



## Local Government Performance Assessment

Kagadi District

(Vote Code: 613)

Assessment	Scores
Accountability Requirements	67%
Crosscutting Performance Measures	66%
Educational Performance Measures	54%
Health Performance Measures	16%
Water Performance Measures	55%

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>LG submitted APC on 1st August 2018 as per data at MOFPED and copy found at the District which was within the extended MOFPED deadline of 1st August 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>LG submitted the budget that includes the procurement plan for FY 2018/19 on 1st August 2018 as per data at MOFPED.</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>	<p>The LG submitted its annual performance report on 6th August 2018 as per PBS notification provided at the District nor was it verifiable as per data at MOFPED.</p>	<p>No</p>
<p>LG has submitted the quarterly budget performance report for all the four quarters of the previous FY by end of the FY; PFMA Act, 2015).</p>	<p>From MoFPED's official record/ inventory of LG submission of quarterly reports submitted to MoFPED, check the date MoFPED received the quarterly performance reports:</p> <ul style="list-style-type: none"> <li>• If LG submitted all four reports to MoFPED of the previous FY by July 31, then it is compliant (timely submission of each quarterly report, is not an accountability requirement, but by end of the FY, all quarterly reports should be available).</li> <li>• If LG submitted late or did not submit at all, then it is not compliant.</li> </ul>	<p>LG submitted the quarterly budget performance reports during FY 2017/2018 as hereunder:.</p> <p>Quarter Date of submission Reference</p> <p>Quarter 01 22/12/2017 As per MOFPED Data</p> <p>Quarter 02 13/02/2018 “</p> <p>Quarter 03 15/06/2018 “</p> <p>Quarter 04 06/08/2018 As per PBS generated notification at the District.</p>	<p>No</p>
<p>Audit</p>			
<p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General and the Auditor General's findings for the previous financial year by end of February (PFMA s. 11 2g). This statement includes actions against all find- ings where the Internal Audi- tor and the Auditor General recommended the Accounting Officer to take action in lines with applicable laws.</p>	<p>From MoFPED's Inventory/record of LG submissions of statements entitled “Actions to Address Internal Auditor General's findings”,</p> <p>Check:</p> <ul style="list-style-type: none"> <li>• If LG submitted a ‘Response’ (and provide details), then it is compliant</li> <li>• If LG did not submit a’</li> </ul>	<ul style="list-style-type: none"> <li>• The LG submitted the responses on the Internal Auditor General's report for the FY2016/17 on 28th March 2018. The responses were received on 20th April 2018 by MOFPED, Accountant General, IGG, MOLG and Auditor General.</li> <li>• Seven queries were raised and all were responded too and their</li> </ul>	<p>Yes</p>

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.

status clarified as detailed below:

1-Compliance to the local Government Regulations- Examiner Accounts has been assigned.

2-Delayed Accountability-Budget to fund the wage bill for more staff submitted.

3- Verification of supply deliveries and completed projects- Instituted pre Audit verification.

4-Monitoring Activities- Internal Audit has been incorporated in Monitoring Projects.

5- Compliance to the Local Government Legislation and general book keeping- Finance department now receipts all funds received.

6-Delayed Accountability – Regulations on advances are being implemented.

7-Human Resources- Rewards and sanctions committee met and cautioned the culprits.

- The LG submitted responses on the Auditor General's report for 2016/17 on 4th April 2018 which was received on 20th April 2018 by MOFPED, Auditor General and Parliamentary LGAC.

- The number of queries raised were three. They were all cleared , as detailed below:

- 1- Understaffing – Submitted to MOFPED pending approval.

- 2-Low recovery of Youth Livelihood and Uganda Women Empowerment programme Funds- recoveries on going

- 3-Salary overpayment-

		<p>Recovery started.</p> <ul style="list-style-type: none"> <li>• 4-Salary underpayments- This was resolved and the top ups computed and paid</li> </ul>	
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.</p>		<p>The report from the Auditor General for the FY 2017/18, Local Governments Unqualified Audit Opinion Schedule for Hoima Branch No.36, for December 2018.</p>	<p>Yes</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a district/ municipality has:</p> <ul style="list-style-type: none"> <li>• A functional Physical Planning Committee in place that considers new investments on time: score 1.</li> </ul>	<p>There was a physical planning committee but is not yet functional as evidenced by :</p> <ul style="list-style-type: none"> <li>i. A communication dated 13th September 2018 from the CAO appointing members to the Physical Planning Committee was provided.</li> <li>ii. No record (minutes) of the Committee considering new investments was provided since the committee is newly constituted.</li> <li>iii. Presence of a building plans registration book that is not populated since the Committee has not conducted any business.</li> </ul>	0
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that district/ MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD score 1.</li> </ul>	<p>The DLG did not submit minutes because the PPC was newly constituted.</p>	0

<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> <li>• All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0</li> </ul>	<p>There was no Physical Development Plan for the District hence consistency could not be verified.</p>	<p>0</p>
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> <li>• Action area plan prepared for the previous FY: score 1 or else 0</li> </ul>	<p>There was no Action area plan in place for the previous FY.</p>	<p>0</p>

<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.</li> </ul>	<p>Priorities in the AWP/Approved Budget Estimates for FY 2018/19 were based on the outcomes of the Budget Conference as found in the “ Minutes of the Budget Conference for FY 2018/19 held on 17th October 2017 as shown hereunder:</p> <ol style="list-style-type: none"> <li>1. Education:       <ol style="list-style-type: none"> <li>a. Construction of classroom block at Busungubwa COU PS was found in the approved budget estimates FY 2018/19(Page 41) and in the Budget Conference Minutes (Page 17)</li> </ol> </li> <li>2. Health :       <ol style="list-style-type: none"> <li>a. Upgrade of Kiryanga HC II to HC III is in the budget conference and not in the budget</li> </ol> </li> <li>3. Water:       <ol style="list-style-type: none"> <li>a. Construction of boreholes(Mugoijo,Bagaddadi,Yorodani,Kahanama,Kayanja,Kaimara) in the Budget conference at Page 17 and in the budget (Page 61)</li> </ol> </li> </ol>	
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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>Capital investments in the approved AWP for FY 2018/19 were derived from the 5year DDP(2015/2016-2019/2020) as shown hereunder:</p> <ol style="list-style-type: none"> <li>1. Education:       <ol style="list-style-type: none"> <li>a. Construction of multi-purpose science block at Kyaterekera SS as found in the AWP (Page 74) and DDP (Page 517).</li> </ol> </li> <li>2. Health:       <ol style="list-style-type: none"> <li>a. Upgrading of Kyabasara HCII to HC III as found in the AWP (Page 64) in the DDP project profiles (Page 510).</li> </ol> </li> <li>3. Water:       <ol style="list-style-type: none"> <li>a. Construction of a water supply system for Katerekera as found in the AWP (Page 90) and the DDP(Page 537).</li> </ol> </li> </ol>	
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<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2.</li> </ul>	<p>Project profiles for FY 2018/19 are developed and discussed by TPC at its meeting of DTPC held on 2nd May 2018 under Min. KDTPC 078/2017/2018: Presentation and discussion on project profiles 2018/2019 and Statistical abstract 2017/18.</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>Annual Statistical Abstract of 2018 dated July 2018 with gender disaggregated data was compiled and presented to the TPC at its meeting of DTPC held on 2nd May 2018 under Min. KDTPC 078/2017/2018: Presentation and discussion on project profiles 2018/2019 and Statistical abstract 2017/18</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>All Infrastructure projects implemented by the LG in the previous FY 2017/2018 were derived from the approved Annual Work Plan and Budget as show hereunder:</p> <p>Education:</p> <p>e.g. Construction of a 2 classroom block at Sese Primary school as found in the AWP (Page 1) and Q4 performance report (Page 65).</p> <p>Health :</p> <p>e.g. completion of OPD and maternity at Kyakabadiima HC II as found in the AWP (Page 3) and Q4 performance report (Page 59).</p> <p>Water:</p> <p>e.g. construction of Kyaterekera piped water supply system as found in the AWP (Page 6) and Q4 performance report (Page 80).</p>	2
<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>51 out of 73 investment projects were implemented during the year under review representing 69% performance as found in the AWP and Project completion report presented by the Planner for FY 2017/18.</p>	0
<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2</li> </ul>	<p>According to the APR (Pg.2) the domestic development approved budget was UGX. 3,565,974,000/= and the proportion of the budget spent was UGX. 3,274,197,000/= representing 92% performance in absorption.</p>	2

<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>Budget allocation for O&amp;M in FY 2017/2018 was UGX. 1,677,221,000/= and expended UGX. 1,476,990,000/= representing 88% as extracted from the APR.</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>	<p>Not all heads of department positions were filled substantively, Out of the 8 approved departments, the ones filled substantively are:-</p> <ol style="list-style-type: none"> <li>1- Deputy CAO- Baremezi Fredrick</li> <li>2- District Production and Marketing officer- Dr Amanyam Moses</li> <li>3- District Community Development officer- Ngondwe Ponsiano</li> <li>4- District Education officer- Bukenya Bathremew</li> <li>5- District Health officer- Dr Oluwo James</li> </ol> <p>The ones not filled substantively are:-</p> <ol style="list-style-type: none"> <li>1- Ag. Chief finance officer - Natugonza Vicent</li> <li>2- Ag. District Natural resources officer - Byona Gerald</li> <li>3- Ag. District Engineer - Bukenya Robert</li> </ol> <p>The % of HoDs positions filled substantively is 62.5%</p>	<p>0</p>

