



## Local Government Performance Assessment

Kibaale District

(Vote Code: 524)

Assessment	Scores
Accountability Requirements	67%
Crosscutting Performance Measures	55%
Educational Performance Measures	82%
Health Performance Measures	32%
Water Performance Measures	60%

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>LG submitted APR on 24th August 2018 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 02 /01/2018 As per MOFPED Data</p> <p>Quarter 02 14/03/2018 “</p> <p>Quarter 03 19/05/2018 “</p> <p>Quarter 04 24/08/2018 “</p>	<p>No</p>
<p>Audit</p>			
<p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General and the Auditor General's findings for the previous financial year by end of February (PFMA s. 11 2g). This statement includes actions against all find- ings where</p>	<p>From MoFPED's Inventory/record of LG submissions of statements entitled “Actions to Address Internal Auditor General's findings”,</p>	<ul style="list-style-type: none"> <li>• The LG submitted the responses on the Internal Auditor General's report for the FY2016/17 on 23th March 2018 vide CR/251/1. The responses were received on 23th March 2018 by MOFPED,</li> </ul>	<p>Yes</p>

the Internal Auditor and the Auditor General recommended the Accounting Officer to take action in lines with applicable laws.

Check:

- If LG submitted a 'Response' (and provide details), then it is compliant
- If LG did not submit a 'response', then it is non-compliant
- If there is a response for all –LG is compliant
- If there are partial or not all issues responded to – LG is not compliant.

Accountant General, IGG, MOLG and Auditor General.

- Fourteen Consolidated queries were raised and all were responded too and their status clarified as detailed below:

1- Un appraised staff at the District Headquarters.

2-Lack of schedule of duties of staff.

3-Un Accounted for advances of 14,245,000+ 9,719,925+ 4,089,300 +66,069,301+ 359,411,611+49,504,150 & 47,487,150=550,526,437.

4-Delayed Payment of Pension and Salaries.

5-Delay to disburse funds to various sectors.

6-Procurement – delay in awarding contracts and not cautious of Time lines.

7-Failure to obtain information on Salaries and Pensions

8-Youth Livelihood Programme-Recovery rate has improved to 96%.

9-Kisalizi USE Funds Un Accounted for- recovery process on.

10- Teachers absenteeism

11-Management not Monitoring and supervising contracts awarded.

12-Uganda Women Entrepreneurship Programme- Sensitisation and Guidance improved.

13-Secondary Schools – USE Funds Un accounted for and not adhering to USE Guidelines.

		<p>14-Non Remittances of Local Revenue by Lower Local Governments to Higher Local Governments.</p> <ul style="list-style-type: none"> <li>• The LG submitted responses on the Auditor General's report for 2016/17 on 23rd March 2018 which was received on 23rd March 2018 by MOFPED, Auditor General and Parliamentary LGAC.</li> <li>• There was one Query raised. This was explained as below: <ul style="list-style-type: none"> <li>• 1- Failure to implement budget as approved by Parliament – The matter was explained and the shortfall(s) addressed.</li> </ul> </li> </ul>	
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.</p>		<p>The The report from the Auditor General for the FY 2017/18, Local Governments Unqualified Audit Opinion Schedule for Hoima Branch No.38, 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> <p>i. No formal appointment of the Physical Planning Committee, it operates on the basis of the provisions of constituting members as provided in the Act. A communication dated 13th September 2018 from the CAO appointing members to the Physical Planning Committee was provided.</p> <p>ii. A record of the Committee considering new investments was not provided. Only indication of community roads opening by a community.</p> <p>iii. Request to construct Health Unit (HC II) in Kabasekende was found in the “minutes” of the DPPC meeting held on 24th May 2018 under min: KDLG/PPC/15/2018(viii): “Consideration of Land Applications and Building Development Proposals. According to the plans register, it was submitted on 14/02/2018 as Plan No: KDLG/10/018, Good Samaritan HC III, Kabasara, Nyamarwa Scand was inspected on same day but approved on 24th May 2018.</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>• 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 submitted four (4) sets of Minutes of the District Physical Planning Committee Meeting to the Ministry of Lands Housing and Urban Development (Kibaale MZO) as shown hereunder:</p> <p>i. Minutes of meeting held on 20th July 2018, submitted on 12th August 2018.</p> <p>ii. Minutes of meeting held on 24th May 2018, submitted on 10th June 2018.</p> <p>iii. Minutes of meeting held on 17th January 2018, submitted on 31st January 2018.</p> <p>iv. Minutes of meeting held on 20th December 2017, submitted on 11th January 2018.</p> <p>v. Minutes of meeting held on 23rd July 2017, submitted on 04th August 2017.</p> <p>Note: Minutes are submitted from a Committee that is not formerly appointed.</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>• 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>No evidence of action area plan for the previous FY was provided.</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 "Budget Conference Report for FY 2018/19 held on 06th October 2017 as shown hereunder:</p> <p>a) Education:</p> <p>a. Construction of 13 VIP Latrine stances at Nyamarwa SS is a priority as found in the approved AWP FY 2018/19(Page 71) and in the Budget Conference report (Page 14) submitted to CAO on 11/October 2017 .</p> <p>b) Health :</p> <p>a. Procurement and installation of a four compartment fridge for the mortuary at Kibaale HC IV is a priority as found in the approved AWP FY 2018/19(Page 62) and in the Budget Conference report (Pg.13); upgrade of Matala HC II to HC III AWP (Page 63) and Budget conference (Page 13) submitted to CAO on 11/October 2017</p> <p>c) Water:</p> <p>a. Rehabilitation of 12 boreholes as found in the AWP ( Page 89) and in the Budget conference at (Page 19)</p>	<p>2</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 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 13 VIP Latrine stances at Nyamarwa SS as found in the AWP (Page 71) and DDP( Page 364 provides project 3: construction of VIP latrines stances) doesn't have it provided for.</li> </ol> </li> <li>2. Health:       <ol style="list-style-type: none"> <li>a. Procurement and installation of a four compartment fridge for the mortuary at Kibaale HC IV is a priority as found in the approved AWP FY 2018/19(Page 62) and in the Budget Conference report (Pg.13); upgrade of Matala HC II to HC III (AWP (Page 63) AWP (Page 64) in the DDP (Page 361 )</li> </ol> </li> </ol> <p>Water:</p> <ol style="list-style-type: none"> <li>a. Rehabilitation of 12 boreholes as found in the AWP ( Page 89) and the DDP(Page 375 ).</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 were developed and discussed by TPC at its meeting of DTPC held on 04th September 2018 under Min. KDTPC 129/2018/19: Discussion of the project profiles for the development of Projects for FY 2018/2019.</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 20th September 2018 with gender disaggregated data was compiled and presented to the TPC at its meeting of DTPC held on 4th September 2018 under Min. KDTPC 130/2018/19: Discussion on the Draft Annual Statistical Abstract for the District for 2018.</p>	<p>1</p>

