0005 for construction of 5-stances VIP lined pit latrine at Butaswa Primary School. A requisition for payment of Shs 15,169,896 was made on 10 January 2018 and it was certified (No. 01) by DEO on 19 January 2018.</p> <p>Sseka Group of Companies Contract No. BUYE/583/WRKS/2017-18/0005 (Shs 17,876,410) for construction of 5 stances lined pit latrine at Kakooge Primary School. A requisition for payment Shs 15,270,696 was made on 10 January 2018 and it was certified (No.01) by the DEO on 11 January 2018.</p> <p>NOTE: All sampled suppliers had contracts that did not entail a clause on payment terms/periods therefore, the certification period used in this case was 2 months after completion/requisition.</p>
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<p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by 15th of July for consolidation: score 4</li> </ul>	<p>The department submitted the annual performance report for the previous FY of all quarter in time</p> <p>The department submitted the annual performance report for the previous FY of all quarter.</p> <p>Q1 report submitted on 12/10/2017</p> <p>Q2 report submitted on 9th/01/2018</p> <p>Q3 report submitted on 12/04/2018</p> <p>Q4 report submitted on 11/07/2018</p>	<p>4</p>
<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</li> <li>o If sector has no audit query</li> <li>score 4</li> <li>o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2</li> <li>o If all queries are not responded to score 0</li> </ul>	<p>The sector provided status of implementation of internal audit findings for only the first 2 quarters of 2017/2018.</p> <p>Quarter 1 status of implementation of internal audit findings was dated 12 December 2017 Ref: EDUC/114/1 addressed to the Head of Internal Audit and signed by DEO.</p> <p>Quarter 2 audit findings dated 27 March 2018 was submitted to Internal Audit but addressed to the CAO. Ref: EDUC/213/1 and signed by DEO. 4 queries were responded to.</p> <p>Quarter 3 and 4 were not submitted because the reports had not been delivered to them by Internal Audit.</p>	<p>0</p>
<p>Social and environmental safeguards</p>			



<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills, etc.: Score 2</li> </ul>	<p>LG Education department in consultation with the gender focal person has not disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills. DEO said guidelines were not received at all since the MOES didn't provide them in the previous FY 2017/2018.</p>	<p>0</p>
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2</li> </ul>	<p>LG Education department in collaboration with gender department didn't issue and explain guidelines on how to manage sanitation for girls and PWDs in primary schools. According to the DEO MoES didn't provide them guidelines.</p>	<p>0</p>
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the School Management Committee meets the guideline on gender composition: score 1</li> </ul>	<p>Not all the 5 sampled schools met the guidelines on gender composition i.e a third of SMC members must be female minimum. For example in Bugaya P/S school, the SMC had a total of 10 members of which only 3 were females, Buseeta P/S had a total of 12 members only 2 were females, Wesunire had a total of 11 and only 3 were females, Baganzi P/S had a total of 12 members only 3 were females and Buyende P/S had a total of 12 of which only 1 was female.</p>	<p>0</p>

<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 1:</li> </ul>	<p>LG Education department in collaboration with Environment department didn't issue guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education. Also there was no evidence on file to support this</p>	<p>0</p>
<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all school infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: Score 1</li> </ul>	<p>Not all school infrastructure projects were screened before approval for construction using the checklist for screening of projects (ESSF) by the Senior Environmental Officer in FY 2017/2018.</p>	<p>0</p>
<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 1</li> </ul>	<p>The Environmental Officer and CDO did not visit the sites for all school infrastructure projects to check whether the mitigation plans were complied with for the previous FY 2017/2018.</p>	<p>0</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>LG has substantively recruited primary health care workers with a wage bill provision from PHC wage</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY</p> <ul style="list-style-type: none"> <li>• More than 80% filled: score 8</li> <li>• 60 – 80% - score 4</li> <li>• Less than 60% filled: score 0</li> </ul>	<p>The performance contract for the DHO was seen signed and stamped by the CAO on the 13/08/2018. The PHC recurrent grants allocation to lower level health facilities 2018/19 for Buyende district was seen on the DHOs noticeboard signed by the DHO on 4/07/2018. The PBF for IPFs generated from the PBS system was seen. It was generated on the 8/08/2018. The wage IPFs submission letter was submitted on the 9th July 2018.</p> <p>The HMIS Form 103B for approved staff recommended per level was seen. A communication from the DHO to the Head Human resources regarding Health Department staff list was submitted 29th June 2018. It has 137 staff out of 198 approved norms giving a 69.2 percentage point.</p> <p>An effort had been put to recruit 3 staff members to mitigate staff need in the district and if the recruitment plan is implemented the percentage would be 83 percent. A submission letter of files for contract staff absorption and staff confirmation was seen dated 10th /04/2018</p>	8
<p>The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of primary health care workers: score 6</p>	<p>The recruitment plan was available dated 28th/02/2018 as well as a recruitment plan submitted to HRM on 11th /04/2018 for PHC workers signed by the DHO. This was received at the registry. The performance contract for the DHO was available.</p>	6

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

Maximum 8 points for this performance measure

Evidence that the all health facilities in-charges have been appraised during the previous FY:

- o 100%: score 8
- o 70 – 99%: score 4
- o Below 70%: score 0

- Evidence from personnel files and appraisal reports show that all health facility in charges have been appraised. There are 10 health facilities, 1 health center IV, 4 are health center III, and 5 are health center II. Evidence of appraisal with signatures and dates of the appraisers are on files and have been passed by the CAO with signature and stamp and dates

- They are;

Kyesubire Margret

Senior Assistant Nurse Buyende HC III

Namuwenga Hamida

Clinical Officer Bugaya HC III

Kwiri Anthony

Senior Clinical Officer Kidera HC IV

Achoda Daniel

Nursing Officer Kakooge HC III

Ntumba Charles

Medical Clinical Officer Nkondo HC III

Waiswa Kossamu

Medical Clinical Officer Ilundu HC III

Wandira Ivan

Enrolled Nurse Iringa HC II

Bakaaki Samuel

Enrolled Nurse Buyende HC II Kagulu

Nangobi Mary

Enrolled Midwife Ngandho HC II

Kasubo Sarah

Enrolled Nurse Bukungu HC II

The appraisals were signed and passed by DHO and CAO between 20th July 2018 and 30th July 2018