<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• All HoD's , had been appraised by CAO for the previous FY, as per the guidelines of MoPS (CIRCULAR STANDING INSTRUCTION NO1 OF 2016)by 30/8/2018</li> <li>• Namely :-</li> </ul> <ol style="list-style-type: none"> <li>1- Deputy CAO- Baremezi Fredrick</li> <li>2- District Production and Marketing officer- Dr Amanya Moses</li> <li>3- District Community Development officer- Ngondwe Ponsiano</li> <li>4- District Education officer- Bukenya Bathremew</li> <li>5- District Health officer- Dr Oluwo James</li> </ol> <p>The ones not filled substantively are:-</p> <ol style="list-style-type: none"> <li>1- Ag. Chief finance officer - Natugonza Vicent</li> <li>2- Ag. District Natural resources office r- Byona Gerald</li> <li>3- Ag. District Engineer - Bukenya Robert</li> </ol>	<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>• 100% of the vacancies submitted to DSC for recruitment during 2017-2018</li> <li>• had been considered.</li> <li>• Reference made to CAO's submission dated 18/12/2017, which was acknowledged by the DSC on 22/12/2017, advertised on Dec 29th 2017 in the New vision and considered in the DSC meeting on 16th , 23rd ,24th , and 31st may 201</li> </ul>	<p>2</p>

<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100 % of positions submitted for confirmation have been considered: score 1</li> </ul>	<ul style="list-style-type: none"> <li>• 100% of staff submitted for confirmation were considered by the DSC.</li> <li>• Reference made to submission KD/CR/161/1 of 6th and 10th whose consideration was on 16th,23rd,24th and 31st may 2018 by the DSC</li> </ul>	<p>1</p>
<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100 % of positions submitted for disciplinary actions have been considered: score 1</li> </ul>	<ul style="list-style-type: none"> <li>• There was no disciplinary case submitted to the DSC in the FY 2017-2018</li> </ul>	<p>1</p>

<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3</li> </ul>	<ul style="list-style-type: none"> <li>100% of the staff recruited in previous financial year had accessed the pay roll with in two month as evidenced in the IPPS, in relation to their appointment letters and posting instructions on personal files.</li> </ul> <p>As referenced below:-</p> <ul style="list-style-type: none"> <li>1- Ssebunya Herbert- Appointed and posted in May 2018 and accessed payroll 23/7/2018</li> <li>2 – Sunday Edward – Appointed and posted in May 2018 and accessed pay roll on 23/7/2018</li> <li>3 – Kusiimah Judah – Appointed and posted in May 2018 and accessed pay roll on 23/7/2018</li> <li>4 – Kusemererwa Peter – Appointed and posted in May2018 and accessed pay roll on 23/7/2018</li> <li>5 – Birungi Rose Mary – Appointed and posted in May 2018 and accessed pay roll on 23/7/2018</li> </ul>	<p>3</p>
<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2</li> </ul>	<p>Only 6 out 10 pensioners had accessed pensioner’s pay roll with in two month, according to the pensioner’s soft ware pay roll and pensioners register. (This is 60%)</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>	<ul style="list-style-type: none"> <li>• The OSR revenue for 2016/17 was UGX.416, 479,311 as shown in the Draft Financial statements prepared on 30th August 2018, Ref: KD/CR/10/1 and received by the Accountant General on 31st August 2018 and Office of Auditor General of Hoima Branch on 29th August 2018.</li> <li>• Ugx 416,479,311 was 100% for the whole District including the Sub Counties and Town Councils, so we adjust / remove the following: <ul style="list-style-type: none"> <li>• 65% remitted to LLG (153,890,600)</li> <li>• 50% Transfers to Counties (5,600,000)</li> <li>• Paid VAT on Market charges (31,562,390)</li> <li>• One off UNRA Compensation (59,953,896)</li> <li>• Total revenue Adjusted 2017 165,472,260</li> <li>•</li> </ul> </li> <li>• In the 2017/18 draft Final Accounts Page 7&amp;8 Statement of Financial Performance, and page 21 Note 2: Local Revenue. The Local revenue increased in FY 2017/18 to UGX. 203,316,859, this is an increase of Ugx 37,844,599 which translates to 18.7% increase. This is more than the required range of 10%.</li> </ul>	4
<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>	<ul style="list-style-type: none"> <li>• From the Draft financial statements 2017/18, page 12, 13 on the Statement of Appropriation Account and page 21 Note 2: Local Revenue, and page 29 on Statement of Revenues Collected during the year, the Original Budget for Local revenue was projected at Ugx 210,694,000 and the Actual local revenue collection realised was Ugx 203,316,859. This translates into a revenue collection ratio of 96.4% which is 4.6% short of target and within the range of +/- 10% range. The team in charge of revenue budgeting needs to maintain this good practice standard of budgeting realistically.</li> </ul>	2



<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• Sec 85 of LGA (2) “In rural areas, revenue shall be collected by the sub county councils, and a sub county council shall retain 65 percent, or any other higher percentage as the district council may approve, of the revenue collected by it and pass the remaining percentage over to the district”</li> <li>• (4) “A district council may, with the concurrence of a sub county, collect revenue on behalf of the sub county council but shall remit 65 percent of the revenue so collected to the relevant sub county.”</li> <li>• In this regard to (4) above the DLG collected Local Service tax from District staff Payrolls and Private companies in the District which amounted to Ugx 86,037,231 and a portion based on the number of residents each LLG (i.e. 49,366,625) was remitted to the LLGs as follows :</li> <li>• Burora Sub County 1,075,750</li> <li>• Bwikara Sub County 4,099,875</li> <li>• Kababamba Sub County 1,274,000</li> <li>• Kagadi Sub County 1,395,875</li> <li>• Kiryanga Sub County 1,433,250</li> <li>• Kyakabadima Sub County 1,291,875</li> <li>Kyanaisoke Sub County 4,262,375</li> <li>• Kyateekera Sub County 3,978,000</li> <li>• Kyenzige Sub County 2,556,125</li> <li>• Mabaale Sub County 1,238,250</li> <li>• Npeffu Sub County 3,316,625</li> <li>• Muhorro Sub County 1,483,625</li> <li>• Nadaiga Sub County 1,132,625</li> <li>• Paachwa 1,329,250</li> <li>• Rugashari 1,192,750</li> <li>• Ruteete Sub County 628,875</li> <li>• Muhooro Town Council 4,020,000</li> <li>• Mabaale Town Council 3,247,500</li> <li>• Kagadi Town Council 10,410,000</li> <li>• LG was compliant.</li> </ul>	
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<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 Draft financial statements of 2017/18 on page 21 (Note 2): Local revenue, collection for 2016/17 was Ugx 416,479,311 adjusted from 100% to 165,472,260. (20% of this is 33,094,452.)</p> <p>The Actual Expenditure on Statutory bodies, page 8 Statement of Financial Performance and page 12 Statement of Appropriation Account, of the Draft financial statements, and Trial Balance Expenses Account 211103, indicates that Ugx 570,743,077 was spent.</p> <p>However we deduct GOU grants: (Non-Wage, DSC &amp; Salary) 516,595,331</p> <p>Funds from Local Revenue 54,147,740</p> <p>Total Expenditure 570,743,077</p> <p>Thus Ugx 54,147,740/ 165,472,260=32.7% is over the allowable limit of 20%. The LG is spending above 20% and therefore not compliant. This is contrally to LGA, First Schedule, section 4 and 4A.</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>The District doesn't have the position of a Senior Procurement Officer instead there is a Procurement Officer recruited on 02/06/2017 under DSC Min. 36/2017.</p>	<p>0</p>
<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1</li> </ul>	<p>Reports of the Evaluation Committee were submitted to the Contracts Committee during FY 2017/2018 on the following dates, 05/12/2017,30/10/2017,5/12/2017</p>	<p>1</p>

<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <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>From the TEC and Contracts committee minutes, it was established that the Contracts Committee considered recommendations of the TEC for example;</p> <ol style="list-style-type: none"> <li>1. Completion of Maternity ward at Kyakabadiima was recommended and awarded to Karukan Enterprises ltd at a contract sum of 30,725,961/= under CC Min.KDLG/DCC/33/12/2017(47) during TEC and contracts committee meetings that sat on 22/11/2017 and 05/12/2017 respectively.</li> <li>2. Construction of OPD at Kabamba Phase I was recommended and awarded to Chamil International Ltd at a contract sum of 41,979,798/= under CC Min.KDLG/DCC/33/12/2017(45) during TEC and contracts committee meetings that sat on 22/11/2017 and 05/12/2017 respectively.</li> <li>3. Construction of 2 classroom block with office at Sese P/S was recommended and awarded to Miruda Enterprises ltd at a contract sum of 68,487,500/= under CC Min.KDLG/DCC/27/10/2017(1) during TEC and contracts committee meetings that sat on 16/10/2017 and 30/10/2017 respectively.</li> <li>4. Construction of a 5 stance Vip latrine at Lyanda SDA P/S. was recommended and awarded to Mbasa Investments U ltd at a contract sum of 8,893,750/= under CC Min.KDLG/DCC/33/12/2017(37) during TEC and contracts committee meetings that sat on 22/11/2017 and 05/12/2017 respectively.</li> <li>5. Rehabilitation and drilling of 6 boreholes was recommended and awarded to KLR Uganda Ltd at a contract sum of 110,001,960/= under CC Min.KDLG/DCC/27/10/2017(3) during TEC and contracts committee meetings that sat on 16/10/2017 and 30/10/2017 respectively.</li> </ol>
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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>a)The procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan for example;</p> <ol style="list-style-type: none"> <li>1. Construction of a classroom block at Busungubwa COU P/S appears on page 70 of AWP and page 14 of the procurement plan.</li> <li>2. Construction of 5 stance VIP latrine at Nyakabaale COU substituted with Katigengeyo COU P/S appears on page 71 of AWP and page 15 of the procurement plan.</li> <li>3. Completion of Muhorro TC III substituted with Kabamba HC III appears on page 1 of AWP and page 64 of the procurement plan.</li> <li>4. Drilling of 10 deep boreholes appears on page 60 &amp; 61 of budget and page 19 of the procurement plan.</li> <li>5. Construction of Kyaterekera piped water system phase II appears on page 90 of AWP and page 19 of the procurement plan.</li> </ol> <p>b) The LG made procurements in previous FY as per plan for example;</p> <ol style="list-style-type: none"> <li>1. Completion of Maternity ward appears in PDU plan under health department.</li> <li>2. Construction of OPD at Kabamba Phase I appears in PDU plan under health department</li> <li>3. Construction of 2 classroom block with office at Sese P/S appears in PDU plan under Education department</li> <li>4. Construction of a 5 stance Vip latrine at Lyanda SDA P/S. appears in PDU plan under Education department</li> <li>5. Rehabilitation and drilling of 6 boreholes appears in PDU plan under water sector.</li> </ol>	2
<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/ infrastructure by August 30: score 2</li> </ul>	<p>The LG had prepared 80% of the bid documents for all investment/infrastructure by August 30. For example invitation to bid was done on 30/08/2018 in New vision news paper for open bids and on 29/08/2018 for selective bids for the following projects;</p> <ol style="list-style-type: none"> <li>1. Construction of a classroom block at Busungubwa COU P/S</li> <li>2. Construction of Kyaterekera piped water system phase II</li> <li>3. Construction of 5 stance VIP latrine at Katigengeyo COU P/S</li> <li>4. Completion of Kabamba HC III</li> <li>5. Drilling of 10 deep boreholes</li> </ol>	2