<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2</li> </ul>	<p>Not all Infrastructure projects implemented by the LG in the previous FY 2017/2018 were derived from the approved Annual Work Plan and Budget as shown in the sampled projects hereunder:</p> <p>Education:</p> <p>e.g. Construction of a 2 classroom block at Kigaaza Junior PS as found in the AWP (Page 107) and Q4 performance report (Page 67).</p> <p>Health :</p> <p>e.g. construction of a general ward at Kibaale HC IV in Kibaale TC as found in the AWP (Page 105) and Q4 performance report (Page 62).</p> <p>Water:</p> <p>e.g. 22 deep borehole drilling in Bubango(5),Bwamiramira (4), Nyamarwa(1), Kyebando(2), Kasimbi(2), Karama(1), Matale(2), Mugarama (2) as found in the AWP (Page 119) and 17 deep boreholes were drilled as per Q4 performance report (Page 84). <i>The boreholes implemented in total as found in the APR were 25 as opposed to the 22 budgeted found in the AWP. There was no Council approval for the variation.</i></p>	<p>0</p>
<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. <ul style="list-style-type: none"> <li>o 100%: score 4</li> <li>o 80-99%: score 2</li> <li>o Below 80%: 0</li> </ul> </li> </ul>	<p>140 out of 140 investment projects were implemented during the year under review representing 100% performance as found in the AWP and Project completion report (feedback from CAO to LLGs) dated 05th September 2018 for FY 2017/18. E.g. support to 16 youth groups under YLP (as found in the AWP (Page 78) was implemented as found in APR (Page 99).</p>	<p>4</p>

<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2</li> </ul>	<p>According to the APR (Page 2) the domestic development approved budget was UGX. 3,448,055,000/= and the proportion of the budget spent was UGX. 3,075,144,000/= representing 89% performance in absorption.</p>	<p>2</p>
<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has budgeted and spent at least 80% of the O&amp;M budget for infrastructure in the previous FY: score 2</li> </ul>	<p>Budget allocation for O&amp;M in FY 2017/2018 was UGX. 1,082,396, 000/= and expended UGX. 908,158,000/= representing 83.9% 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>	<p>• Evidence that the LG has filled all HoDs positions substantively: score 3</p>	<p>Not all heads of department positions are filled substantively.</p> <p>The District structure as per 2017-2018 provided for 8 Departments, out of which the positions of</p> <p>CFO and</p> <p>Deputy CAO</p> <p>are not filled substantively</p> <p>Those filled substantively are :-</p> <ol style="list-style-type: none"> <li>1- District Engineer- Musinguzi George</li> <li>2- District Community Development officer- Mukasa James</li> <li>3- District Natural Resources officer- Balikuddembe Louis</li> <li>4- District Health officer - Dr Kyamanywa Dan</li> <li>5- District Production and marketing officer- Ssentayi Peter</li> <li>6- District Education officer -Kabyoma John</li> </ol>	<p>0</p>
<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<p>• Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2</p>	<p>e• All HoD's , had been appraised by CAO for the previous FY, as per the guidelines of MoPS (CIRCULAR STANDING INSTRUCTION NO1 OF 2016)</p> <p>Namely:-</p> <ol style="list-style-type: none"> <li>1- District Engineer- Musinguzi George</li> <li>2- District Community Development officer- Mukasa James</li> <li>3- District Natural Resources officer- Balikuddembe Louis</li> <li>4- District Health officer - Dr Kyamanywa Dan</li> <li>5-Deputy CAO- Nsamba Peter</li> <li>6- District Production and marketing officer- Ssentayi Peter</li> <li>7- District Education officer -Kabyoma John</li> <li>8- Chief Finance officer- Ssemate Leonard</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>• All submissions to DSC for recruitment during 2017-2018</li> <li>• Had been considered</li> <li>• Reference made to declaration of vacancies dated 22/9/2017,25/9/2011,22/11/2017 considered under DSC min.157(a)2017</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>• All employees submitted for confirmation had been considered</li> <li>• Reference made to CR/159/1 in relation to DSC meetings on 12th ,13th ,14th , and 15th March 2018</li> <li>• The following Officers personal files were sampled:-</li> <li>• 1-Asiimwe Winston – Enrolled nurse</li> <li>• 2- Karamagi Henry - Askari</li> <li>• 3- Okello Denis – Health Inspector</li> <li>• 4- Kisakye Jane – Nursing officer</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>No single disciplinary case submitted to the DSC in the FY 2017-2018 was considered</li> </ul>	<p>0</p>
<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3</li> </ul>	<ul style="list-style-type: none"> <li>All the staff recruited in previous financial year had accessed the pay roll with 2 months after recruitment. According to staff list and IPPS.</li> <li>Sampled officers were:-</li> <li>1 – Namukisa Immaculate – Secretary to the land board</li> <li>2 – John Byarugaba – Staff surveyor</li> <li>3- kasuku Mathew – Veterinary officer</li> <li></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>Not all pensioners had accessed pensioner's pay roll with in two month, according to the pensioner's soft ware pay roll .</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.193,783,504 as shown in the Draft Financial statements prepared on 29th August 2018, Ref: CR/101/1 and received by the Accountant General on 30th August 2018 and Office of Auditor General of Hoima Branch on 30th August 2018.</li> <li>• Ugx 193,783,504 included a one off transaction of Disposal of Assets worth Ugx 19,000,000, this leaves Ugx 174,783,504 as Actual Revenue for 2016/17. Page 16, Statement of Financial Performance and Page 30, Note 2: Local Revenue of the Final Accounts for FY 2017/18.</li> <li>• The Local revenue collected in FY 2017/18 was UGX. 206,348,942, this is adjusted by reducing the one off of Ugx 33,157,000 raised from Disposal of Assets, this leaves Actual revenue of Ugx 173,191,942.</li> <li>•</li> <li>• The revenue reduced by Ugx 1,591,562 (174,783,504-173,191,942), which translates to 1% decrease. This is less the required range of +5-10% increase, the revenue actually reduced hence the LG was not compliant.</li> </ul>	<p>0</p>
<p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10 %: then score 2. If more than +/- 10 %: Score 0.</li> </ul>	<ul style="list-style-type: none"> <li>• From the Draft financial statements 2017/18, page 16 &amp; 17 Statements of Financial Performance, page 21 Statement of Appropriation Account, page 30 Note 2: Local Revenue, and page 39 on Statement of Revenues Collected during the year, the Original Budget for Local revenue was projected at Ugx 169,380,000 and the Actual local revenue collection realised was Ugx 206,348,942. This translates into a revenue collection ratio of 121.8% which is 21.8% above 100% and is in excess of allowable range of +/- 10% range. The team in charge of revenue budgeting needs to improve so that they can be able to emulate good standard practice of budgeting realistically.</li> <li>• The LG under budgeted so that it can perform in future, which is not good practice.</li> </ul>	<p>0</p>



Local revenue administration, allocation and transparency

Maximum 4 points on this performance measure.

• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2

• Sec 85 of LGA (2) “In rural areas, revenue shall be collected by the sub county councils, and a sub county council shall retain 65 percent, or any other higher percentage as the district council may approve, of the revenue collected by it and pass the remaining percentage over to the district”

• (4) “A district council may, with the concurrence of a sub county, collect revenue on behalf of the sub county council but shall remit 65 percent of the revenue so collected to the relevant sub county.”

• In 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 41,789,750 and a portion based on the number of residents in each LLG that paid (i.e. 28,312,500) was remitted to the LLGs as follows :

- Bubango Sub County 892,125
- Bwamiranimira Sub County 989,625
- Kabasekende Sub County 888,875
- Karama Sub County 643,500
- Kasimbi Sub County 518,375
- Kibaale Town Council 9,383,750
- Kyebando Sub County 1,304,875
- Matale Sub County 1,693,250
- Mugarama Sub County 1,355,250
- Nyamurunda Sub County 2,226,250
- Nyamarwa Sub County 1,791,563
- District 35% 6,625,062
- LG was compliant.