<p>The Local Government Health department has deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG Health department has deployed health workers in line with the lists submitted with the budget for the current FY, and if not provided justification for deviations: score 4</li> </ul>	<p>The staff list indicating stations where staff members are deployed was seen. It was updated on 29th /06 / 2018 and stamped on 30th /06/2018 by the DHO. The total wage budget as at 09th July 2018 was UGX 1,754,379 submitted on 9th /07/2018</p>	<p>4</p>
<p>Monitoring and Supervision</p>			
<p>The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DHO/ MHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3</li> </ul>	<p>Evidence of communication of circulars and policies from the Ministry of Health by the DHOs office to different in-charges were seen and they include:</p> <ul style="list-style-type: none"> <li>A dissemination of service standards and service delivery standards for health sector July, 2016 edition was received by 15 health in-charges with signatures of confirmation.</li> <li>A dissemination of IDSR guidelines for frontline health workers 2018, edition was received by 12 health in-charges with signatures of confirmation.</li> <li>Many others were delivered by partners through the DHOs office</li> </ul>	<p>3</p>
<p>The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DHO/ MHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3</li> </ul>	<p>Guidelines were usually disseminated during performance review meetings and integrated support supervision visits to facilities. The minutes of performance review meetings seen included:</p> <ul style="list-style-type: none"> <li>The annual health performance review meeting 2017/18 held on 22/08/2018 and report signed.</li> <li>Guidelines on service standards dated 8th/07/2018</li> <li>The technical support supervision to health facilities report held on 8/01/2018 signed by the senior medical clinical officer.</li> <li>Evidence of presentation during performance review meetings talking about performance indicators in relation to recommended guidelines dated 9th/05/2018</li> </ul>	<p>3</p>

- Evidence of notification about intended support supervision dated 7th /05/2018 signed by the DHO.

In Kidela HCIV communications and correspondences from the DHO were available and they included:

Submission of quarterly accountabilities and notices on 13/03/2018, Guidelines on service standards dated 8th /07/2017, dissemination on guidelines for implementation of 3 star approach for water sanitation and hygiene dated 18th /06/2018, guidelines on HUMC dated 17th /08/2017, annual Health sector performance review meeting 2017/18 among other correspondences.

The DHT minutes were seen and they included:

- DHT meeting held on 5th/01/ 2018 and 10 participants attended signed on the same date. Discussed was quarter II reports and accountabilities.
- DHT meeting held on 9th /02/2018 and signed on the same date and issues discussed included human resources issues and staff attendance.
- DHT meeting held on 9th /08/2017 signed on the same date and among discussed were training gaps for health workers on neglected tropical diseases
- DHT meeting held on 14th /09/2017 and signed same date and among discussed issues was MOH communication on adherence to annual procurement plans for essential medicines and supplies.
- DHT meeting held on 5th/10/2017 and signed same date and among issues discussed was human resources deployment plan.

Communications and correspondences from the DHOs offices that were found at Buyende Health center III included:

- Annual health sector performance review meeting dated 15th/08/2018.
- Persistent absenteeism of a staff members dated 9th May 2018 and 9th /04/2018
- Request for procurement of 100 seater tent dated 30th /05 /2018
- Transfer instructions dated 16th /10/2017
- Mandatory internal audit for 2nd quarter 2017/18 dated 4th 01/2018
- Introduction of the new TB pediatric formulations dated 30/08/2017
- Commemoration of the world breastfeeding week

		<p>dated 3/08/2017</p> <p>In Bugaya HCIII evidence of guidelines and circulars communicated included; the guidelines on health unit management committees dated 17/08/2018; Guidelines on service standards dated 8/7/2018 and annual health sector performance review meeting dated 15th/08/2018.</p>	
<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT/MHT has supervised 100% of HC IVs and district hospitals (including PNFPs receiving PHC grant) at least once in a quarter: score 3</p>	<p>Supervision reports were seen and they included:</p> <ul style="list-style-type: none"> <li>• Quarter IV 2017/18 integrated support supervision to lower level health facilities dated 4th /05/2018 and acknowledged by CAO on 28th /05/2018 and stamped.</li> <li>• The technical support supervision to health facilities report held on 8/01/2018 signed by the senior medical clinical officer.</li> <li>• Quarter I 2017/18 integrated support supervision to lower level health facilities dated 29th /09/2017 and acknowledged by CAO on the same date and attachment of supervision checklist.</li> <li>• Quarter III 2017/18 integrated support supervision to lower level health facilities dated 20th /04/2018 and acknowledged by CAO on the same date and attachment of supervision checklist.</li> </ul> <p>The DHT minutes were seen and they included:</p> <ul style="list-style-type: none"> <li>• DHT meeting held on 5th/01/ 2018 and 10 participants attended signed on the same date. Discussed was quarter II reports and accountabilities.</li> <li>• DHT meeting held on 9th /02/2018 and signed on the same date and issues discussed included human resources issues and staff attendance.</li> <li>• DHT meeting held on 9th /08/2017 signed on the same date and among discussed were training gaps for health workers on neglected tropical diseases</li> <li>• DHT meeting held on 14th /09/2017 and signed same date and among discussed issues was MOH communication on adherence to annual procurement plans for essential medicines and supplies.</li> <li>• DHT meeting held on 5th/10/2017 and signed same date and among issues discussed was human resources deployment plan.</li> </ul> <p>Quarterly progressive reports from health facilities to the DHOs as evidence of facility records were seen and some of them included:</p>	<p>3</p>

- Nkondo health center III report dated 29th /04/2018
- Kagulu health center II report dated 10th /05/2018
- Kakooge health center II report dated 5th /01/2018

At Wesunile health center III the Biostatistician on November 8th 2017 held DIT visit and EPI and in charge advised re organize the duty schedule and update and plot the EPI monitoring chart. Another support visit at Wesunile HCIII was held on 13th 12. 2017 by the team from DHOs office and recommended on routine monitoring of vaccines in the small fridge. On 16th 01. 2018, DHOs office visited Wesunile HCIII for active search surveillance for epidemic prone diseases and recommended to defrost fridge and monitor vaccine quality using temperature chart. Other follow up visits seen included those that took place on 19th/01/2018, 29th /01/2018, 8th/05/2018, and 14th /06/2018.