<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2</li> </ul>	<p>Whereas the LG has an updated contract register, complete procurement activity file was only seen with Completion of Maternity ward where a completion certificate was issued by Engineer on 16/03/2018. The rest of the procurement files were incomplete with no completion certificates issued and filed.</p>	<p>0</p>
<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.</li> </ul>	<p>The LG adhered with procurement thresholds as evidenced below;</p> <ol style="list-style-type: none"> <li>1. Completion of Maternity ward - contract sum of 30,725,961/= - selective bidding.</li> <li>2. Construction of OPD at Kabamba Phase I - contract sum of 41,979,798/= - selective bidding</li> <li>3. Construction of 2 classroom block with office at Sese P/S - contract sum of 68,487,500/= - Open bidding.</li> <li>4. Rehabilitation and drilling of 6 boreholes - contract sum of 110,001,960/= - open bidding</li> <li>5. Construction of a 5 stance Vip latrine at Lyanda SDA P/S - contract sum of 8,893,750/= - selective bidding.</li> </ol>	<p>2</p>

<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates</li> </ul> <p>for all projects based on technical supervision: score 2</p>	<p>All works projects implemented in the previous FY were appropriately certified – interim certification for all projects was based on technical supervision. For example;</p> <ol style="list-style-type: none"> <li>1. Completion of Maternity ward – Engineer issued completion certificate on 16/03/2018</li> <li>2. Construction of OPD at Kabamba Phase I– Engineer certified on 20/02/2018</li> <li>3. Construction of 2 classroom block with office at Sese P/S– Engineer certified on 23/03/2018,25/04/2018 and 18/05/2018</li> <li>4. Rehabilitation and drilling of 6 boreholes– Engineer certified on 27/03/2018.</li> <li>5. Construction of a 5 stance Vip latrine at Lyanda SDA P/S– Engineer certified on 19/07/2018</li> </ol>	2
<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>At the time of assessment, There were no projects implementation activities commenced for the current FY.</p>	0
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>	<ul style="list-style-type: none"> <li>The DLG had prepared Bank reconciliations for June, July and August 2018 for all its Bank Accounts at the time of assessment.</li> <li>The LG has Eleven Bank Accounts and all had been reconciled up to date and they were fully authenticated.</li> </ul>	4

<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>	<ul style="list-style-type: none"> <li>• From the sample of payments made during the financial year, Education department worth Ugx 1,714,853,324, Health Department Ugx 323,408,658 and Water and Sanitation Department worth Ugx 221,102,519. These payments were made within one month of requisitions being raised. The LG was compliant in this area.</li> </ul>	2
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <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>	<ul style="list-style-type: none"> <li>• The DLG has a substantial Principal Internal Auditor. In the names of Bamwine Nathan who was appointed on 8th November 2017 under minute DSC Min.116/2017.</li> </ul>	1
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• LG has produced all quarterly internal audit reports for the previous FY: score 2.</li> </ul>	<p>The LG produced all Quarterly reports as follows :</p> <p>Quarter 1 on 30/10/2017</p> <p>Quarter 2 on 28/01/2018</p> <p>Quarter 3 on 27/04/2018</p> <p>Quarter 4 on 30/07/2018</p>	2

<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<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 LGPAC has considered three quarterly reports on the following dates:</p> <p>Quarter 1 PAC Sitting on 18/12/2017</p> <p>Quarter 2 PAC sitting on 19-20/9/2018</p> <p>Quarter 3 PAC Sitting on 19-20/9/2018</p> <p>Quarter 4, Not yet reviewed.</p> <p>There was no evidence of the any PAC Report(s) for all the Quarters, even for the first Quarter which sat 10 months ago, there was no evidence provided at the time of Assessment.</p>	<p>0</p>
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1.</li> </ul>	<p>The reports were submitted to the LG Accounting Officer and LGPAC on the following dates:</p> <p>Quarter 1 on 30/10/2017</p> <p>Quarter 2 on 28/01/2018</p> <p>Quarter 3 on 28/04/2018</p> <p>Quarter 4 on 30/07/2018</p> <p>The LGPAC has reviewed only three Quarters.</p> <p>But no single report was produced or availed to me at the time of assessment.</p> <p>Not reviewing Quarterly reports is making the role of PAC as an Accountability organ very irrelevant and incompetent.</p> <p>The LGPAC need to improve on its performance.</p>	<p>0</p>
<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG maintains an up- dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4</li> </ul>	<ul style="list-style-type: none"> <li>The DLG doesn't maintain an Asset register as per the format in the Accounting Manual. All the Assets acquired during the FY2017/18 were not posted in the Register at the time of assessment. All additions during the year (Page 36 of the Draft financial statements : Summary statement of stores and other assets (physical assets) as at end of the year) detailed below were not included : <ul style="list-style-type: none"> <li>Non Residential Buildings Ugx1,904,702,381</li> <li>Roads and Bridges Ugx 1,252,153,950, Motor Vehicles and Bicycles 15, 960,000 Furniture and fittings Ugx 12,000,000 and Classified Assets Ugx 903,748,131 all cumulatively totalling Ugx 4,088,564,462.</li> </ul> </li> <li>The LG was not compliant.</li> </ul>	<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>	<ul style="list-style-type: none"> <li>• The report from the Auditor General for the FY 2017/18, Local Governments Unqualified Audit Opinion Schedule for Hoima Branch No.36, for December 2018.</li> </ul>	<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>The LG meets and discusses service delivery related issues. At Council meeting held on 21st December 2017, it met and discussed service delivery issues e.g. under Min. KD/CL/21/12/2017/18: Motions from Government- Supplementary Budget for Agricultural Extension was considered. A supplementary budget of UGX. 373,037,272/= was approved.</p>	<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 feedback (grievance /complaints) and responded to feedback and complaints: score 1.</li> </ul>	<p>The LG had a designated person to coordinate response to feedback as evidenced by the letter from CAO appointing Mr. Katungwesi Kennedy/ Community Development Officer dated 10th July 2017.</p>	<p>1</p>

<p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>The LG has specified a system for recording, investigating and responding to grievances, which should be displayed at LG offices and made publically available: score 1</li> </ul>	<p>The LG had a specified system for recording and response as evidenced by the Grievances / Complaints Registration guide found published at the new administration block notice board.</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>The payroll for and the pensioner schedules August 2018 were found on the public notice board at the new administration block.</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>Procurement plan for 2018/19 and notice of award of contracts were not found published at the PDU notice board found outside the old administration block.</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>No evidence that the LG published the performance assessment results for FY 2016/17 was found published during the time of assessment.</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>The HLG communicated and explained national guidelines and circulars as found in the report from the District Planner to the CAO dated 8th June 2018. The training was conducted for sub-accountants from the 19 LLGs on itemised budgeting and reporting. The objectives of the training included:</p> <ol style="list-style-type: none"> <li>1. To orient LLGs staff in budget [reparation and reporting using the new system (PBS).</li> <li>2. To induct the newly recruited staff in areas of budgeting and reporting cycle and other financial management areas in Local Governments.</li> </ol>	<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>LG conducted discussions with the public to provide feedback through radio talk shows as seen in the activity reports of the Communications officer dated 29th April 2018( report on youth livelihoods program) and 12th April 2018 (report on the public sensitisation about cholera outbreak in the District).</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>Guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities was done during the following activities</p> <ol style="list-style-type: none"> <li>1. During TPC meeting that sat on 26/06/2018 under Min. KDTPC/098(b)2017/18</li> <li>2. Back stopping, monitoring and mentoring of CDOs in S/Cs was done according to activity reports dated 28/12/2017,22/09/2017,29/09/2017 and 05/12/17</li> <li>3. An activity report dated 26/06/2018 was seen where an assessment of Gender involvement in civil service posts at the district/departments established with disaggregated data provided.</li> <li>4. Action plan was drawn on 18/04/2018 to address the gender related gaps identified.</li> </ol>	<p>2</p>