<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 30 (Note 2): Local revenue, collection for 2016/17 was Ugx 193,783,504 adjusted by the one off Disposal of Assets worth Ugx 19,000,000 leaving a Net Revenue of Ugx 174,783,504. (20% of this is Ugx 34,956,000.)</p> <p>The Actual Expenditure on Statutory bodies, page 17 Statement of Financial Performance and page 21 Statement of Appropriation Account, of the Draft financial statements, and Trial Balance, Ugx 446,288,461 was spent in total. This figure includes the GOU Grants to this sector.</p> <p>However the amount spent from Local revenue Funding Source: Local Revenue 03, Vote Cost Centre: 030100, 030600 &amp; 030700 and Expenses Account: Allowances 211103, shows that Ugx 25,322,000 was spent during the year. The LG is on IFMS and we run the Budget vs Actual Report to confirm the spent amount.</p> <p>Thus <math>Ugx\ 25,322,000 / 174,783,504 = 14.4\%</math> is within the allowable limit of 20%. The LG is not spending above 20% and therefore is compliant.</p>	<p>2</p>
<p>Procurement and contract management</p>			
<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2</li> </ul>	<p>The District has the position of a Senior Procurement Officer(Kajuma Dennis) recruited on 02/06/2017 under DSC Min 103/2017.</p>	<p>2</p>
<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <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, 21/11/2017,14/09/2017 and 18/10/2017.</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. Construction of the general ward at Kibaale HC IV was recommended and awarded to ERRI general Investments U Ltd at a contract sum of 270,344,327/= under CC Min.06/11/2017/18(a) during TEC and contracts committee meetings that sat on 10/11/2017 and 21/11/2017 respectively.</li> <li>2. Construction of 5 stance VIP latrine at St. Lwanga Kikaada P/S. was recommended and awarded to Miruda Enterprises Co. ltd at a contract sum of 8,378,000/= under CC Min.08/9/2017/18(F) during TEC and contracts committee meetings that sat on 23/08/2017 and 14/09/2017 respectively.</li> <li>3. Construction of 2 classroom block at Kigaaza Junior P/S. was recommended and awarded to Karukana Enterprises Ltd at a contract sum of 71,375,250/= under CC Min.15/10/2017/18(5) during TEC and contracts committee meetings that sat on 11/10/2017 and 18/10/2017 respectively.</li> <li>4. Construction of phase I water supply system in Kabasekende was recommended and awarded to Olanzicon Services Ltd at a contract sum of 339,929,395/= under CC Min.06/11/2017/18(b) during TEC and contracts committee meetings that sat on 10/11/2017 -14/11/2017 and 21/11/2017 respectively.</li> <li>5. Drilling and installation of 12 deep boreholes was recommended and awarded to KLR U Ltd at a contract sum of 209,795,504/= under CC Min.15/10/2017/18(4) during TEC and contracts committee meetings that sat on 11/10/2017-18/10/2017 and 18/10/2017 respectively.</li> </ol>	<p>1</p>
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The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.

Maximum 2 points on this performance measure.

• 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

a)Whereas the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved budget, some couldn't be traced in the AWP for example;

1. Construction of 4 classroom block at St.Jude Kitutu appears on page 1 of PDU plan, budget under education sector but can't be traced in the AWP.
2. Construction of 5 stance VIP latrines at Kitovu and Bujuni P/Ss appears on page 3 of PDU plan, budget under education sector but can't be traced in the AWP.
3. Construction of piped water system in Kabasekende phase II and Construction of 12 deep boreholes both appear under water sector of PDU plan and budget but can't be traced in the AWP.

b) However, the LG made procurements in previous FY as per plan for example;

1. Construction of the general ward at Kibaale HC IV appears on page 13 of the PDU plan.
2. Construction of 5 stance VIP latrine at St. Lwanga Kikaada P/S. appears on page 3 of the PDU plan.
3. Construction of 2 classroom block at Kigaaza Junior P/S. appears on page 2 of the PDU plan.
4. Construction of phase I water supply system in Kabasekende appears on page 24 of the PDU plan.
5. Drilling and installation of 12 deep boreholes appears on page 26 of the PDU plan.

<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 and submitted for approval to DCC on the following dates;</p> <ol style="list-style-type: none"> <li>1. Construction of 4 classroom block at St.Jude Kitutu – 09/08/2018</li> <li>2. Construction of piped water system in Kabasekende phase II – 09/08/2018</li> <li>3. Construction of 12 deep boreholes – 18/07/2018</li> <li>4. Construction of 5 stance VIP latrines at Bujuni P/S – 30/08/2018</li> <li>5. Construction of 5 stance VIP latrines at Kitovu P/S – 30/08/2018.</li> </ol>	<p>2</p>
<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2</li> </ul>	<p>Whereas the LG had an updated contracts register, some procurement files for implemented projects didn't have complete procurement activity For example; Construction of the general ward at Kibaale HC IV and Construction of phase I water supply system in Kabasekende didn't have completion certificates issued by the District Engineer and Water officer respectively.</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. Construction of the general ward at Kibaale HC IV – Contract sum-270,344,327/= - open bidding</li> <li>2. Construction of 5 stance VIP latrine at St. Lwanga Kikaada P/S. – Contract sum-8,378,000/= - selective bidding.</li> <li>3. Construction of 2 classroom block at Kigaaza Junior P/S. – Contract sum -71,375,250/= - open bidding</li> <li>4. Construction of phase I water supply system in Kabasekende – Contract sum -339,926,395/= - open bidding.</li> <li>5. Drilling and installation of 12 deep boreholes – Contract sum-209,795,504/= - open 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 for all projects based on technical supervision: score 2</li> </ul>	<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. Construction of the general ward at Kibaale HC IV – Engineer issued interim certificates on 12/06/2018,22/05/18,18/06/18 and 06/03/18.</li> <li>2. Construction of 5 stance VIP latrine at St. Lwanga Kikaada P/S. - Engineer issued interim and completion certificates on 11/01/2018 and 11/01/2018 respectively.</li> <li>3. Construction of 2 classroom block at Kigaaza Junior P/S. - Engineer issued interim and completion certificates on 18/06/2018 and 18/06/2018 respectively.</li> <li>4. Drilling and installation of 12 deep boreholes - Engineer issued interim and completion certificates on 24/04/2018 and 16/04/2018 respectively.</li> <li>5. Construction of phase I water supply system in Kabasekende. - Engineer issued interim certificates on 12/04/2018, 22/06/2018,23/06/2018 and 25/06/2018</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 for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2</li> </ul>	<p>There was no project implemented yet at the time of assessment.</p>	<p>0</p>
<p>Financial management</p>			
<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <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 hadn't prepared Bank reconciliations for July and August 2018 for all its Bank Accounts at the time of assessment.</li> <li>The June reconciliation was prepared on the dates indicated below: <ul style="list-style-type: none"> <li>Kibaale D General Fund Account-2/8/2018</li> <li>Kibaale D TSA – 24/8/2018</li> <li>Kibaale DLG Unicef – 12/7/2018</li> <li>Kibaale D Youth Livelihood -12/7/2018</li> <li>Kibaale D YLP Revolving Fund -12/7/2018</li> <li>Kibaale D UWEP Recovery -12/7/2018</li> <li>Kibaale D UWEP Enterprises- 12/7/2018</li> </ul> </li> <li>The two main Accounts were not reconciled on time (LGAFR Sec. 73) and the LG is not up-to-date on July and August reconciliations.</li> <li>The LG is on IFMS and on running the General Ledger Reconciliation Summary Report, all the Seven Bank Accounts had not been reconciled up to date.</li> </ul> <p>The LG is not compliant.</p>	<p>0</p>