In Kidela HCIV , evidence of Support supervision from DHO was available and the dates of supervision included; 11th /08/2017 for laboratory mentorship ;9th /11/2017 for data improvement and EPI forum; 30th /03/2018 for EPI mentorship; 13/04/2018 follow up quality improvement projects; 12/06/2018 for ICCM supervision.



<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT/MHT has ensured that HSD has supervised lower level health facilities within the previous FY:</p> <ul style="list-style-type: none"> <li>• If 100% supervised: score 3</li> <li>• 80 - 99% of the health facilities: score 2</li> <li>• 60% - 79% of the health facilities: score 1</li> <li>• Less than 60% of the health facilities: score 0</li> </ul>	<p>HSD supervision reports to lower level health units for all the four quarters were seen and they included:</p> <ul style="list-style-type: none"> <li>• Quarter I report dated 29th /09/2017</li> <li>• Quarter II report dated 5th /01/2018</li> <li>• Quarter III report dated 20th /04/2018</li> <li>• Quarter IV report dated 15th /07/2018</li> </ul> <p>At Wesunile health center III the Biostatistician on November 8th 2017 held DIT visit and EPI and in charge advised re organize the duty schedule and update and plot the EPI monitoring chart. Another support visit at Wesunilie HCIII was held on 13th 12. 2017 by the team from DHOs office and recommended on routine monitoring of vaccines in the small fridge. On 16th 01. 2018, DHOs office visited Wesunile HCIII for active search surveillance for epidemic prone diseases and recommended to defrost fridge and monitor vaccine quality using temperature chart. Other follow up visits seen included those that took place on 19th/01/2018, 29th /01/2018, 8th/05/2018, and 14th /06/2018.</p> <p>At Nkondo Health Center III the evidence of supervision from the DHO include the following: 13th/06/2018 that discussed cold chain EPI supervision, 30th/04/2018 delivery of medicines for neglected tropical diseases and routine PHC monitoring, 12th/04/2018 for PHC monitoring , 23rd /03/ 2018 for TB supervision, 20th/03/EPI mentorships, 9th /02/2018 for surveillance , 13th /12/2018 for support supervision among others.</p> <p>In Bugaya HCIII support visits from the DHO were done on 14th / 06/2018; 4/12/2017.</p>
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The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up

Maximum 10 points for this performance measure

- Evidence that all the 4 quarterly reports have been discussed and used to make recommendations (in each quarter) for corrective actions during the previous FY: score 4

The support supervision reports and DHT meetings as well as performance review meetings that are duly conducted were seen and read. The critical issues included in the reports were staff deployment, absenteeism and attendance to duty, quality of care among others.

The evidence of the outcomes of the reports for corrective action included:

- A posting instruction dated 8th/01/2018 for Mr. Musasizi Charles to DHO's office
- A transfer instruction dated 2nd /05/2018 for Mr. Ntende Ambrose and other 6 staff members.
- Rewards and sanctions resolution and letter communicated to CAO dated 15th /06/2018
- Rewards and sanctions resolution with other recommendations and letter communicated to CAO dated 15th /06/2018
- Warning letter on gross misconduct and abseetism for Mr. kakooza Trevor a laboratory technician
- Recommendations on fridge defrosting were implemented
- The EPI monitoring was plotted as a result of supervision recommendation and this has been seen at the noticeboards

<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the recommendations are followed</li> <li>– up and specific activities undertaken for correction: score 6</li> </ul>	<p>Communications were made and corrective actions taken in form of apologies and other decisions. Some of the evidence seen included:</p> <ul style="list-style-type: none"> <li>• Emphasis letter on the arrival and out of station books dated 4th /06/2018 quoting the OPM monitoring unit communication</li> <li>• Apology letter receipt from Mr. Byansi Moses , nursing officer Kidela Health center IV to the DHO in relation to absenteeism dated 28th /06/2018</li> <li>• Acknowledgement of the letter staff members apologies dated 28th/06/2018 and indicates corrective actions that DHO instructed staff to adhere to</li> <li>• A medical evaluation of staff member whose competence was falling short of standards on medical standards Ms. Nakyeyune Petwa, medical records assistant dated 18th/06/2018.</li> <li>• A letter submitting health workers for sanctions including withholding salary due to absenteeism by DHO to CAO was seen dated 2nd /07/2018</li> </ul>	<p>6</p>
<p>The LG Health department has submitted accurate/consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> <li>o List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10</li> </ul> </li> </ul>	<p>The performance contract for the DHO was availed as well the appraisal reports for the staff under the DHO's office and the communication regarding PHC recurrent grants allocation to lower health facilities to Buyende district signed by DHO on 4th July 2018.</p> <p>A summary of HMIS reporting to ministry of health from July2017 to June 2018 were seen. They were 12 reports for the financial year. The PBS summary was as well seen with a total wage bill 1,754,397.</p> <p>The two systems are not yet been linked to the best of the knowledge of the DHO.</p> <p>The list of all health facilities seen was consistent throughout the year. The reporting rates and summary generated from DHISII data base for ministry of health also showed consistence.</p> <p>Files including HMIS reports in hard copies from all health facilities were all seen. They were consistent with list of facilities</p>	<p>10</p>
<p>Governance, oversight, transparency and accountability</p>			