<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the gender focal point and CDO have planned for minimum 2 activities for current FY to strengthen women's roles and address vulnerability and social inclusions and that more than 90 % of previous year's budget for gender activities/ vulnerability/ social inclusion has been implemented: score 2.</li> </ul>	<p>From the approved AWP for current FY 2018/19, i.e. pages 201 &amp; 209;</p> <p>The department planned to strengthen women's roles and address vulnerability and social inclusions, for example;</p> <ol style="list-style-type: none"> <li>Planned to do a technical audit on Gender.</li> <li>Support 30 and 42 women and youth groups respectively with seed capital</li> <li>Under UWEP and YLP they planned to do a back stopping to S/Cs.</li> </ol> <p>The department also spent more than 90% out of the gender budget. i.e. budgeted 2.5M and actually spent 2.6M which is 104%.</p>	<p>2</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 1</li> </ul>	<p>EIA was only done for Construction of 2 classroom block with office at Sese P/S on 23/08/2017 and the 6 drilled boreholes on 26/06/2017 but not done for the rest of the other implemented projects.</p>	<p>0</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1</li> </ul>	<p>From the bid documents of the implemented projects, the LG didn't integrate environmental and social management and health and safety plans there.</p>	<p>0</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1</li> </ul>	<p>There was no proof of land ownership seen for the implemented projects instead, for the water sources (boreholes), applications were seen from the community leaders but not actual commitment of land from the landlords i.e. from Kahanama LCI in Burora S/C on 05/10/2017, Kamusegu TC in Bwikara S/C on 05/09/2016, Bwera LC I in Muhoro S/C etc....</p>	<p>0</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1</li> </ul>	<p>ESM forms were only seen for Construction of 2 classroom block with office at Sese P/S and Construction of a 5 stance Vip latrine at Lyanda SDA P/S signed by the Environment officer alone on 25/07/2018 and 02/07/2018 respectively. For the rest of the other implemented projects, there were no ESM forms seen.</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>All the contract payment certificated didn't include prior environmental and social clearance</p>	<p>0</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <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>There was no completed checklists, deviations observed with pictures nor corrective actions taken for any of the implemented projects.</p>	<p>0</p>
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Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4</li> </ul>	<ul style="list-style-type: none"> <li>Basing on the PBS data in the approved budget FY 2018/2019, pg 35, the LG budgeted a wage of 6.7 bn for 1220 primary teachers.</li> <li>According to the staff/school's list, the LG operates with 136 P/s.</li> </ul> <p>On analysis <math>1220/136=9</math> teacher on average, implying the district meets the minimum standards of a teacher per class.</p>	4
<p>The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school (or minimum of a teacher per class for schools with less than P.7) for the current FY: score 4</li> </ul>	<ul style="list-style-type: none"> <li>The LG has deployed a head teacher to every school either by assignment or appointment but a minimum of a teacher per class is not applicable in some schools.</li> <li>Basing on random sampling done on the staff deployment list, the department does not meet minimum standards as indicated in the following schools against teachers deployed; <ul style="list-style-type: none"> <li>Mpefu P.7 sch- 11, Ruswiga p.7 sch- 8, Kitehe p.7 sch- 8, Mabaale p.7 sch- 8, Busugabwa p5 sch- 6, St Matha Kenga p7 sch- 8, Wangeyo p7 sch- 9, Kabooga p7- 6, Lyanda p7- 8, and St Peter Nyakatojo p7 sch- 7.</li> </ul> </li> <li>Besides the above, the 5 schools sampled for visiting to verify deployment, had the following results. (Key:- SL- Staff List, and PV- Physical verification on ground.) <ul style="list-style-type: none"> <li>Nyaruziba p/s SL- 8, PV- 8; Kitegwa SL- 12, PV- 12; Kiryane SL- 9, PV- 10; Kahunde SL- 10, PV- 10.</li> </ul> </li> <li>THEREFORE, Nyakatojo p/7 and Kibooga P7, have 7 teachers each, and do not meet the minimum standards of 8 staff per school.</li> </ul>	0



<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has filled the structure for primary teachers with a wage bill provision <ul style="list-style-type: none"> <li>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>	<ul style="list-style-type: none"> <li>• Basing on the approved and adopted staff structure for Kagadi LG, the PS. Min. of Public Service advised in a letter dated 14/12/2016 to implement within the wage bill of 2016/2017. Till today the wage still the same to cover only 1058 over the structure of 1454</li> </ul> <p>Analysis; <math>1058/1454 \times 100 = 73\%</math>.</p>	0
<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6</li> </ul>	<ul style="list-style-type: none"> <li>• The adopted structure for the LG allows 4 inspectors of schools; however the current wage bill as of 2016/2017 can only serve two inspectors, who are substantively recruited.</li> <li>- They're by names; 1.Tukamuhebwa Gerald and 2. Alinda Julius.</li> <li>• However Mr.Twinomujuni Fred and Atugonza Hannington are acting inspectors to bridge the gap.</li> </ul>	0
<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> <li>• Primary Teachers: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• The recruitment plan for 2017/2018 as per the letter addressed to CAO on 3/4/2018, indicate the following: <ul style="list-style-type: none"> <li>- H/Teachers- 8, Deputy H/teachers- 15, Education Assistants 350</li> </ul> </li> </ul>	2
<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>	<ul style="list-style-type: none"> <li>- The recruitment plan for inspectors indicate 3 positions of Assistant Inspector- 2 filled and 1 position of DIS not filled.</li> </ul>	2
Monitoring and Inspection			

<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> <li>• 100% school inspectors: score 3</li> </ul>	<p>All the 2 schools inspectors had been appraised by CAO</p> <p>Namely</p> <ol style="list-style-type: none"> <li>1- Alinda Julius</li> <li>2- Atugonza Hannington</li> </ol>	<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 <ul style="list-style-type: none"> <li>o 90 - 100%: score 3</li> <li>o 70% and 89%: score 2</li> <li>o Below 70%: score 0</li> </ul> </li> </ul>	<p>All primary school head teachers had been appraised by DEO</p> <p>20 Primary school head teachers files were sampled out of 136 namely:-</p> <ol style="list-style-type: none"> <li>1- Komuhendo Christine -Head teacher- Nyakoma P S appraised on 18/1/2018</li> <li>2- Amanyire Jorum- Head teacher – Kihumuro Parents P S appraised on 18/1/2018</li> <li>3- Mukonyezi John – Head teacher – Muhorro P S appraised on 29/12/2017</li> <li>4- Sanyu Joseph – Head teacher Kitengwa Model P S appraised on 17/11/2017</li> <li>5- Mubangizi Mathias – Head teacher Kitehe P S appraised on 24/11/2017</li> <li>6- Biingi Florence – Head teacher Isunga Islamic P S appraised on 12/1/2018</li> <li>7- Sunday Asaph – Head teacher Kihembe P S appraised on 3/1/2018</li> <li>8- Nkalubo Frank – Head teacher Bukungwe P S appraised on 16/10/2017</li> <li>9- Rev. Mugisha Francis – Head teacher Bishop Rwakaikara P S appraised on 3/1/2018</li> <li>10- Kusiima Francis – Head teacher Nyabutanzi P S appraised on 18/1/2018</li> <li>11- Byamukama Cyprian – Head teacher Kasoga P S appraised on 29/12/2017</li> <li>12- Birungi Biira Lucy – Head teacher Rutooma P S appraised on 29/12/2017</li> <li>13- Turyasingura Agatha – Head teacher</li> </ol>	<p>3</p>

		<p>Nyakasozi P S appraised on 29/12/2017</p> <p>14- Wanyenya Doreen – Head teacher Nyambeho P S appraised on 29/12/2017</p> <p>15- Kabasomi Alice – Head teacher Muzizi Tea Estate P S appraised on 29/12/2017</p> <p>16- Mbanza Simon – Head teacher Marryland P S appraised on 11/12/2017</p> <p>17- Kaahwa Julius – Head teacher Kabamba P S appraised on 29/12/2017</p> <p>18- Irumba Joshua – Head teacher Bugarama P S appraised on 18/1/2018</p> <p>19- Byaruhanga Godfrey – Head teacher Rutabagwe P S appraised on 11/12/2017</p> <p>20- Birungi Abel – Yeruzaremi PS appraised on 12/12/2017</p>	
<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1</li> </ul>	<p>Circulars received and communicated in FY 2017/2018 include:</p> <ol style="list-style-type: none"> <li>1. Guidelines on school charges, dated 24/10/2017; signed by PS. MOES.</li> <li>2. Adherence to school calendar, dated 9/5/2017 and received in July; signed by PS. MOES.</li> <li>3. Unlicensed and unregistered schools, dated 29/9/2017; signed by PS. MOES.</li> <li>4. Teacher's presence and Time on Task, (Roles and Responsibilities) dated May 2018; signed by PS. MOES.</li> <li>5. Enforcing closure of illegal schools, dated 26/3/18; signed by PS. MOES.</li> <li>6. Guidelines for registration of 2018 PLE candidate, dated 20/3/2018.</li> <li>7. Teachers support supervision, dated 30/3/2018.</li> </ol>	<p>1</p>