<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• If the LG makes timely payment of suppliers during the previous FY – 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 237,023,308 and Water and Sanitation Department worth Ugx 295,622,146. 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 District Internal Auditor. In the names of Namagembe Regious who was appointed on 25/6/2018 under minute DSC Min.38/2018.</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 30/01/2018</p> <p>Quarter 3 on 30/04/2018</p> <p>Quarter 4 on 31/07/2018</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 only two quarterly reports on the following dates:</p> <p>Quarter 1 PAC Sitting on 2/11/2017</p> <p>Quarter 2 PAC sitting on February 2018</p> <p>Quarter 3 PAC Not yet reviewed</p> <p>Quarter 4, PAC Not yet reviewed.</p> <p>The LG PAC has produced only two Report(s) for the first two Quarters, on 3rd April 2018 and this was after five months after the meetings took place.</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 30/01/2018</p> <p>Quarter 3 on 30/04/2018</p> <p>Quarter 4 on 31/07/2018</p> <p>The LGPAC has reviewed only two Quarters. The first and second quarters on 2nd November 2017 and February 2018.</p> <p>Not reviewing Quarterly reports in a timely manner is making the role of PAC as an Accountability organ very irrelevant.</p> <p>The LGPAC needs to improve on its performance so that they can contribute positively as an Accountability arm of the District as by law established.</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 maintains an Asset register as per format in the Accounting Manual though it's not updated. All the Assets acquired during the FY2017/18 were not posted in the Register at the time of assessment. All additions during the year, from the Draft financial statements (Page 32 Note 8: Consumption of Property, Plant and Equipment (Fixed Assets) and page 48 of : Summary statement of stores and other assets (physical assets) as at end of the year- June 2018) detailed below were not included :</li> <li>Non Residential Buildings Ugx975,515,419, Residential Buildings Ugx 4,724,637</li> <li>Roads and Bridges Ugx 358,022,638, Other Machinery and Equipment Ugx 1,229,900,460 and Furniture and fittings Ugx 3,377,592 all cumulatively totalling Ugx 2,571,540,746.</li> <li>The LG was not compliant.</li> </ul>	0
<p>The LG has obtained an unqualified or qualified Audit opinion</p> <p>Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY:</p> <ul style="list-style-type: none"> <li>Unqualified audit opinion: score 4</li> <li>Qualified: score 2</li> <li>Adverse/disclaimer: score 0</li> </ul>	<p>The report from the Auditor General for the FY 2017/18, Local Governments Unqualified Audit Opinion Schedule for Hoima Branch No.38, for December 2018.</p>	4
<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 met and discussed service delivery related issues. At the 7th Council meeting held on 10th November 2017, it met and discussed service delivery issues e.g. under Min. 68/KDLC/11/2017: Motions from Government(5)- presentation AND APPROVAL OF SUPPLEMENTARY BUDGET estimates of revenue and expenditure for financial year 2017/18. A supplementary budget of UGX. 839,044,735/= was approved and among others provided for the allocation of UGX. 714,596,489/= funded by UTISEP from the supplementary incomes.</p>	2

<p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> <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. Nyanzi Kizito/ Senior Labour Officer/ Ag. Public Relations Officer dated 23rd July 2018.</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 system as found displayed on the Administration and Planning Unit notice boards.</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 were not found on display. Only notices indicating staff that had missed salaries or had been given supplier numbers on IFMS were found on display at the administration block.</p>	<p>0</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the procurement plan and awarded contracts and amounts are published: score 1.</li> </ul>	<p>No procurement plan was found on display only awarded contracts were found on display at the PDU notice board.</p>	<p>0</p>

<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG performance assessment results and implications are published e.g. on the budget website for the previous year (from budget requirements): score 1.</li> </ul>	<p>LG published the performance assessment results for FY 2016/17 as evidenced by the dissemination notice by the CAO dated 5th September 2018 found on the Planning Department notice board.</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 on training of LLG on the Planning function held on 9th January 2018 under the cover of letter submitting a report to the CAO dated 9th January 2018. The training amongst others covered, preparation of budgets at LLGs, disseminating DDEG 2018/19 grant budget and implementation guidelines.</p>	<p>1</p>
<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that LG during the previous FY conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc.) with the public to provide feed-back on status of activity implementation: score 1.</li> </ul>	<p>LG conducted discussions with the public to provide feedback through Baraza conducted at Hakasalaba Trading Centre in Matale Subcounty held on 18th December 2017 as evidenced by a report prepared by the Senior Planner Kibaale and submitted to CAO under cover letter dated 19th Deember 2017. Various Heads of Department provided updates on the implementation of various programmes. They provided feedback on search matters as poor performance by Government schools, upgrading of Kibaale HC IV to a general Hospital.</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>There were no activity reports or minutes of any meeting presented to ascertain that the gender focal person and CDO had provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities.</p>	<p>0</p>
<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the gender focal point and CDO have planned for minimum 2 activities for current FY to strengthen women's roles and address vulnerability and social inclusions and that more than 90 % of previous year's budget for gender activities/ vulnerability/ social inclusion has been implement-ted: score 2.</li> </ul>	<p>From the approved AWP page 102 &amp; 103, activities to strengthen women's roles and address vulnerability and social inclusions were planned for, i.e</p> <ol style="list-style-type: none"> <li>1. They planned to train women leaders in gender mainstreaming and leadership.</li> <li>2. The 3 marginalized group structures will be trained in promoting gender and local democracy.</li> </ol> <p>Under gender mainstreaming, the LG budgeted for 4M and spent 100%.</p>	<p>2</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 1</li> </ul>	<p>Environmental screening was done for some projects and not done for many of the projects implemented last FY. For example; it was done on Construction of the general ward at Kibaale HC IV on 31/05/2017, Drilling and construction of boreholes(22 places screened) on 17/04/2018, construction of Bubamba P/s, Construction of VIP latrines in Kigaaza and Nyamarwa P/S but it wasn't done for the following projects; Construction of VIP latrine at St. Lwanga Kikaada P/S, Construction of 2 classroom block at Kigaaza Junior P/S, Construction of Phased water supply system in Kabasekende. 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 the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1</li> </ul>	<p>From the contract bid documents, it was established that the LG integrates environmental and social management and health and safety plans, See examples below;</p> <ol style="list-style-type: none"> <li>1. Construction of the general ward at Kibaale HC IV – They provided for site clearing, leveling, lightening arrestors and fire fighters.</li> <li>2. Construction of 5 stance VIP latrine at St. Lwanga Kikaada P/S– They provided for a Hand washing facility.</li> <li>3. Construction of 2 classroom block at Kigaaza Junior P/S. – They provided for lightening arrestors.</li> <li>4. Drilling and installation of 12 deep boreholes– They provided for Tree and grass planting.</li> <li>5. Construction of phase I water supply system in Kabasekende – They provided for all head, apron and soak away, planting grass around the source and excavation of cut off drainage.</li> </ol>	<p>1</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1</li> </ul>	<p>Apart from the MoU seen between Hoima Diocese and the LG dated 11/02/1999 for Nyamarwa P/S and another between the late Matia Kagoro's family for Bubamba P/S, for the rest of the other implemented projects, there was no proof of land ownership provided.</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>For all the implemented projects, there was no Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO.</p>	<p>0</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the contract payment certificated includes prior environmental and social clearance (new one): Score 1</li> </ul>	<p>All the contract payments certificated did not 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>Reports dated 28/03/2018 and 28/06/2018 authenticated by the Environment officer alone were viewed for projects. i.e. Construction of phased water supply system in Kabasekende and Drilling and installation of 17 deep boreholes respectively with environmental checklists, deviations observed with pictures, corrective actions indicted but the social aspects by the gender focal person were not catered for.</p> <p>The same was not seen for all the other implemented projects.</p>	<p>0</p>



Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4</li> </ul>	<ul style="list-style-type: none"> <li>According to the performance contract pg14 and the approved budget, pg 32. FY 2018/2019, the LG budgeted for primary teaching services, with a wage bill of 3.8bn for 49 government aided p/schools.</li> <li>The staff lists from DEOs office indicate a total of 452 teachers in 49 schools. On average <math>452/49=9</math> teachers</li> </ul>	4
<p>The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school (or minimum of a teacher per class for schools with less than P.7) for the current FY: score 4</li> </ul>	<ul style="list-style-type: none"> <li>Basing on random sampling done on the staff deployment list, the department meets minimum standards as indicated in the following schools against their teachers:  Bujera p.6 sch- 7, Igayaza p.7 sch- 8, Karama p.7 sch- 9, Kibogo p.7 sch- 8, Kisojo p.7 sch- 8, Mutagata p.7 sch- 8, Nyamugura p.7 sch- 8, Kikada p.7 sch- 9, and Nyamarunda p.7 sch- has 8.</li> <li>From the above data from schools staff lists, every school has a head teacher and a minimum of 7 teachers, as also indicated below, is the 4 government schools sampled to check for deployment: (Key:- SL- Staff List, and PV- Physical verification on ground.)  - Kikangara- SL 8- PV 8,  - Kigaaza- SL 8- PV 8,  - St Lwanga Kikada- SL 9- PV 8,  - Igayaza- SL 8- PV 8.</li> <li>All sampled schools conform to minimum standards.</li> </ul>	4

<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has filled the structure for primary teachers with a wage bill provision <ul style="list-style-type: none"> <li>o If 100%: score 6</li> <li>o If 80 - 99%: score 3</li> <li>o If below 80%: score 0</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• The department approved structure given the wage bill stands at 452; while the staff lists from DEOs office indicate ceiling realized with a wage bill for 452 teachers.</li> <li>• <math>452/452*100= 100\%</math></li> </ul>	6
<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 staff structure of the department basing on Correspondence. ARC 6/293/05, on 12/12/2016 to MoPS; Requesting clearance to recruit in reference to letter dated 5/11/2016: 1 post of DIS, and 2 inspectors of school as per the structure.</li> <li>• All 3 positions of inspectors are now dully filled.</li> <li>- By names 1. Inspector- Busobozi Lilian</li> <li>- 2. Inspector- Taragaboine John</li> <li>- 3. Senior inspector- Kidandi Lawrence</li> </ul>	6
<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 LG department has reached the ceiling for the approved structure for primary teachers, and school inspectors.</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 LG department has reached the ceiling for the approved structure for primary teachers, and school inspectors.</li> </ul>	<p>2</p>
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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>The 3 schools inspectors had been appraised by CAO ( The structure provides for 3 schools inspectors).</p>	<p>3</p>
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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.

Maximum 6 for this performance measure

Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY

- Primary school head teachers o 90 - 100%: score 3
- o 70% and 89%: score 2
- o Below 70%: score 0

All primary school head teachers had been appraised by the DEO

10 Primary school head teachers files were sampled out of 49 namely:-

- 1 – Mugenyi Taddeus – Nyamugura P S
- 2 – Asimwe Joice – St Lwanga Kikaada
- 3 - Biikara Teddy – Igayaza P S
- 4 Mazaki Rogers – Kitooma P S
- 5 Mugennyi Gerald – Kabasara P S
- 6 Asimwe Rosemary – Kisojo P S
- 7 Mulira Joseph – Rwabyoma P S
- 8 Namukisa Anna – Kasambya P S
- 9 Nabbosah Robinnah – Kitovu PS
- 10 Nakimpi Noeline – Nyamarwa P S

The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools

Maximum 3 for this performance measure

• 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

• Circulars and Guidelines that were communicated FY 2017/2018 include;

1. Closure of Unlicensed and unregistered schools; dated 22/9/2017, signed by PS. MOES
2. MDD; Circular no.04/2018. National primary schools performing Art festival syllabus for 2018, signed by PS. MOES.
3. Ensuring teachers presence at school through enforcing rewards and sanctions, dated 26/6/2017, signed by PS. MOES.
4. Primary schools national balls games and Special Needs Education championship, dated from 27/8 - 3/9/2018, signed by PS. MOES.
5. Teachers presence and time on task, dated September, 2018.
6. Circular on Access, Equity, and crosscutting issues in schools, dated 20/8/2018.

• Among the school sampled and visited, the following circulars were found disseminated (Key for circulars- as serialized above)

- Kikangara p/s- 2, 6,
- Kigaaza- 2, 5
- Igayaza- 3, 6, 5,
- St Lwanga Kikada- 1, 3, 5, 6,
- Alpha and Omega private p/s- 1, 6.

<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level: score 2</li> </ul>	<p>Department mechanism for disseminating circulars is by meetings at beginning of term, Radio programs, and re-writing circular to head teachers.</p> <ul style="list-style-type: none"> <li>• At Bwamuramira community hall, on 7/2 2018: DEO meeting with head teachers emphasized that Kibaale was selected in the district among others to benefit from ball game.</li> <li>• Circular from DEOs office disseminating: To all Head teachers; Ref: Uganda primary schools performing arts festival syllabus for 2018; dated 17/4/2018.</li> <li>• Department meeting with Head teachers on 26/9/2018; Min. 007/09/2017: DEOs emphasis on circulars of closure of un registered and un licensed schools; dated 22/9/2017.</li> <li>• Department- Head teachers meeting on 7/2/2017, Min. 006/02/2017: remarks from DEO; Head teachers registered to supervise all teachers at least once a week while in lessons and record the teachers attendance and time on task</li> </ul>	<p>2</p>
<p>The LG Education De- partment 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 LG operate 49 government aided and 24 licensed/ registered schools, totaling to 73 schools all together.</li> <li>- Inspection report for Term 3, 2017, dated on 15/12/ 2017 indicate a total of 72 schools.</li> <li>- Inspection report for term 1, 2018, dated on 6/4/2018, and submitted to CAO; on 8/5/2018 indicate 73 schools.</li> <li>- Report for term two 2018. Dated on 24/8/2018, indicate 66 schools</li> <li>• Average inspection per term <math>(72+73+66)/3=70</math>. Then <math>70/73*100=96\%</math></li> </ul>	<p>10</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>• Inspectors report Oct 2017, indicating poor daily attendance by teacher Kyaligonza Teddy of Kitutu parents school.</li> <li>- Departmental meeting on 20/10/2017, forwarded her for disciplinary action by Rewards and sanctions committee.</li> <li>- Invitation letter to appear before rewards and sanctions committee on 24/10/2017, signed by Principal Human resource officer.</li> <li>- Under Min. 7/11/2017, district rewards and sanctions committee on 6/11/2017, issued a warning letter to Teddy Kyaligonza</li> <li>• Inspectors report Aug 2017: Private schools depend on untrained teachers.</li> <li>- Departement meeting on 25/8/2017, Min. 15/8/2017: Meetin with private schools to be convened on basic requirement and minimum standards</li> <li>- On 11/11/2017; Radio programme on Emambya and KCR radio to sensitize parents on basic requirement and minimum standards for schools where to take their children for education.</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 term1, was submitted to DES on 11/5/2018, and from 4 acknowledgement letter issued by Winnie Kirenda , secretary Des.</li> <li>• Report for term 2, 2018 was submitted and received on 24/11/2018, by DES secretary.</li> <li>• And term 3 2017 was submitted and received on 8/1/2017, by DES secretary.</li> </ul>	<p>2</p>