<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2</li> </ul>	<p>Council sitting on 27th/03/2018 BDLG/DLC/Min.04.03.2017/18</p> <ul style="list-style-type: none"> <li>Presentation and discussion of standing committee recommendation – Social Services committee</li> <li>Council adopted a recommendation by the committee; A nursing training school to be constructed in Bugaya sub county</li> <li>Increasing supervision of HCs by the DHOs and Council</li> </ul>	<p>2</p>
<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the health sector committee has presented issues that require approval to Council: score 2</li> </ul>	<p>Sectoral Committee sitting on 17/05/2018 under BDLC/SSC/Min.No 04.17/5/18. “Discussed a report by the DHO where he reported: accommodation needs and the committee decided to recommend to Council to approve construction of HC IIIs and staff houses at Irundu and Bukungu.</p> <p>Under the same minute , the Committee also recommended purchase of an Ambulance to ease movement of emergency cases and drugs distribution to HCs</p> <p>Committee recommended sensitisation of all sub counties about the test of hepatitis B infection.</p> <p>Committee sitting on 11/04/2018 under BDLG/SSC/Mim.no 02 committee to compel DHO to bring progress reports on projects and programs under health as recommended by LG PAC</p> <p>Council sitting on 27th/03/2018 BDLG/DLC/Min.04.03.2017/18</p> <ul style="list-style-type: none"> <li>Presentation and discussion of standing committee recommendation – Social Services committee</li> <li>Council adopted a recommendation by the committee; A nursing training school to be constructed in Bugaya sub county</li> <li>Increasing supervision of HCs by the DHOs and Council</li> <li>Elevation of HCII to HCIIIs of Ngandho, Kagulu,Kakooge, Bukungu and Iringa</li> </ul>	<p>2</p>
<p>The Health Unit Management</p>	<p>Evidence that health facilities and</p>	<p>A letter for inducting of HUMCs committees addressed to the sub-county LCIII chairpersons was</p>	<p>6</p>

<p>Committees and Hospital Board are operational/functioning</p> <p>Maximum 6 points</p>	<p>Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> <li>• If 100% of randomly sampled facilities: score 6</li> <li>• If 80-99 %: score 4</li> <li>• If 70-79: %: score 2</li> <li>• If less than 70%: score 0</li> </ul>	<p>dated 31/10/2016.</p> <p>A report of induction of the new HUMCs was validated 20th /01/2017.</p> <p>Guidelines for HUMCs structure and composition were seen and they are dated 29th /07/2016 and acknowledged by the CAO on 2nd /08/2016.</p> <p>Copies of appointment letters for HUMCs members for Kidela Health center IV were seen and signed by district Chairperson on 01/12/2016</p> <p>Minutes of HUMCs seen for Kidela Health Center IV and Buyende HCII seen included:</p> <ul style="list-style-type: none"> <li>• HUMC meeting minutes for Kidela Health Center IV 4th /07/2018</li> <li>• HUMC meeting minutes for Kidela Health Center IV 13/04/2018</li> <li>• HUMC meeting minutes for Kidela Health Center IV 26/01/2018</li> <li>• HUMC meeting minutes for Kidela Health Center IV 7/12/2017</li> <li>• HUMC meeting minutes for Buyende Health Center III 7/07/2017</li> <li>• HUMC meeting minutes for Kidela Health Center III 12/10/2017</li> <li>• HUMC meeting minutes for Kidela Health Center III 14/04/2018</li> </ul> <p>The HUMC meeting minutes obtained at the Buyende HCIII for all the 4 quarters were found and they included:</p> <ul style="list-style-type: none"> <li>• HUMC meeting minutes for Buyende Health Center III 14/04/2018</li> <li>• HUMC meeting minutes for Buyende Health Center III 22nd /12/2017</li> <li>• HUMC meeting minutes for Buyende Health Center III 12/10/2017</li> <li>• HUMC meeting minutes for Kidela Health Center III 07/07/2017</li> <li>• HUMC meeting minutes for Kidela Health Center III 26th /07/2018</li> </ul> <p>At Wesunile Health center III there was evidence of HUMC meeting minutes the dates for meetings with all signed minutes were :</p> <ul style="list-style-type: none"> <li>• HUMC meeting minutes for 27/04/2018</li> </ul>
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<p>The LG has publicised all health facilities receiving PHC non-wage recurrent grants</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has publicised all health facilities receiving PHC non- wage recurrent grants e.g. through posting on public notice boards: score 4</li> </ul>	<p>The noticeboards of health department and district headquarters have publicized the allocations to the individual health facilities getting PHC funds and the respective amounts.</p> <p>In Buyende Health Center III at the noticeboard allocations of PHC funds and the respective amounts as well as accountabilities.</p> <p>In Wesunile, the PHC non-wage recurrent grants were pinned on the noticeboards including their accountabilities.</p> <p>In Nkondo Health center III, PHC releases for all the quarters in the financial year were available on the noticeboards and in the office of the in-charge.</p> <p>In Kidela HCIV the PHC grants releases and accountabilities are displayed on the noticeboard.</p> <p>In Bugaya HCIV, PHC grants were publicized on the noticeboard including the staff lists and accountabilities of quarterly releases</p>	<p>4</p>
<p>Procurement and contract management</p>			

<p>The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the sector has submitted input to procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2</li> </ul>	<p>The health department submitted LGPP Form 1 submitted to PDU including the procurement needs for the health department for 2018/19 on the 28th may 2018 but it was withdrawn due to changes in IPFs for capital development by ministry of finance. This led to another submission dated 10th July 2018.</p>	<p>0</p>
<p>The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2.</li> </ul>	<p>LGPP Form 1 submitted to PDU including the procurement needs for the health department for 2018/19 was seen. This was submitted on 10th 07. 2018, reference number BUYE583/SRUS/18/19/00022. The total amount was UGX 30,000,000 for renovation of medical stores</p>	<p>2</p>