<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• The mode of communication, DEO uses to schools is through: 1.Monthly meetings with head teachers; 2. Have central place in each county where documents are picked by H/teachers. And 3. Through Watsapp platform.</li> <li>- Kagadi district head teachers association (KDHTA) meeting on 15/9/2017; Min. 5/2017, disseminated Teachers presence and time on task circular.</li> <li>- On 22/2/2018, Min.5/2/20018; Disseminated workplan for 2018 school calendar; Term 1, 05/2/2018- 4/5/2018; Term II, 28/5/2018 -24/8/2018; Term III, 17/9/2018- 7/12/2018.</li> </ul>	<p>2</p>
<p>The LG Education Department has effectively inspected all registered primary schools<sup>2</sup></p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> <li>o 100% - score 12</li> <li>o 90 to 99% - score 10</li> <li>o 80 to 89% - score 8</li> <li>o 70 to 79% - score 6</li> <li>o 60 to 69% - score 3</li> <li>o 50 to 59 % score 1</li> <li>o Below 50% score 0.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• The department of education operate 136 government aided and 100 licensed or registered Private schools, totaling to 236</li> <li>• The inspection reports for 2017/2018 indicates ;</li> <li>- Term 3, 2017- 114 schools; Term 1, 2018- 74 schools; Term 2, 2018 – 48 schools.</li> <li>- Analysis for average per term <math>(114+74+48)/3= 79</math>; Then % inspection <math>79/236*100= 33\%</math></li> </ul>	<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>	<ul style="list-style-type: none"> <li>• Inspection report for July 2018, dated 5/8/2018, and received by DEO on 16/8/2018: Indicated challenges faced by BSP. Rwakaikara p/s- Lack toilet stance for special needs children.</li> <li>- In department meeting on 31/5/2018 in DEOs office; Min. KD/EDUC/31/May/2018: Briefs from inspector; Reported the challenge of Special needs children at BSP. Rwakaikara, and the department promised to include it in the next AWP.</li> <li>• Department meeting on 21/12/2017; Min. KD/EDUC/2/21/Dec/2017; Errant teachers; Abscondment of teachers discussed.</li> <li>- On 3/4/2018; DEOs letter to CAO to replace licensed teachers, and list of names submitted. It was because some of the licensed teachers were not committed to work.</li> <li>- Inspectors report 11/7/2018, on errant teacher Mr Byaruhanga Enoc; In DEOs reaction, the meeting agreed to transfer him from Kiryanga to Kabamba p/s.</li> </ul>	<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>	<ul style="list-style-type: none"> <li>• Inspection report for Qtr 1 2017/18, dated 29/12/2017; Was received and acknowledged by DES secretary- Winnie- on 9/2/2017.</li> <li>• Inspection report for term 1 dated 31/5/2018; Received and acknowledged by DES secretary- Winnie Kirenda.</li> </ul> <p>Inspection report for term 2, received and acknowledged on 6/10/2018 by Winnie Kirenda.</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>Evidence for follow up cases were sited at Kahunde p/s;</p> <ul style="list-style-type: none"> <li>• Inspection on 19/9/2018, found attendance of children at 305 out of 568 enrollment, and H/teacher was cautioned over this.</li> <li>- H/teacher, staff and PTA meeting, Min. 10/10/ 2017; encouraged parents to send their children at beginning of term and pack food for them.</li> <li>• Inspectors visit on 6/7/2017 and assessed lesson delivery at 68%; He encouraged the to work it 100%.</li> <li>- H/teacher introduced lesson monitoring and supervision tool.</li> <li>• At Nyaruziba p/s, DEOs visit on 2/3/2018- advised the school to prepare for external inspection and monitoring.</li> <li>- On 29/4/2018, head teachers communication to teachers to get ready for joint supervision exercise on 10/4/2018.</li> <li>- On 29/5/2018, Min. 11/05/2018; Supervision form for Teachers presence and time on task.</li> </ul>	<p>4</p>
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> <li>o List of schools which are consistent with both EMIS reports and PBS: score 5</li> </ul> </li> </ul>	<p>List of gov't schools from PBS for UPE IPFs for FY 2017/2018 as at closure of term 2 2018 indicates 136 schools;</p> <p>while the list from MOES also has 136 schools which is consistent.</p>	<p>5</p>

<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<p>Evidence that the LG has submitted accurate/consistent data:</p> <ul style="list-style-type: none"> <li>• Enrolment data for all schools which is consistent with EMIS report and PBS: score 5</li> </ul>	<p>Pupils census in gov't schools 2017/2018 in DEOs office gave enrollment of 60,662;</p> <p>While the list from MOES puts enrollment at 36447, which is not consistent. (Complaint that since last FY enrollment data has not been collected.)</p>	<p>0</p>
<p>Governance, oversight, transparency and accountability</p>			
<p>The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc. during the previous FY: score 2</li> </ul>	<p>At the Sitting of the Education and Health Standing Committee meeting held on 16th /05/2018, the Committee discussed service delivery issues under Min. 27/Educ &amp; Health /05/2018: "Reports from HODs and considered among others :</p> <ul style="list-style-type: none"> <li>i. Food packing for school children</li> <li>ii. Need to streamline the closing and opening of schools to avoid allegations of corruption.</li> </ul>	<p>2</p>
<p>The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the education sector committee has presented issues that require approval to Council: score 2</li> </ul>	<p>The Kagadi District Council sitting No.01 of 2017/2018 held on 25th May 2018 under Min. KD/CL/51/05/201718 (d): "Presentation of Recommendation from Council Standing Committees" recommended that primary school administration and management be encouraged to prepare food for pupils.</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>	<ul style="list-style-type: none"> <li>• Kagadi LG SMCs are established by council committee for education and Health Min. 4/EDUC&amp;Health/Oct/2016, on 10/10/2016. The SMC were appointed by DEO on 27/10/2016.</li> <li>• All schools sampled (Kiryane, Kahunde, Stella Marris, Nyaruziba, and Kitegwa) held SMC meetings and discussed resource issues in all their meetings ranging from Fundraising, UPE budget approvals, accountabilities on Expenditures for UPE, PTA, as indicated below. (Selected/Sampled one meeting (term 1) as representative for the year.</li> </ul> <p>- Kiryane p/s term 1 meeting on 1/3/2018; Min. 8/2018:- Discussed that teachers should be supported for lunch by/ from parents and not from UPE fund, and PTA account was opened.</p> <p>- At Kahunde p/s term 1 meeting on 7/3/2018; Min. 5/3/2018; Accountability for 1.2m from parents collection and 1.7m from UPE funds.</p> <p>- Stella Maris Kagadi p/s term 1 meeting on 19/1/2018; Min. 3/1/2018: Assessed activities implemented in workplan and resolutions made for new year</p> <p>- Nyaruziba p/s term1 meeting on 17/4/2018, Min. 5/2018; Discussed and budgeted for installation of electricity at school .</p> <p>- Kitegwa p/s term 1 meeting on 3/5/2018: Declare 2.4m UPE funds received and approved the budget.</p>
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The LG has publicised all schools receiving non-wage recurrent grants

Maximum 3 for this performance measure

• Evidence that the LG has publicised all schools receiving non-wage recurrent grants

e.g. through posting on public notice boards: score 3

• Kagadi DLG p/s received UPE grants and list of schools displayed on department notice board. Release for quarter 1- 2018 worth 223,825,219 was seen.

Schools sampled to verify receipt of UPE release were:-

- Kahunde p/s term 3 on 18/8/2017 received -1.76m; Term 1 on 20/2/2018- 1.7m; Term 2 on 17/6/2018- 1.7m

- Nyaruziba p/s term 1, 2018 received 1.42m; Term 2 , 2018- 1.45m.

- Kitegwa p/s Term 3 2017 received 2.42m; Term 1, 2018 – 2.42m; Term 2, 2018- 2.42m

Procurement and contract management

<p>The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements,</p> <p>to the Procurement Unit that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has submitted procurement input to Procurement Unit that covers all investment items in the approved Sector annual work plan and budget on time by April 30: score 4</li> </ul>	<p>Three projects were sampled to check procurement requisitions at DPU.</p> <ul style="list-style-type: none"> <li>• Procurement requisitions for completion of Sese classroom project at 71m, was initiated and signed by DEO on 23/7/2017; signed by CFO on 26/7/2017 and D/CAO on 26/7/2017.</li> <li>• Lyanda 5 stance latrine construction requisition at 9m was signed by DEO on 25/7/2017; CFO on 26/7/2017; and DCAO also on same date.</li> <li>• Supply and delivery of school desks at 12m; signed by DEO on 25/7/2017, CFO on 26/7/2017; and DCAO on 26/7/2017.</li> <li>• All submissions of projects procurement requisitions were before 30th April.</li> <li>• All the above projects were extracted from the approved district AWP FY 2017/2018; signed by the Chair person on 30/6/2017, includes investment priorities, among which a sample of the above 3 projects were taken, Pgs 23 &amp; 24.</li> </ul> <ol style="list-style-type: none"> <li>1. Completion of 2 classroom block at Sese p/s, with a budget of 71.2m;</li> <li>2. Construction of Lyanda 5 stance latrine with a planned budget of 5.6m; and</li> <li>3. Purchase of school desks for Busungubwa, Rwendahi, Kiheba, Lyanda and Buraza p/s worth 9.32m.</li> </ol>	4
Financial management and reporting			
<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3.</li> </ul>	<ul style="list-style-type: none"> <li>• From the sampled payments made to Azu Properties Limited worth Ugx 1,714,853,324 which was spent on Construction of facilities at selected primary schools under GPE/VISEP, LOT4 in Kagadi at Nyabigata Primary School, Isunga Islamic Primary School, Katikengoye Primary School, Solorwa Junior School and Hasubi Primary School.</li> <li>•</li> <li>• All these payments were made on time and mostly within a week after requisition for payment was raised.</li> </ul>	3

<p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <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 did not submit to the Planner the annual performance report for the previous FY 2017/2018 by 15th July 2018 as evidenced by the PBS submission notification dated 5th August 2018.</p>	0
<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 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>	<ul style="list-style-type: none"> <li>• One Query</li> <li>• (1) Non Accountability of advance paid service provider in Construction of Seese Primary School</li> <li>• (2) No Acknowledgment from Cooper Motors Corporation LTD for supply of double cabin pickup worth Ugx 174,960,000, the vehicle was also not in the DLG Asset Register.</li> <li>•</li> </ul> <p>There was no evidence provided to show that these queries had been attended to by the time of Assessment.</p>	0
Social and environmental safeguards			
<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>Guidelines in place include;</p> <ul style="list-style-type: none"> <li>• National strategy for girls education in Uganda 2014/19</li> <li>• Keeping safe in schools; Learners booklet: What is a safe school?</li> </ul>	2
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2</li> </ul>	<p>The institution of senior woman/man teachers is in place and claim to have conducted a workshop form them but no evidence neither minutes or reports for meeting was availed for collaboration with gender focal person.</p>	0