<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the inspection recommendations are followed- up: score 4.</li> </ul>	<ul style="list-style-type: none"> <li>• At Kigaza p/s, inspectors recommendations on 14/2/2018, about strengthening lesson planning and scheming.</li> <li>- On 23/2/2018; H/teacher- staff meeting with emphasis to teachers to continue scheming and lesson planning through the term.</li> <li>• Inspector’s comments on 13/10/2017to Igayaza p/s, about Pupils absenteeism.</li> <li>- SMC meeting Min 8/2017, members emphasized to sensitize parents, on sending their children regularly and always.</li> <li>- Daily roll call registers introduced.</li> </ul>	4
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <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>	<ul style="list-style-type: none"> <li>• The PBS data list of schools submitted to MOFPED for processing of UPE grants indicates 49 government aided schools.</li> <li>• The list of schools with EMIS numbers got from MOES; also indicate 49 schools; which is consistent with LG census.</li> </ul>	5
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<p>Evidence that the LG has submitted accurate/consistent data:</p> <ul style="list-style-type: none"> <li>• Enrolment data for all schools which is consistent with EMIS report and PBS: score 5</li> </ul>	<ul style="list-style-type: none"> <li>• Enrollment at DEOs office basing on statistics captured and submitted for budgeting FY 2017/2018 for government aided schools, indicate 16,286 pupils;</li> <li>• However, the enrollment figures from MOES data indicate 16,051;- which is not consistent with LG enrollment at the department.</li> <li>• However, complaints from department claims, that school’s enrollment census for FY was not done by MEOS .</li> </ul>	0
Governance, oversight, transparency and accountability			



<p>The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc. during the previous FY: score 2</li> </ul>	<p>At the Sitting of the Works, Education, Health, Community and Security Services Committee meeting held on 22/02/2018, the Committee discussed service delivery issues under Min. 49/GPC/02/2018(2): Reports from HODS/SECS (Pg.3). It considered among others meeting of head teachers and deputies of Government aided primary schools on effective running of schools, training of all primary three teachers for one week at Bulera Core PTC on early grade reading methodology and UNEB results of 2017(Pg.3).</p>	<p>2</p>
<p>The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the education sector committee has presented issues that require approval to Council: score 2</li> </ul>	<p>At the 7th Council sitting held on held on 06th March 2018 under Min. 85/KDLC/03/2018: Recommendation from Standing Committees., the Committee recommended for Council's approval the absorption of eight (8) staff from IDI whose contracts were about to expire if funds were available.</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 (estab- lished, meetings held, discussions of budget and resource issues and submission of reports to DEO/ MEO)</p> <ul style="list-style-type: none"> <li>• 100% schools: score 5</li> <li>• 80 to 99% schools: score 3</li> <li>• Below 80 % schools: score 0</li> </ul>	<p>Basing on the sampled schools (i.e. Kikada, Igayaza, Kigaaza, Kikangara, and Alpha and Omega)</p> <ul style="list-style-type: none"> <li>• All had SMCs established under council committee for education approval Min.30/KDLC/11/2016, on 1/11/2016 and and appointed by DEO under the guidelines in the Education ACT, Second schedule S.3-6. Pg 48.</li> <li>• The functionality of SMCs is considered by minutes of meetings, and discussions about resource/ developmental issues as follows; <ul style="list-style-type: none"> <li>• -Kigaaza Term 3 meeting 2017 on15/Nov; Min 4/2017; Accountability of UPE grant for 3rd term.</li> <li>- Term 2, 2018, on 14/7; Min.20/2018; Parents should fundraise for for new classroom block construction.</li> <li>- Term 1, 2018, on 26/2, Min. 3/2018; Declare receipt of UPE fund and budget passed. (3/3 meetings a year)</li> </ul> </li> </ul>	<p>3</p>

		<ul style="list-style-type: none"> <li>• Igayaza term 3, 2017; Min. 21/2017; Present and approve school budget for 2017/2018.</li> <li>- Tem 1, 2018, on 7/3; Min. 3/3/2018; Discuss budget and release of UPE.</li> <li>- Term 2, 2018, on 2/8; Min, 2/2018; Report for UPE funds. (3/3)</li> <li>• Kikangara term 3, on 5/12/2027; Min 7/12/2017; Way forward for funds for next academic year.</li> <li>- Term 1, on 26/2/2018; Min.4/2/2018; Accountability for funds</li> <li>- Term 2 on 13/6/2018; Min. IV/13/6/2018; Finance report. (3/3)</li> <li>• ST Lwanga Kikada term 3, on 23/10/2017; Min. 38/8/2017; Accountability for UPE and PTA funds.</li> <li>- Term 1, on 27/4/2018, Min. 43/10/2017; Accountability for PTA collection and expenditure.</li> <li>- Term 2, on 22/8/2018; min. 5/3 2018; Income – expenditure for previous term. (3/3)</li> <li>• ALPHA and OMEGA Karuguuza term 3, on 20/11/207; Min. 004/11/2017; Discussed about parents contribution for lunch and fees structure for next term. (1/3)</li> <li>• Analysis on meetings, (3/3+3/3+3/3+3/3+1/3)* 100 = 87%</li> </ul>	
<p>The LG has publicised all schools receiving non- wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has publicised all schools receiving non-wage recurrent grants</li> </ul> <p>e.g. through posting on public notice boards: score 3</p>	<p>Schools receiving capitation grants were displayed on both department and on administration block indicating FY 2017/2018 for all quarters, stamped and dated on 14/8/2018.</p> <ul style="list-style-type: none"> <li>• However schools sampled for posting also displayed releases in staff rooms; e.g</li> <li>• Igayaza received 1.54m, for all terms.</li> <li>• Kikangara received 1.4m, for all terms.</li> <li>• St Lwanga Kikada received 1.5m, for all terms.</li> <li>• Kigaaza received 1.3 for all terms</li> </ul>	3
Procurement and contract management			

The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements,

to the Procurement Unit that cover all items in the approved Sector annual work plan and budget

Maximum 4 for this performance measure

- Evidence that the sector has submitted procurement input to Procurement Unit that covers all investment items in the approved Sector annual work plan and budget on time by April 30: score 4

- All projects implemented, were extracted from LG approved AWP for 2017/2018, as pg 49-50 indicates : (Three project sampled)

- 2 classroom block planned at Kigaaza

- 5 stance latrine planned for ST. Lwanga Kikada p/s.