<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4.</li> </ul>	<p>Based on a sample of 2, all the suppliers' requisitions were approved by the DHO in less than 2 months.</p> <p>Payment requisition for Total (U) Ltd Kamuli was made on 02 March 2018 for the supply of Fuel for Health sector for an amount of 1,020,000. This was approved/recommended by the DHO on 02 March 2018.</p> <p>Payment requisition for Total Uganda for the supply of Fuel worth 1,500,000 was made on 09/05/2018 and it was approved/recommended by the DHO on 29 May 2018.</p> <p>Note: Health sector did not have Capital Development (major suppliers with contracts) but rather only fuel expenses for the FY 2017/2018.</p>	<p>4</p>
<p>Financial management and reporting</p>			
<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4</li> </ul>	<p>The department submitted the annual performance report for the previous FY of all quarter.</p> <p>Q1 report submitted on 10/10/2017</p> <p>Q2 report submitted on 8th/01/2018</p> <p>Q3 report submitted on 9th/04/2018</p> <p>Q4 report submitted on 9th /07/2018</p>	<p>4</p>



<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</p> <ul style="list-style-type: none"> <li>• If sector has no audit query: Score 4</li> <li>• If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: Score 2 points</li> <li>• If all queries are not responded to Score 0</li> </ul>	<p>The Health sector provided information on status of implementation of internal audit findings for only 2 quarters;</p> <p>Quarter one dated 16 October 2017 Ref: MED/213/1 addressed to the District Internal Auditor and signed by the DHO.</p> <p>Quarter 2 status of implementation dated 19 February 2018 Ref: MED/213/1 addressed to District Internal Auditor signed by the DHO.</p> <p>Quarter 3 and 4 were not addressed because the Internal Audit department had not availed the reports to the DHO.</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"> <li>• Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines (i.e. minimum 30 % women: score 2</li> </ul>	<p>A list of HUMC members for Buyende HCIII was seen and there are 3 out of 7 members are females</p> <p>A list of HUMC members for Kidela HCIV was seen and there are 3 out of 9 members are females</p> <p>A list of HUMC members for Nkondo HCIII was seen and there are 4 out of 7 members are female</p> <p>A list of HUMC members for Wesunile HCIII (PNFP) was seen and there are 4 females out of 7 Members</p> <p>A list of HUMC members for Bugaya HCIII was seen and there are 4 females out of 7 members</p> <p>Guidelines for HUMC guidelines are available at the DHOs office and health centers and they are way and above the gender requirements prescribed in the manual.</p>	<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"> <li>Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2.</li> </ul>	<p>A list of HUMC members for Buyende HCIII was seen and there are 3 out of 7 members are females</p> <p>A list of HUMC members for Kidela HCIV was seen and there are 3 out of 9 members are females</p> <p>A list of HUMC members for Nkondo HCIII was seen and there are 4 out of 7 members are female</p> <p>A list of HUMC members for Wesunile HCIII (PNFP) was seen and there are 4 females out of 7 Members</p> <p>A list of HUMC members for Bugaya HCIII was seen and there are 4 females out of 7 members</p> <p>Guidelines for HUMC guidelines are available at the DHOs office and health centers and they are way and above the gender requirements prescribed in the manual.</p>	<p>2</p>
<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all health facility infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: Score 2</li> </ul>	<p>Guidelines and communication guiding environmental management to health facilities were available and they included:</p> <ul style="list-style-type: none"> <li>Dissemination of guidelines for implementing the 3 star approach for water sanitation and hygiene , letter dated 18th /06/2018</li> <li>Letter written to the CAO requesting for adequate sanitary facilities at the administration was dated 8th/06/2018</li> <li>A letter to the sub-county chiefs, health unit in-charges and head teachers on implementation of national sanitation week activities was dated 10th /03/2018</li> </ul> <p>At Wesunile Health Center III, communications from the DHOs office were dated 8/07/2018 on guidelines on service standards, 15/08/2018 on annual health sector performance review, 13th /03/2018 on submission of quarterly accountabilities and mandatory notices, 10/06/2018 on dissemination of guidelines for implementing the 3 star approach for water sanitation and hygiene in schools, 10th march 2018 on conducting the international sanitation week activities in the district, 15th/12.2017 on guidance on management of medicines and health supplies at health facilities.</p> <p>In Nkondo Health Center III, communication from DHOs on guidelines that were available include: Dissemination of guidelines for implementing the 3star approach for water sanitation and hygiene in schools dated 18th /06/2018, conducting the</p>	<p>2</p>

international sanitation week activities in the district dated 10th /03 /2018.

In Kidela HCIV communication the charts on waste segregation wastes were available.

In Bugaya Health Center III, communication on conducting sanitation week was received on 10th/03/2018, guidance on management of medicines and health supplies at the health facility was received on 15/12/2017 and dissemination of guidelines for implementing the 3 star approach was received on 18/06/2018.

The application for approval of building plans was seen and was dated 2/04/2017 and the environmental health officer participated in assessment.

A presentation on Guidelines for town and country planning with environmental health concerns presented by the senior health environmental health officer was available.

An inspection report and accountability for school health inspection dated 2nd January 2018 was available.

A support supervision report for WASH activities dated 4/07/2018 was available.

An health inspection report for Blessed family primary school for licensing dated 13/02/2018 was available

An health inspection report for kagulu senior secondary school for licensing dated 26/11/2017 was available

An health inspection report for lake kioga schools for licensing dated 13/02/2018 was available

The mitigations actions in reports included:

- Ownership and sanitation promotion at water sources
- Continued follow ups
- Community led total sanitation for open free defecation(ODF)

Local government management and service delivery program environmental and social management plan signed by the environmental health officer on 18/09/2017 was seen.