<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>	<ul style="list-style-type: none"> <li>• The LG SMCs do not meet gender guideline of 1/3 on the founding body should be females as stipulated in the Education Act as evidenced in the sample schools below;</li> <li>- Kitegwa p/s SMC composition is 2/6 members are females.</li> <li>- Kiryane SMC- 2/6</li> <li>- Kahunde SMC- 1/6</li> <li>- Stella Maris SMC- 3/6</li> <li>• Therefore the LG falls short of the guidelines by Kahunde p/s which has only one female on foundation body.</li> </ul>	<p>0</p>
<p>LG Education department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that 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>Environmental guidelines include;</p> <ul style="list-style-type: none"> <li>• School environment guidelines dated 12/4/2018; Include environment and social screening, school compound, production and conservation. Signed 12/4/2018.</li> </ul>	<p>1</p>
<p>LG Education department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that 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>	<ul style="list-style-type: none"> <li>• On 2/12/2017; Report on environment monitoring for sites, environment inspection for Isunga p/s, Kasibi, Katikengeye, Nyabigate. Signed by EO, on 2/12/2017.</li> <li>• CDO progressive report on follow up of GPEs to Uganda teachers and schools effective project; dated 2/1/2018:- Field findings during site inspection and monitoring focused on social issues.</li> </ul>	<p>1</p>
<p>LG Education department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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>Environment and social certification of the community and local government projects; Sese classroom block. Signed on 25/6/2018; Environment and social management process at LG and community level.</p>	<p>1</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>	<ul style="list-style-type: none"> <li>• MoH approved structure provides for 434 posts (Including DHO's Office) to operate at 100% capacity.</li> <li>• Payroll prepared in September 2018 showed 264 posts filled. This meant that 170 posts were vacant in relation to the approved MoH staffing norms. This is 60.8% posts filled</li> <li>• The district has 1 HSD (Buyaga HSD) and the total number of HFs (Including PNFPs) located herein are 21 (Gov't – 1GH, 7HCIIIs, 9HCIIIs &amp; PNFP - 3HCIIIs, 1HCIIIs) that receive PHC NWR. The 22nd facility, Muhorro-Kabuga HCIII, has staff on payroll attached but doesn't receive PHC NWR nor Medical Supplies .</li> </ul>	4
<p>The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/re- quest to HRM for the current FY, covering the vacant positions of primary health care workers: score 6</p>	<p>The recruitment plan wasn't comprehensive enough to cover all the 170 vacant positions.</p> <ul style="list-style-type: none"> <li>• An integrated Recruitment Plan FY 2018/19 that was to be laid before council on 27th March, 2018 as written on the document was availed. It revealed a total of 31 vacant posts to be filled.</li> <li>• The plan wasn't made in the standard format as provided by MoH hence the different posts under health had to be teased out since some had been indicated under the several Town Councils that exist within the district.</li> </ul>	0

<p>The LG Health department has conducted performance appraisal for Health Centre IVs and Hospital In-charge and ensured performance appraisals for HC III and II in-charges are conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the all health facilities in-charges have been appraised during the previous FY:</p> <ul style="list-style-type: none"> <li>o 100%: score 8</li> <li>o 70 – 99%: score 4</li> <li>o Below 70%: score 0</li> </ul>	<p>Less than 70% of Health unit In charges had been appraised by DHO according to their personal files,</p> <p>Out of 18 in charges only the following personal files were accessed:-</p> <p>Namely.</p> <ol style="list-style-type: none"> <li>1 – Katushabe Robert – CR/D/15566</li> <li>2- Gonza Anthony – CR/D /15021</li> <li>3-Nassimbwa Mary- CR/D/15024</li> <li>4- Happy Unith – CR/D/15563</li> <li>5- Atugonza – CR/D/55077</li> <li>6- Atuhurra Doreen – CR/D/15503</li> <li>7- Mugabiirwe Joyce – CR/D/ 15176</li> <li>8- Ngomiranze Grace – CR/D/15559</li> <li>9- Bwambale Emmanuel – CR/D/15401</li> <li>10- Kanyunyuzi Pinkline – CR/D/</li> <li>11- Katusabe Robert – CR/D/15566</li> <li>12- Mwesigwa Pascazia – CR/D/15093</li> </ol>	<p>0</p>
<p>The Local Government Health department has deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Health department has deployed health workers in line with the lists submitted with the budget for the current FY, and if not provided justification for deviations: score 4</li> </ul>	<p>Two of the facilities had lists that deviated in number from that of the DHO's list. No justification for the deviations was given at the time of assessment</p> <ul style="list-style-type: none"> <li>• 18 Gov't facilities (1GH, 8HCIIIs, 9HCIIIs) exist in the district where staff that receive PHC Wage are deployed</li> <li>• Rugashali HCIII staff list with stamp dated 1st June 2018 was availed with 14 staff recorded as attached to the facility. The staff list availed at DHO's office list as at AUGUST 2018 recorded 14 staff as attached to this facility.</li> <li>• Isunga HCIII staff list was availed with 16 staff. Staff list at DHO's office list showed 12 staff deployed to this facility.</li> <li>• Bwikara HCIII staff list was availed with 15 staff attached. DHO's staff list recorded 15 staff deployed at this facility.</li> <li>• Muhorro HCII staff list was availed with 5 staff attached. DHO staff list indicated 5 staff deployed to this facility.</li> <li>• Kagadi Hospital staff list as of June 2018 showed 150 staff attached to the facility. DHO's staff list showed 152 staff deployed at the hospital.</li> </ul>	<p>0</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>	<ul style="list-style-type: none"> <li>• Sector Grant and Budget Guidelines to Local Governments FY 2018/19 was availed.</li> <li>• Strategy for Improving Health Service Delivery 2016-2021 was availed.</li> <li>• Guidelines for the Local Government Planning Process Health Sector Supplement 2016 was availed</li> <li>• No evidence from the DHO to show communication of the guidelines &amp; policies to facilities was availed at the time of assessment</li> </ul>	<p>0</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>	<ul style="list-style-type: none"> <li>• No evidence from DHO was availed at the time of assessment.</li> </ul>	<p>0</p>

<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT/MHT has supervised 100% of HC IVs and district hospitals (including PNFPs receiving PHC grant) at least once in a quarter: score 3</p>	<ul style="list-style-type: none"> <li>• The district has 1 HSD (Buyaga HSD) and the total number of HFs (Including PNFPs) located herein are 21 (Gov't – 1GH, 7HCIIIs, 9HCIIIs &amp; PNFP - 3HCIIIs, 1HCIIIs) that receive PHC NWR. The 22nd facility, Muhorro-Kabuga HCIII, has staff on payroll attached but doesn't receive PHC NWR nor Medical Supplies</li> </ul> <p>The DHT supervised the district hospital at least once in Q1 &amp; Q2 only</p> <ul style="list-style-type: none"> <li>• Q1 report for activities carried out from 10th to 21st July 2017) referenced as Joint Support Supervision in Cold Chain Monitoring, Assessment &amp; Evaluation, Health Education and Disease Surveillance in all Health Facilities was availed. 22 facilities were visited, Kagadi Hospital inclusive.</li> <li>• Q2 report dated 10th November 2017 referenced as Top Leadership Support Supervision on Anti-Retroviral Therapy (ART) providing sites was availed. 11 ART providing sites were listed as visited and Kagadi Hospital was inclusive.</li> <li>• Q3 Support Supervision report for the month of January 2018, dated 5th February 2018 was availed. 6 facilities were visited but the Hospital was not among them</li> <li>• Q4 Support Supervision report for the month of March 2018, dated 9th April 2018 was availed. 4 facilities were visited and the hospital wasn't among them.</li> </ul>	<p>0</p>
<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT/MHT has ensured that HSD has super-vised 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>No evidence was availed at the time of assessment</p> <ul style="list-style-type: none"> <li>• The district has 1 HSD (Buyaga HSD) and the total number of HFs (Including PNFPs) located herein are 21 (Gov't – 1GH, 7HCIIIs, 9HCIIIs &amp; PNFP - 3HCIIIs, 1HCIIIs) that receive PHC NWR. The 22nd facility, Muhorro-Kabuga HCIII, has staff on payroll attached but doesn't receive PHC NWR nor Medical Supplies</li> <li>• The District doesn't have a HCIV but has a Hospital which according to the PHC Guidelines FY 2017/18 is exempted from the task of HSD Management hence there were no support supervision reports availed by Kagadi Hospital.</li> <li>• The DHO and the Senior Accounts Assistant attached to Kagadi Hospital reported that the hospital never received funds for HSD management.</li> </ul>	<p>0</p>



<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that all the 4 quarterly reports have been discussed and used to make recommendations (in each quarter) for corrective actions during the previous FY: score 4</li> </ul>	<ul style="list-style-type: none"> <li>No evidence from the minutes, at the time of assessment, that the DHT had discussed the supervision reports.</li> </ul>	0
<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>	<ul style="list-style-type: none"> <li>No evidence, at the time of assessment, that the DHT had followed up the recommendations made in the supervision reports</li> </ul>	0
<p>The LG Health department has submitted accurate/consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> <li>List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10</li> </ul> </li> </ul>	<p>The list of facilities receiving PHC funding wasn't consistent with the PBS work plan.</p> <ul style="list-style-type: none"> <li>The district has 1 HSD (Buyaga HSD) and the total number of HFs (Including PNFPs) located herein are 21 (Gov't – 1GH, 7HCIIIs, 9HCIIIs &amp; PNFP - 3HCIIIs, 1HCIIIs) that receive PHC NWR.</li> <li>List of facilities to receive PHC NWR for FY2018/19 dated 15/06/2018 was availed with 23 facilities to receive a total of UGX 316,324,652</li> <li>The PBS LG Work Plan FY 2018/19 generated on 01/08/2018 highlights the same 21 facilities among others on Pages 56 &amp; 63</li> </ul>	0
<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>At the Sitting of the Education and Health Standing Committee meeting held on 23/11/201, the Committee discussed service delivery issues under Min. 12/Educ &amp; Health /11/2017 (b): “Presentation of Departmental Reports and Workplans and considered among others :</p> <ul style="list-style-type: none"> <li>i. Award of contract for hospital fencing at UGX.270mn</li> <li>ii. Construction of Kabamba HC and Kyakabadiima HC</li> <li>iii. House to House polio immunisation</li> </ul>	2
<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>The Kagadi District Council sitting No.01 of 2017/2018 held on 25th May 2018 under Min. KD/CL/51/05/201718 (d) : “Presentation of Recommendation from Council Standing Committees” recommended that using PHC funds, Kagadi Hospital Management Committee plan for fumigation to reduce on mosquitoes and procurement of mosquito nets for all wards in Kagadi Hospital.</p>	2
<p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 6 points</p>	<p>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> <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>Only 3 facilities had the four mandatory meetings</p> <ul style="list-style-type: none"> <li>Rugashali HCIII HUMC list that had 7 names was availed (6 are members as per the guidelines). 3 FEMALES &amp; 3 MALES. Q2 HUMC minutes for meeting held on 30/1/2018 were availed. Budget &amp; resource issues were discussed under Minute 2. Q3 HUMC minutes for meeting held on 27/4/2018 were availed. Budget &amp; resource issues were discussed under Minute 2. Q4 HUMC minutes for meeting held on 5/6/2018 were availed. Budget &amp; resource issues had been discussed under Minute 2.</li> <li>Isunga HCIII HUMC list was availed with 7 names (6 are approved by the guidelines) i.e. 2 females and 4 males. Q3 minutes for meeting held on 24th April 2018 were availed. Budget &amp; resource issues were discussed under Min 03/04/2018 &amp; Min 04/4/2018. Q4 minutes for meeting held on 14/06/18 were availed. Resource issues were discussed under “reactions”.</li> <li>Bwikara HCIII HUMC list was availed with 9 names (8 are approved by the guidelines). This translates to 3 females &amp; 5 males. Q1 minutes for meeting held on 10th October 2017 were availed. Budget &amp; resource issues were discussed under “communication from the chair” and “briefs from in-charge”. Q2 minutes dated 12/12/2017 were availed. Resource issues</li> </ul>	0