- Planned supply and delivery of 36 desks for Kigaaza p/s.

From the approved LG department budget, the above projects were check for procurement requisitions:

- Form LGPP 1, Procurement requisitions for FY 2017/2018; Construction project for Kigaaza classroom block worth 78.5m, was initiated and signed by inspector of schools and DEO on 14/7/2017; and CAO on 17/7/2017.

- Procurement requisition, for 5 stance latrine at ST Lwanga Kikada worth 8.5m were initiated and signed by sports officer and DEO on 14/7/2017; and then CAO on 17/7/2017.

- Procurement requisitions for supply and delivery of 36 desks for Kigaaza p/s worth 4.86m, initiated by Senior education officer and DEO on 14/7/2017 and then CAO on 17/7/2017. Finally submitted to PDU.

- All projects submitted to PDU before 30TH April 2017/18.

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 during the year to various vendors worth Ugx 237,023,308, which was spent on Construction of a Science Block at St Kirigwajo SSS in Kibaale Town Council: Molecule Investments (U) Ltd.</li> <li>• Doto Logistics Ltd: Construction of 5 stance VIP Latrines with urinal facility at St Charles Kigaaza Junior Primary School in Bwamirama Sub County, St Peters Burozi Primary School in Nyamarunda Sub County and Mutagara Primary School in Kyabando Sub County.</li> <li>• Mirunda Enterprises Co. Ltd; Construction of 5 stance VIP Latrine at St Lwanga Kikaade Primary School.</li> <li>• Karukana Enterprises Ltd: Construction of 5 stance VIP Latrine with Urinal at Nyamarwa SSS IN Nyamarwa Sub County.</li> <li>•</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>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 13th August 2018.</p>	<p>0</p>

<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</li> <li>o If sector has no audit query</li> <li>score 4</li> <li>o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2</li> <li>o If all queries are not responded to score 0</li> </ul>	<p>Ten Queries</p> <ul style="list-style-type: none"> <li>• (1) Non Accountability of advance worth 10,896,100. Responded 16/3/2018.</li> <li>• (2) Display of Financial information by St Jude Kitaba Primary School. Responded on 24/09/2018</li> <li>• (3)Karama Primary School operating without budget. No Response.</li> <li>• (4)Karama Primary School no minutes of Finance Committee. No Response.</li> <li>• (5)Karama Primary School unaccounted for ugx 1,460,000 No response.</li> <li>• (6)Karama Primary School and Kitutu Primary School– Absenteeism. No Response.</li> <li>• (7) Non remittance of NSSF by Kibeedi Secondary School. Responded on 28/5/2018.</li> <li>• (8) Un Accounted funds- Kibeedi SSS- 3,875,000. Responded on 28/2/2018.</li> <li>• (9) Non Remittance of NSSF- Kisaalizi SSSS. Responded 15/3/2018.</li> <li>• (10) Education Office Un Accounted funds 30,000,500. Responded on 24/9/2018.</li> <li>•</li> </ul> <p>Four issues were not responded too by Karama and Kitutu Primary Schools the time of Assessment.</p>	<p>0</p>
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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 disseminated in consultation with gender focal person include;</p> <ul style="list-style-type: none"> <li>• Circular from DEOs on 20/8/2017: To all Head teachers; Ref: Access, Equity, and crosscutting issues in schools; Managing menstruation; Help girls stay in school during menstruation, signed by DEO.</li> </ul>	<p>2</p>
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• UNICEF funded activity May 2018, Career guidance in schools; The department in collaboration with gender focal person- Senior Probation , social and welfare officer conducted community dialogue meeting with community adolescents (in and out of schools) on early pregnancies, child marriages, as well as identification, prevention, reporting, referral and response to violence.</li> <li>• Circular from DEO on concept document, dated 8/2/2018; To all head teachers and teachers of sanitation in schools: Dissemination training on Water, Sanitation and Hygiene (WASH) activities in schools, 21-22 Feb 2018.</li> <li>• Report on training workshop for H/teachers and teachers of sanitation on WASH activities in schools held at Bwamiramira community hall, Feb 2018.</li> </ul>	<p>2</p>