Evidence of visits from the DHOs office to Buyende

LG Health department has ensured that guidelines on environmental management are disseminated and

- The environmental officer and community development officer have visited the

<p>complied with</p> <p>Maximum 4 points for this performance measure</p>	<p>sites to checked whether the mitigation plans are complied with: Score 2</p>	<p>HCIII was seen in the joint support supervision visits dated 12th /03 /2018 which recommended strengthening IDSR and routine immunization activities, 19th /03 /2018 which recommended that all health workers to always screen women of child bearing for TT, 13th /06 2018 which recommended that the DPT 3 monitoring chart is updated and placed in open space. This was found updated and on the noticeboard.</p> <p>A presentation on medical waste management to health facilities in-charges was available at the health facility.</p> <p>From Buyende Health center III, a health waste segregation management procedure as part standard operating procedures was seen on the noticeboard in the injection room.</p> <p>An organized file that includes all standard operating procedures including waste management was seen at the health center.</p> <p>A quality improvement manual was available for health facilities were available at the DHOs office.</p> <p>A wealth segregation chart was found at the health center III visited.</p> <p>Waste collection form by green labels was available at the DHOs office</p> <p>At wesunile health center III a file with waste segregation chart, instrument processing, high level disinfection sterilizing instruments, waste disposal and de-contamination, decontamination and preparation of chlorine solutions, use of gloves was seen.</p> <p>A waste segregation guideline chart was available in the maternity, laboratory and out- patient wards.</p> <p>At Kidela HCIV construction was going on and environmental social action guidelines protocol were available at the office of the in-charge.</p> <p>At Bugaya Health Center III, there is a health flow waste management chart on OPD and the lab.</p> <p>There are also national guidelines for planning for waste generated from SMC procedures from the National guideline book on Managing health care waste generated from safe male circumcision procedures.</p> <p>There green label disposal are operating in the Bugaya health center III, evidence of the Health facility waste transfer record book for Buyende district was seen at Bugaya health center III. Form No. 14201 was filled indicating the different waste</p>
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		materials disposed.	
<p>The LG Health department has issued guidelines on medical waste management</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has issued guidelines on medical waste management, including guidelines (e.g. sanitation charts, posters, etc.) for construction of facilities for medical waste disposal:</li> </ul> <p>score 4.</p>	<p>Local government management and service delivery program environmental and social management plan signed by the environmental health officer on 18/09/2017 was seen.</p> <p>Evidence of visits from the DHOs office to Buyende HCIII was seen in the joint support supervision visits dated 12th /03 /2018 which recommended strengthening IDSR and routine immunization activities, 19th /03 /2018 which recommended that all health workers to always screen women of child bearing for TT, 13th /06 2018 which recommended that the DPT 3 monitoring chart is updated and placed in open space. This was found updated and on the noticeboard.</p> <p>A presentation on medical waste management to health facilities in-charges was available at the health facility.</p> <p>From Buyende Health center III, a health waste segregation management procedure as part standard operating procedures was seen on the noticeboard in the injection room.</p> <p>An organized file that includes all standard operating procedures including waste management was seen at the health center.</p> <p>A quality improvement manual was available for health facilities were available at the DHOs office.</p> <p>A wealth segregation chart was found at the health center III visited.</p> <p>Waste collection form by green labels was available at the DHOs office</p> <p>At wesunile health center III a file with waste segregation chart, instrument processing, high level disinfection sterilizing instruments, waste disposal and de-contamination, decontamination and preparation of chlorine solutions, use of gloves was seen.</p> <p>A waste segregation guideline chart was available in the maternity, laboratory and out- patient wards.</p> <p>At Kidela HCIV construction was going on and environmental social action guidelines protocol were available at the office of the in-charge.</p> <p>At Bugaya Health Center III, there is a health flow waste management chart on OPD and the lab.</p> <p>There are also national guidelines for planning for</p>	4

waste generated from SMC procedures from the National guideline book on Managing health care waste generated from safe male circumcision procedures.

There green label disposal are operating in the Bugaya health center III, evidence of the Health facility waste transfer record book for Buyende district was seen at Bugaya health center III. Form No. 14201 was filled indicating the different waste materials disposed.

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the district Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY:               <ul style="list-style-type: none"> <li>o If 100 % of the budget allocation for the current FY is allocated to S/Cs below average coverage: score 10</li> <li>o If 80-99%: Score 7</li> <li>o If 60-79: Score 4</li> <li>o If below 60 %: Score 0</li> </ul> </li> </ul>	<p>According to the updated District safe water coverage, Buyende district was at 39% as of 30th August. The district had 6 Lower Local Governments. The sub-counties of Buyende and Nkondo had coverage of 29% and 31% respectively. In the FY 2018/19 water projects planned included drilling of 15 boreholes at a cost of 359,318,758/=, rehabilitation of 5 old boreholes at a cost of 37,500,000/=, supply of boreholes spare parts at a cost of 59,746,907/= and construction of a 5-stance VIP latrine in Kitukiro RGC at a cost of 18,200,000/=. It should however be noted that all the mentioned investment projects in the sector were never reflected in the District Approved Annual Work plan detailing the distribution of these water investment projects.</p>	0

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)

Maximum 15 points for this performance measure

- 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

Review of the Annual Progress report of 2017/18 clearly indicated that the District water department targeted sub-counties below district average whilst implementing water projects. The district had 4 major projects that included construction of 17 deep boreholes (budgeted) where 12 boreholes were successful at a cost of 407,227,926/=. Sub-counties below district average like Buyende and Nkondo had boreholes drilled (3 and 1 respectively). The district had a project of rehabilitation of 6 water sources at a cost of 30,000,000/= and among the rehabilitated water sources was a borehole in Nambale village, Nakabira Parish Buyende sub-county which was below district safe water coverage.