		<p>had been discussed under “communication from the in-charge”. Q3 minutes dated 28/02/2018 were availed. Budget &amp; resource issues were discussed under “communication from the in-charge”. Q4 minutes for meeting held on 18/5/2018 were availed. Budget &amp; resource issues were discussed under “Reading of budget, scrutinising &amp; adopting budget”.</p> <ul style="list-style-type: none"> <li>• Muhorro HCII HUMC list had 5 members (2 females &amp; 3 males). This number is below the minimum of 6 required at this level. Q1 minutes for meeting held on 29/09/2017 were availed. Resource issues were discussed under “report from the in-charge”. Q2 minutes for meeting held on 17/01/2018 were availed. Resource issues were discussed under MIN3/2018. Q3 minutes for meeting held on 8th February 2018 were availed. Resource issues were discussed under Minute 3/2018. Q4 minutes for meeting held on 28/6/2018 were availed. Budget and resource issues were discussed 6under Min3/2018.</li> <li>• Kagadi Hospital Board members list was never availed at the time of assessment. However, the membership was established using the board minutes that were present. Q1 minutes for meeting held on 31st October 2017 were availed and showed 11 committee members (9 are approved by the guidelines) this translates to 2 females &amp; 7 males. Budget &amp; resource issues were discussed under Min 3/HMC/10/2017. Q2 minutes for meeting held on 14th December 2017 were availed. Budget &amp; resource issues were discussed under Min 11/HMC/12/2017. Q3 minutes for meeting held on 11th January 2018 were availed. Budget &amp; resource issues had been discussed under Min 3/HUMC/01/2018 &amp; Min /HUMC/01/2018. Q4 minutes for meeting held on 27th July 2018 were availed. Budget &amp; resource issues had been discussed under Min 19/HMC/07/2018 &amp; Min 24/HMC/07/2018.</li> </ul>	
<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>	<ul style="list-style-type: none"> <li>• A list of 21 (Gov’t – 1GH, 7HCIIIs, 9HCIIIs &amp; PNFP - 3HCIIIs, 1HCIIIs) to receive PHC NWR in FY 2018/19 dated 15th June 2018 was displayed on the public notice board at the DHO's office.</li> </ul>	<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 submission was made after April 30 for the current FY</p> <ul style="list-style-type: none"> <li>An Integrated Procurement Plan for FY 2018/19 with a Ministry of Finance Planning &amp; Economic Development stamp dated 14th August 2018 was availed. The Plan for Health was summarized on paper no. 8 &amp; 9 with DHO's signature &amp; stamp dated 8th August 2018 had 16 items listed for procurement.</li> </ul>	0
<p>The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <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>	<ul style="list-style-type: none"> <li>Only one PP1 form for 1 out of the 16 items was availed, dated 8th August 2018 with estimated total cost of UGX 35,000,000</li> </ul>	0
<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4.</li> </ul>	<ul style="list-style-type: none"> <li>From the Activities carried out at Kagadi Hospital carried out by various vendors: Karukana Enterprises: Supply of Photocopier and 2 printers, and renovation of Hospital wash rooms in 4 wards at Hospital. Fencing the whole Hospital</li> <li>Power Source Electricals and Contractors: Electrical installation in Kagadi Hospital wards, toilets and theatre</li> <li>And Juscona Enterprises (U) LTD: Installation of wire rails for drying clothes all worth Ugx 323,408,658.</li> <li>The payment was made on time, within days of the requisition being made.</li> </ul>	4
Financial management and reporting			

<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <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 did not submit to the Planner the annual performance report for the previous FY 2017/2018 by 15th July 2018 as evidenced by the PBS submission notification dated 5th August 2018.</p>	<p>0</p>
<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</p> <ul style="list-style-type: none"> <li>If sector has no audit query: Score 4</li> <li>If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: Score 2 points</li> <li>If all queries are not responded to Score 0</li> </ul>	<ul style="list-style-type: none"> <li>One query: <ul style="list-style-type: none"> <li>(1) Non accountability of Advances to Kagadi Hospital WORTH SHS 24,076,109.</li> </ul> </li> </ul> <p>At the time of Assessment no evidence was provided to show any action taken on the above query.</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>Two facilities didn't meet the required membership and/or composition as per the guidelines</p> <ol style="list-style-type: none"> <li>Rugashali HCIII HUMC list that had 7 names was availed (6 are members as per the guidelines). 3 FEMALES &amp; 3 MALES. This is 50% composition</li> <li>Isunga HCIII HUMC list was availed with 7 names (6 are approved by the guidelines) i.e. 2 females and 4 males. This is 33.3% composition</li> <li>Bwikara HCIII HUMC list was availed with 9 names (8 are approved by the guidelines). This translates to 3 females &amp; 5 males. This is 37.5% composition</li> <li>Muhorro HCII HUMC list had 5 members (2 females &amp; 3 males). This number is below the minimum of 6 required at this level.</li> <li>Kagadi Hospital Board members list was never availed at the time of assessment. However, the membership was established using the board meeting minutes that were present. Q1 minutes for meeting held on 31st October 2017 were availed and showed 11 committee members (9 are approved by the guidelines) this translates to 2 females &amp; 7 males. This is 22.2% composition</li> </ol>	<p>0</p>
<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2.</li> </ul>	<ul style="list-style-type: none"> <li>No evidence was availed at the time of assessment.</li> </ul>	<p>0</p>
<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>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>	<ul style="list-style-type: none"> <li>An integrated procurement plan FY 2017/18 dated 10th January 2018 was availed. It had one infrastructure project for renovation of Kagadi Hospital Phase 2.</li> <li>No project screening forms were availed at the time of assessment</li> </ul>	<p>0</p>

<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>The environmental officer and community development officer have visited the sites to check whether the mitigation plans are complied with: Score 2</li> </ul>	<ul style="list-style-type: none"> <li>No site visit and inspection reports were available at the time of assessment</li> </ul>	<p>0</p>
<p>The LG Health department has issued guidelines on medical waste management</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has issued guidelines on medical waste management, including guidelines (e.g. sanitation charts, posters, etc.) for construction of facilities for medical waste disposal: score 4.</li> </ul>	<ul style="list-style-type: none"> <li>No evidence was available at the time of assessment</li> </ul>	<p>0</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the district Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY:               <ul style="list-style-type: none"> <li>o If 100 % of the budget allocation for the current FY is allocated to S/Cs below average coverage: score 10</li> <li>o If 80-99%: Score 7</li> <li>o If 60-79: Score 4</li> <li>o If below 60 %: Score 0</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Kagadi's (rural) access to safe water stands at 61%</li> <li>• Low-coverage sub-counties are: Kabamba (34%), Kiryanga (15%), Kyaterekera (58%), Mpeefu (46%), Paacwa (26%) and Rugashari (33%)</li> <li>• All the low-coverage sub-counties were targeted in FY 2018/19 as follows:               <ul style="list-style-type: none"> <li>o Kabamba: one new borehole (BH)</li> <li>o Kiryanga: one new BH</li> <li>o Kyaterekera: construction of piped water system phase II</li> <li>o Mpeefu: one new BH</li> <li>o Paacwa: one new BH; public sanitation facility at market</li> <li>o Rugashari: one new BH</li> </ul> </li> <li>• Investments in the two low-coverage sub-counties amount to UGX 369 million; i.e., 74% of the capital budget for the water and sanitation conditional grant FY 2018/19 (UGX 499 million)</li> </ul>	4