Monitoring and Supervision



<p>The district Water department carries out monthly monitoring of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the district Water department has monitored each of WSS facilities at least annually.</p> <ul style="list-style-type: none"> <li>• If more than 95% of the WSS facilities monitored: score 15</li> <li>• 80% - 95% of the WSS facilities - monitored: score 10</li> <li>• 70 - 79%: score 7</li> <li>• 60% - 69% monitored: score 5</li> <li>• 50% - 59%: score 3</li> <li>• Less than 50% of WSS facilities monitored: score 0</li> </ul>	<p>From the reviewed monitoring report files, out of the four implemented projects in FY 2017/18 only one project was duly monitored an inspection report documented, signed and addressed to Chief Administrative officer (CAO). Report dated 4th/12/2017; an inspection report on borehole drilling (divided into 3lots using admeasurement type of contracting). The report detailed status of the 17 boreholes planed for drilling where by 12 were successful and 5 had low water yield. CAO received it on 11th/12/2017.</p> <p>The district did not score on this indicator because the monitoring of water projects was below minimum requirement. Level of monitoring was at only 25%.</p>	<p>0</p>
<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the district has submitted accurate/consistent data for the current FY: Score 5</li> <li>• List of water facility which are consistent in both sector MIS reports and PBS: score 5</li> </ul>	<p>Buyende district water department submitted consistent/accurate data for FY 2018/19. In the MIS report at MoWE it was clearly reported that the district planned for 17 deep boreholes and 12 were successful representing 71%. This is the exact information that was reviewed in the Program Budgeting System (PBS) at the district and Performance Agreement signed by the DWO/Ag. District Engineer and the CAO</p>	<p>5</p>

<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>List of water facility which are consistent in both sector MIS reports and PBS: score 5</li> </ul>	<p>The list of water facilities which were consistent both in sector MIS reports and PBS included;</p> <p>Construction of 3boreholes in:</p> <p>Kaguru 3, Buyaga 3, Buyende 3, Nkondo 2, Kidera 3, Buyende TC 1 and;</p> <p>Rehabilitation of 15 boreholes in:</p> <p>Kaguru 3, Buyaga 3, Buyende 3, Nkondo 2, Kidera 2, Buyende TC 2</p>	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>	<p>Buyende District Water Department submitted procurement inputs for District procurement plan covering all investment items in the approved sector annual work plan and budget late. The department submitted on 8th/June/2018 using the Procurement &amp; Disposal Unit- User Department work plan sheet FY 2018/19. This was beyond the mandated 30th/April.</p>	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"> <li>If the contract manager prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2</li> </ul>	<p>Well as the contract manager was appointed by the CAO following Regulation 119 of the LG(PPDA) Regulations 2006 on 10th/11/2017 for the contract of drilling Boreholes Lot 1,2 &amp;3, construction of a 5- stance VIP latrine at Budipa landing site &amp; rehabilitation of 15boreholes; the appointed contract manager did not prepare a contract Management plan nor conducted site visits (at least no reports) for the different WSS infrastructure projects in FY 2017/18</p>	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"> <li>If water and sanitation facilities constructed as per design(s): score 2</li> </ul>	<p>Water and Sanitation facilities constructed in FY 2017/18 were constructed as per design specifications. For example, the 5-stance VIP latrine constructed in Budipa landing had the stipulated number of stances (5) had separate stances for both women and Men, bathing area, a ramp for PWDs, interior and exterior finishing and roofed with exact iron sheet gauge in the BOQs.</p> <p>Sampled boreholes in Bukonoka, Nakabembe (DWO 56385) Kiganza (DWO 56386) and Buwanga (DWO56378) were constructed as per design in BOQs</p>	<p>2</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If contractor handed over all completed WSS facilities: score 2</li> </ul>	<p>In FY 2017/18 the district contracted the services of Galaxy Agro Tech Uganda Ltd to execute drilling, test pumping, platform casting and installation of 6 boreholes under Lot 3 however, the contractor never handed over these projects as required. The same applied to other lots completed and WSS projects.</p>	<p>0</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2</li> </ul>	<p>By the time of assessment there was no record that the District Water Officer prepared completion certificates for the completed WSS projects in FY 2017/18. It should be noted that by the time of assessment most projects were past defects liability period but without completion certificates.</p>	<p>0</p>

<p>The district Water department has certified and initiated payment for works and supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	<p>The LG Water department did not certify and initiate payments for works on time as evidenced below;</p> <p>Out of a sample of 5 supplier payments picked at random 3 were certified on time and the other 2 were certified after 2 months of requisition or completion.</p> <p>Davis and Shirliff for Renovation of Inyingo mini piped water system Contract No. BUY/WRKS/17-18 0023 (Shs 16,401,410) dated 21 August 2017. Payment request of Shs 740,600 was made on 02 November 2017 and certified by DWO on 20 March 2018. (Certified 4 months after requisition).</p> <p>Mastak for supply of bore hole spare parts Contract No. BUYE 583/SUPL/2017-18/00001 (Shs 52,651,600) dated 21 June 2017, contract Amount 52,651,600. Payment request of Shs 49,974,400 was made on 11 September 2017 and it was certified on 21 September 2017.</p> <p>Galaxy for pump testing, casting and installation of 7 boreholes Lot 1 Contract No. BUYE 583/WRKS/17-18/00004 &amp; BUYE 583/WRKS/17-18/00005 dated 21 August 2017 (Shs 129,137,188). Payment request of shs 129,137,188 was made on 11 December 2017 and it was certified (No. 01) on 19 December 2017.</p> <p>Gets Technical services for borehole drilling and pump testing, Contract No. BUYE 583/SRVCS/17-18/00006 . Payment request of shs 6,544,280 was made on 07 December 2017 and it was certified (No. 01) on 08 May 2018.</p> <p>Galaxy for borehole drilling, pump testing, casting and installation of 6 boreholes Contract No. BUYE 583/WRKS/17-18/00006 (Shs 136,453,200). payment request of shs 79,824,340 was made on 15 January 2018 and it was certified (No. 01) on 27 March 2018.</p>	<p>0</p>
<p>Financial management and reporting</p>			

<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"> <li>Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5</li> </ul>	<p>Buyende District Local Government submitted Annual Performance report within the mandated period</p> <p>Quarter Four was submitted on 9th/July/2018</p> <p>Quarter Three was submitted on 9th/April 2018</p> <p>Quarter Two was submitted on 8th January 2018</p> <p>Quarter One was submitted on 10th October 2017</p>	<p>5</p>
<p>The District Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</li> <li>If sector has no audit query score 5</li> <li>If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3</li> <li>If queries are not responded to score 0</li> </ul>	<p>There was no evidence that sector provided information to the internal audit on the status of implementation of audit findings. This was confirmed by the DWO when he admitted that the responses and status reports have been verbal and not written as required.</p>	<p>0</p>
<p>Governance, oversight, transparency and accountability</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"> <li>Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3</li> </ul>	<p>The Finance Planning, Administration and Works (where water falls) sat on the 22nd/03/2018 at the District Headquarters under minute BDLG/FPAW/MIN.05.03.2017/18: Discussion and Presentation of work plans where Honourable secretary for finance was concerned about the drilled but abandoned boreholes and the incomplete boreholes in Irundu and Nabuku. The DWO notified the committee that in Nabuku the water quality was poor. The committee also resolved that Bupipa I be allocated a borehole to solve the water problem.</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"> <li>Evidence that the water sector committee has presented issues that require approval to Council: score 3</li> </ul>	<p>The District Council meeting held on 27th/03/2018 under minute BDLG/DLC/MIN.NO4.03.2017/18: Recommendations of standing committees; where under works &amp; water the committee recommended that Budepa 1 be allocated a borehole which council approved.</p> <p>Sectoral committee on water presented the following issues to council for approval</p> <p>Under min.04/DHI/06/18 committee recommended Council to approve launch of Home Improvement campaign ( emphasis on sanitation and hygiene)</p>	<p>3</p>
<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <li>The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2.</li> </ul>	<p>The AWP, budget and the Water Development grant releases and expenditures were displayed on the department notice board as per PPDA Act. In the software component file there was evidence that two advocacy meetings were conducted both at District and Sub-county levels. At the district level, advocacy meeting was held on 20th/09/2017 at the district headquarters and among issues discussed was water source distributions and allocation.</p> <p>At the sub-county level meeting was held on 24th/10/2017 (all stakeholders invited) and issues discussed included water source allocations &amp; distribution, community contributions and O&amp; M issues.</p>	<p>2</p>

<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <li>All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2</li> </ul>	<p>For the 5 sampled WSS projects including Buwanga (DWO 56378) in Bugaya sub-county, Kiganza (DWO56386) in Buyende sub-county, Bukonoka (DWO 56377) in Buyende Town Council and Nakabembe (DWO56385) in Buyende sub-county. All these WSS projects had project numbers, source of funding as District Water and Sanitation Conditional Grant, date of construction clearly indicated. However, all these facilities had no names of the contractor on the labels.</p>	<p>0</p>
<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2</li> </ul>	<p>Information on tenders and contract award (indicating contractor name, contract and contract sum was displayed on the LG Procurement notice board. For instance, displayed was information of award REF NO: BUYE/583/WRKS/2018-19/00018 to MS DEMA Construction &amp; Engineering Works Ltd for the Rehabilitation of 5boreholes under DWSCG. Contract sum was 36,757,000 UGX and procurement method was Open Domestic Bidding.</p> <p>REF NO: BUYE 583/WRKS/2018-19/00001 contract award to M/S ICON Projects Ltd for the construction of Deep boreholes, sitting drilling, pump testing, casting &amp; installation of 8 boreholes(Lot1). The contract sum was 176,008,8000UGX</p>	<p>2</p>
<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If communities apply for water/ public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1</li> </ul>	<p>From the community application file, there was proof that communities apply for water/public sanitation facilities as per the sector critical requirements. There was proof of community contribution for example, on 17th/07/2018 residents of Busobya village, Bulondo Parish, Bugaya sub-county paid One Hundred thousand shillings (100,000 UGX) to centenary Bank and got a District General Receipt Serial No: 683 as community contribution to obtain safe water in the area.</p>	<p>1</p>

<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Water and Sanitation Committees that are functioning evidenced by either: i) collection of O&amp;M funds, ii) carrying out preventive maintenance and minor repairs, iii) facility fenced/protected, or iv) they an M&amp;E plan for the previous FY: score 2</li> </ul> <p>Note: One of parameters above is sufficient for the score.</p>	<p>All the sampled water supply facilities had Water User Committees in place and functioning. This was evidenced by ability to carry out minor repairs and the state in which the facilities were found i.e. well fenced/protected.</p>	<p>2</p>
<p>Social and environmental safeguards</p>			
<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2</li> </ul>	<p>There was evidence that environmental screening (as per templates) for all the projects was conducted by the Environment and Natural Resources Officer. (ENR) for FY 2017/18. All the WSS projects had Environmental and Social Screening Forms (ESSF) filled following section 19 of the Natural Resources Act, Cap.153. For example, on file was an ESSF for the drilling of bore hole in Butaswa parish, Bugaya sub-county signed by Senior Environment Officer on 18th/09/2017</p> <p>An Environmental and Social Impact Report for the drilling of the borehole at Nakabembe village in Buyende sub-county signed by the District Environment Officer.</p>	<p>2</p>
<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1</li> </ul>	<p>There was evidence that follow up support was provided in case of unacceptable environmental concerns. There was a report dated 30th/06/2018 on project file on planting of trees at the newly constructed borehole sites to mitigate soil erosion and provide shade at 14 sites. The report was compiled by the Environment Officer addressed to Head of Department Natural Resources.</p>	<p>1</p>



<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that construction and supervision contracts have clause on environmental protection: score 1</li> </ul>	<p>In the construction and supervision contracts for implemented projects had no environmental clauses</p>	<p>0</p>
<p>The district Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If at least 50% WSCs are women and at least one occupying a key position (chairperson, secretary or Treasurer) as per the sector critical requirements: score 3</li> </ul>	<p>Among the sampled water sources, none had at least 50% women as per the sector critical requirements. For instance, Buwanga WUC had only 29%, Bukonoka WUC had 33%, WUC with 43%, Nakabembe WUC with 33% and Kiganza WUC had 33% by the time of the assessment.</p>	<p>0</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"> <li>If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3</li> </ul>	<p>Public sanitation facilities had adequate access and separate stances for men, women and People with Disabilities. For example, the VIP lined latrine at the district headquarters (office of the District Service Commission) and the newly constructed 5-stance VIP lined latrine at Bupipa landing site. With separate stances for both women and men and a ramp for PWDs.</p>	<p>3</p>