<p>The district Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the district Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY.</li> <li>o If 100 % of the water projects are implemented in the targeted S/Cs:</li> </ul> <p>Score 15</p> <ul style="list-style-type: none"> <li>o If 80-99%: Score 10</li> <li>o If 60-79: Score 5</li> <li>o If below 60 %: Score 0</li> </ul>	<ul style="list-style-type: none"> <li>• Four WSS projects were implemented in FY 2017/18 as follows: <ul style="list-style-type: none"> <li>o Rehabilitation of 10 boreholes</li> <li>o Drilling and installation of 6 deep boreholes</li> <li>o Feasibility study and design of Pacwa piped WSS</li> <li>o Construction of Kyaterekera piped WSS Phase I</li> </ul> </li> <li>• The low-coverage sub-counties were catered for as follows: <ul style="list-style-type: none"> <li>o Kabamba: one new BH</li> <li>o Kiryanga: one new BH</li> <li>o Kyaterekera: construction of piped WSS Phase I</li> <li>o Mpeefu: (UNICEF-funded) rehabilitation of two BHs</li> <li>o Paacwa: one BH rehabilitated; design of PWS</li> <li>o Rugashari: (UNICEF-funded) rehabilitation of two BHs</li> </ul> </li> <li>• In capital terms, at least three-quarters of the WSS investments were implemented in the low-coverage sub-counties</li> </ul>	
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>	<ul style="list-style-type: none"> <li>• Implementation monitoring and supervision reports for WSS investments made in 2017/18 were reviewed as follows: <ul style="list-style-type: none"> <li>o Quarterly progressive reports dated September 9, 2017, January 5 and April 10, 2018: content included community sensitization for new WSS facilities; status of existing WSS facilities; recommended BH drilling depth; and post-construction supervision for new BHs</li> <li>o Kyaterekera PWS (by Olanzicom): survey report dated August 22, 2018 – prepared by District Health Inspector</li> </ul> </li> <li>• 3 out of 3 Projects: 100%</li> </ul>	<p>15</p>
<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the district has submitted accurate/consistent data for the current FY: Score 5</li> <li>• List of water facility which are consistent in both sector MIS reports and PBS: score 5</li> </ul>	<ul style="list-style-type: none"> <li>• Four WSS projects were implemented in FY 2017/18 as follows: <ul style="list-style-type: none"> <li>o Rehabilitation of 10 boreholes</li> <li>o Drilling and installation of 6 deep boreholes</li> <li>o Feasibility study and design of Paacwa piped WSS</li> <li>o Construction of Kyaterekera piped WSS Phase I</li> </ul> </li> <li>• MIS records obtained from MoWE confirm the design of Paacwa and construction of Kyaterekera PWS, but different numbers for BH installation (02) and rehabilitation (01)</li> </ul>	<p>0</p>

<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>List of water facility which are consistent in both sector MIS reports and PBS: score 5</li> </ul>	<ul style="list-style-type: none"> <li>Four WSS projects were implemented in FY 2017/18 as follows: <ul style="list-style-type: none"> <li>Rehabilitation of 10 boreholes</li> <li>Drilling and installation of 6 deep boreholes</li> <li>Feasibility study and design of Paacwa piped WSS</li> <li>Construction of Kyaterekera piped WSS Phase I</li> </ul> </li> <li>MIS records obtained from MoWE confirm the design of Paacwa and construction of Kyaterekera PWS, but different numbers for BH installation (02) and rehabilitation (01)</li> </ul>	0
Procurement and contract management			
<p>The district Water department has submitted input for district's procurement plan, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has submitted input for the district procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4</p>	<ul style="list-style-type: none"> <li>At the time of assessment, procurement requests for FY 2018/19 had not been prepared/raised</li> </ul>	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>	<ul style="list-style-type: none"> <li>Contract Managers for the various projects were appointed by the LG's Chief Executive (CAO) as follows: <ul style="list-style-type: none"> <li>BH rehabilitation: Assistant Engineering Officer (5.8.2017)</li> <li>BH drilling and installation: District Water Officer (5.1.18)</li> <li>Kyaterekera PWS: District Water Officer (5.1.18)</li> </ul> </li> <li>Regular monitoring (site) visits are conducted as highlighted in performance measure 3</li> </ul>	2

<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>	<ul style="list-style-type: none"> <li>• Field assessment was conducted on September 20, 2017 for select WSS projects; i.e. four deep boreholes and 4-stance lined public sanitation facility (at Kyaterekera)</li> <li>• It was established the facilities were built as per designs</li> </ul>	<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>	<ul style="list-style-type: none"> <li>• All WSS facilities completed in FY 2017/18 are due for “official” handover in a joint ceremony with date TBD</li> <li>• Nonetheless, during the field assessments, it was ascertained contractors handed the facilities to communities, who are in charge of daily O&amp;M</li> </ul>	<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 DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• The Contract Manager/DWO certified the WSS projects and filed completion reports as follows: <ul style="list-style-type: none"> <li>o BH rehabilitation (10 No.) – certificate dated June 27, 2018; signed by respective LCI, DWO and contractor</li> <li>o BH drilling (6 No.) – certificated dated June 19, 2018; prepared by DWO</li> <li>o Kyaterekera PWS Phase I – certificate dated June 28, 2018</li> </ul> </li> </ul>	<p>2</p>

<p>The district Water department has certified and initiated payment for works and supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	<ul style="list-style-type: none"> <li>From the sampled payments made to the following vendors: Water Resource and Environment Consultants- Consultancy service for sitting designing and supervision for 6 boreholes, Hydrogeological Surveys / sitting and drilling work for 1 borehole in Paachwa A and B.</li> <li>KLR Uganda Ltd: Drilling of 6 deep boreholes in different parts of Kagadi at Kibingo, Kiduuma Primary School, Karo-Karungi, Kabugo, Kavule, and ST Peters Primary School Burore.</li> <li>MAL &amp; P Enterprises Ltd: Feasibility Study, design and sitting of Paachwa water supply system in Paachwa Trading Centre in Kagadi</li> <li>All the above payments were worth Ugx 221,102,519.</li> <li>All these payments were made on time and mostly within a week after requisition for payment was raised.</li> </ul>	<p>3</p>
<p>Financial management and reporting</p>			
<p>The district Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5</li> </ul>	<p>The department did not submit to the Planner the annual performance report for the previous FY 2017/2018 by 15th July 2018 as evidenced by the PBS submission notification dated 5th August 2018.</p>	<p>0</p>

<p>The District Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</li> <li>o If sector has no audit query score 5</li> <li>o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3</li> </ul> <p>If queries are not responded to score 0</p>	<ul style="list-style-type: none"> <li>• Six Queries</li> <li>• (1) Non accountability of advances</li> <li>• (2) Procurement and Contract Management issues on guidelines for rehabilitation of boreholes in various Sub Counties</li> <li>• (3) Lack of pre-condition assessment reports</li> <li>• (4) un authentic Completion Certificate</li> <li>• (5) Lack of LPOs</li> <li>• (6) Overpayment to Olanzicon Services Ltd, on Kyaterekera piped water system, worth Ugx 7,833,000</li> <li>•</li> </ul> <p>These queries were not yet responded too at the time assessment and there was no evidence availed to confirm any action taken or about to be taken.</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 Works and Technical Services Sectoral Committee discussed service delivery issues at its meeting held on 24/08/2017 under Min. 06/Works/08/2017: Presentation of Departmental Workplan and reports considered among others :</p> <ul style="list-style-type: none"> <li>i. Construction of Kyaterekera water supply phase 1</li> <li>ii. Drilling of 6 boreholes i.e. Kavile, Kibingo, Nyakasozi, Kabuga, Kiduma and Kihuura.</li> </ul>	<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>No evidence was found in the 6 sets of minutes of council available.</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>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>	<ul style="list-style-type: none"> <li>The annual workplan and budget are displayed, dated June 28, 2018</li> <li>Information on the quarterly development grant releases and expenditures was not available at the time of assessment</li> </ul>	<p>0</p>
<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <li>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>	<ul style="list-style-type: none"> <li>Projects assessed during fieldwork are labelled with details of name (including village/parish), financial year of construction, contractor and funding source. The following were assessed: <ul style="list-style-type: none"> <li>BHs at Kibingo TC (Bwikara sub-county), St. Peter's P/S (Burora sub-county), and Kyakasozi (Kabamba sub-county) – KLR Ltd</li> <li>Public sanitation facility at Kyaterekera</li> </ul> </li> </ul>	<p>2</p>
<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2</li> </ul>	<ul style="list-style-type: none"> <li>At the time of the assessment, the list of projects awarded in FY 2017/18 was displayed on the notice board</li> <li>Information displayed included subject of procurement, reference number, awardee, and contract price</li> </ul>	<p>2</p>

<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1</li> </ul>	<ul style="list-style-type: none"> <li>Community applications for the sampled WSS facilities are on file. The reviewed applications include: <ul style="list-style-type: none"> <li>Kibingo TC (Bwikara sub-county): request (5.9.16) for a BH</li> <li>St. Peter's P/S (Burora): request dated 22.1.18 for BH</li> <li>Nyakasozi (Kabamab sub-county): dated 10.12.17 for BH</li> <li>Kiduuma P/S (Kiryanga): dated 23.6.17 for BH</li> </ul> </li> </ul>	<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>	<ul style="list-style-type: none"> <li>All the sampled WSS facilities are well-fenced, indicating respective WSCs are functional</li> </ul>	<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>	<ul style="list-style-type: none"> <li>Environmental screening was conducted for the sampled WSS projects</li> <li>Environment and Social Screening Forms (reports) for the WSS projects, dated October 26, 2017 were prepared by the District Environment Officer (DEO)</li> <li>Mitigation measures/recommendations included planting trees around water sources and setting up water user committees</li> </ul>	<p>2</p>



<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1</li> </ul>	<ul style="list-style-type: none"> <li>Environment and Social Mitigation Certification (ESMC) documents compliance to recommendations during screening</li> <li>For the sampled projects, ESMCs prepared by the DEO were reviewed</li> <li>Compliance to mitigation measures was between 75% and 90%</li> </ul>	<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>	<ul style="list-style-type: none"> <li>BOQs for borehole drilling provide for environmental protection on sites</li> <li>The contract for BH (by KLR) was reviewed and confirmed the above</li> </ul>	<p>1</p>
<p>The district Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If at least 50% WSCs are women and at least one occupying a key position (chairperson, secretary or Treasurer) as per the sector critical requirements: score 3</li> </ul>	<ul style="list-style-type: none"> <li>Of the sampled WSS facilities, women make up at least half of the members of committees</li> <li>All the sampled WSS facilities have a woman or two in key positions – with Treasurer and Secretary roles the most common for women</li> </ul>	<p>3</p>
<p>Gender and special needs-sensitive sanitation facilities in public places/ RGCs provided by the Water Department.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3</li> </ul>	<ul style="list-style-type: none"> <li>Kagadi LG has developed only one public sanitation facility in the last two years</li> <li>The 4-stance lined VIP at Kyaterekera (buly FY 2016/17) is sex-separated, and has ample access for PWDs</li> <li>A new sanitation facility is planned for FY 2018/19 at Paacwa market</li> </ul>	<p>3</p>