<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the School Management Committee meets the guideline on gender composition: score 1</li> </ul>	<p>SMCs in Kibaale LG do not meet gender guidelines, as evidenced with results of Kikangara p/s in the sampled schools below.</p> <ul style="list-style-type: none"> <li>• Kikangara has 1 female out of 6 founding members.</li> <li>• St. Lwanga Kikada- 2/6</li> <li>• Kigaaza- 4/6</li> <li>• Alpha and Omega- 2/6</li> <li>• Igayaza- 2/6</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>	<ul style="list-style-type: none"> <li>• Report from Natural resources department, dated 2/6/2018; Meeting on Environmental education held at ST. Kirigwajo and Buyanja Sec school to create and promote awareness for sustainable use of natural resources. Signed, Environment Officer.</li> <li>• Circular; To all head teachers: Ref; Tree planting in FY 2017/2018, dated 18/6/2017. Signed by DEO.</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>• The project at Kigaaza primary school classroom construction was screened by senior environment officer, signed and dated on 15/6/2017, and for latrine construction, signed on 22/6/2017.</li> <li>• Environmental management plan for mitigating project impacts on construction of classroom block was done and signed by Environmental officer on 20/4/2018.</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>• The environmental officer and community development officer have visited the sites to check whether the mitigation plans are complied with: Score 1</li> </ul>	<p>Environmental, Social, health, and safety supervision report for classroom and latrine construction of projects was signed on 20/5/2018, by Sub county focal person.</p>	<p>1</p>
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Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>LG has substantively recruited primary health care workers with a wage bill provision from PHC wage</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY</p> <ul style="list-style-type: none"> <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 staffing structure provides for 128 posts (Including DHO's Office &amp; 1 Town Council) to operate at 100% capacity.</li> <li>• Staff list by facility, dated 11/9/2018 was availed by the DHO. It indicated 126 posts filled and 2 posts vacant in relation to the approved MoH staffing norms. This is 98.4% filled</li> <li>• MoH external job-advert in NEW VISION, Monday, January 22, 2018 for different Local Governments was availed. Deadline for submission of applications was not later than Friday 22nd February, 2018. 7 posts were advertised.</li> <li>• Approved Wage bill IPFs FY 2018/19 obtained from Planning Office indicated UGX 1,790,700,165 annual wage.</li> </ul>	8
<p>The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of primary health care workers: score 6</p>	<ul style="list-style-type: none"> <li>• Recruitment Plan FY 2018/19 and submission letter were not availed by the DHO at the time of assessment</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>All the 5 health unit in charges had been appraised by DHO for the FY 2017-2018</p> <p>Namely:-</p> <ol style="list-style-type: none"> <li>1 – Dr Ssekate Katambula – Appraised on 9/1//2018</li> <li>2 – Businge James – Appraised on 30/6/2018</li> <li>3 – Senyombi Fred – Appraised on 7/8/2018</li> <li>4 – Nakimpi Harriet – Appraised on 2/7/2018</li> <li>5 – Mukasa Albert – Appraised on 30/6/2018</li> </ol>	<p>8</p>
<p>The Local Government Health department has deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Health department has deployed health workers in line with the lists submitted with the budget for the current FY, and if not provided justification for deviations: score 4</li> </ul>	<p>2 out of the 5 sampled facilities had deviations in the staff deployed and no justification was given for this at the time of assessment.</p> <ul style="list-style-type: none"> <li>• 5 Gov't facilities (1HCIV, 3HCIII, 1HCII) exist in the district where staff that receive PHC Wage are deployed</li> <li>• Matale HCII staff duty roster was availed with 10 staff recorded as attached to the facility. The staff list availed at DHO's office, dated 11th September 2018, recorded 10 staff as attached to this facility.</li> <li>• Nyamarwa HCIII staff list was availed with 17 staff recorded. Staff list at DHO's office, dated 11th September 2018, also had 17 staff deployed to this facility.</li> <li>• Mugarama HCIII staff list was availed with 19 staff attached. DHO's staff list dated 11th September 2018 recorded 19 staff deployed to this facility</li> <li>• Kyebando HCIII staff list availed had 20 staff recorded as attached. Staff list availed at DHO's office dated 11th September 2018 indicated 19 staff as deployed to this facility</li> <li>• Kibaale HCIV staff list dated 1st July 2018 availed had 43 staff recorded. Staff list availed at the DHO dated 11th September 2018 had 50 staff recorded as deployed to this facility.</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 were availed.</li> <li>No evidence from the DHO to show communication of the guidelines 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>	<p>In spite of the fact that the quarterly supervision reports indicated that the HCIV had been visited, they never provided enough proof in form of a precise record on the gaps found at the visited facilities and the recommendations made in line with the gaps. Furthermore, there was a discrepancy in the reporting and activity dates in the Q1 report.</p> <ul style="list-style-type: none"> <li>• The district has 1 HSD (Buyanja HSD) and the total number of HFs (Including PNFPs) that receive PHC NWR are 7 (Gov't – 1HCIV, 3HCIIIs, 1HCIIIs &amp; PNFP - 1HCIII, 1HCII).</li> <li>• Q1 integrated support supervision report dated 13th October 2017 was availed which recorded the HCIV among other facilities to have been visited. However, the introduction records the activity to have been done later than the reporting date i.e. 18th to 22nd December 2017.</li> <li>• Q2 integrated support supervision report dated 20th December 2017 was availed. It indicated that the HICV was among the facilities supervised.</li> <li>• Q3 integrated support supervision report dated 12th April 2018 was availed. It recorded that all facilities were supervised but never precisely mentioned them to prove among others that the HCIV was supervised.</li> <li>• Q4 integrated Support Supervision report dated 4th July 2018 was availed. It was reported that all government and PNFP facilities had been visited. However, it didn't provide enough information to prove that the HCIV was supervised.</li> </ul>	<p>0</p>
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<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT/MHT has ensured that HSD has supervised lower level health facilities within the previous FY:</p> <ul style="list-style-type: none"> <li>• If 100% supervised: score 3</li> <li>• 80 - 99% of the health facilities: score 2</li> <li>• 60% - 79% of the health facilities: score 1</li> <li>• Less than 60% of the health facilities: score 0</li> </ul>	<ul style="list-style-type: none"> <li>• No evidence was availed, at the time of assessment, to show that the DHT ensured that HSD had supervised lower level facilities.</li> <li>• No support supervision reports were availed by the in-charge of Kibaale HCIV</li> <li>• Kibaale HCIV received UGX 16,486,317 in FY 2017/18 as per the MoH approved IPFs.</li> <li>• The facility annual work plan FY 2017/18 availed by the facility in-charge at the time of assessment revealed that the activity for support supervision had not been planned for.</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>	<p>The health department made an effort to discuss the reports and make a few recommendations during the DHMT meetings though action points for corrective actions were never recorded in the minutes. Furthermore, the HSD never conducted support supervision hence, didn't have any reports to discuss in their staff meetings</p> <ul style="list-style-type: none"> <li>• Q1 DHMT minutes for meeting held on 13th October 2017 were availed. Agenda 4 was "Discussion of support supervision report". The report was discussed under Minute 4/Quarter 1/2017/18.</li> <li>• Q2 DHMT minutes for meeting held on 10th January 2018 were availed. Agenda 6 was "Discussion of support supervision reports". The supervision results were discussed under Minute 6/Quarter 2/2017/18.</li> <li>• Q3 DHMT minutes for meeting held on 3/04/2018 were availed. Agenda 4 was "Discussion of support supervision report". The supervision reports were discussed under Minute 4/Quarter 3/2017/18.</li> <li>• Q4 DHMT minutes for meeting held on 13/7/2018 were availed. Agenda 4 was "Discussion of support supervision report". The supervision results were discussed under Minute 4/Quarter 4/2017/18.</li> </ul>	<p>0</p>

<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the recommendations are followed</li> <li>– up and specific activities undertaken for correction: score 6</li> </ul>	<ul style="list-style-type: none"> <li>No evidence was availed, at the time of assessment, that the DHT/HSD had followed up the recommendations and specific activities undertaken for correction.</li> </ul>	<p>0</p>
<p>The LG Health department has submitted accurate/consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> <li>List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10</li> </ul> </li> </ul>	<p>There was enough evidence that the LG submitted accurate/consistent data</p> <ul style="list-style-type: none"> <li>The district has 1 HSD (Buyanja HSD) and the total number of HFs (Including PNFPs) that receive PHC NWR are 7 (Gov't – 1HCIV, 3HCIIIs, 1HCII &amp; PNFP - 1HCIII, 1HCII).</li> <li>List of facilities to receive PHC NWR for FY2018/19 with DHO stamp dated 11th April 2018 was availed and it had 7 facilities to receive a total of UGX 78,706,761</li> <li>The PBS LG Approved Budget Estimates FY 2018/19 generated on 01/08/2018 with DHO's stamp dated 2nd August 2018 highlighted the same 7 facilities on Page 25</li> </ul>	<p>10</p>
<p>Governance, oversight, transparency and accountability</p>			

<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2</li> </ul>	<p>At the Sitting of the Works, Education, Health, Community and Security Services Committee meeting held on 22/05/2018, the Committee discussed service delivery issues under Min. 65/GPC/05/2018: Recommendations to Council where it recommended the elevation of Matale HC II to HC III in the next FY.</p>	<p>2</p>
<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the health sector committee has presented issues that require approval to Council: score 2</li> </ul>	<p>Whereas evidence provided during the assessment related to the approval of elevation of the Matale HCII to HC II, the minutes were not duly signed by the speaker. However, the matter was presented for approval by the 7tyh Council at its meeting held on held on 29th May 2018 under Min. 99/KDLC/05/2018: Recommendation from Standing Committees.</p>	<p>0</p>
<p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 6 points</p>	<p>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> <li>If 100% of randomly sampled facilities: score 6</li> <li>If 80-99 %: score 4</li> <li>If 70-79: %: score 2</li> <li>If less than 70%: score 0</li> </ul>	<p>4 out of the 5 sampled facilities never held the four mandatory meetings</p> <ol style="list-style-type: none"> <li>Matale HCII HUMC list was availed with 9 names recorded. The approved are 6 and based on the approved 1 female and 5 males were identified from the list. No minutes for this committee were availed at the time of assessment.</li> <li>Nyamarwa HCIII HUMC list for FY 2018/19 was availed with 5 members recorded (2 females &amp; 3 males). Q1 minutes dated 24/7/2017 were availed. Budget &amp; resource issues were discussed under MIN I 24/7/17. Q2 minutes dated 30/11/17 were availed. Budget &amp; resource issues were discussed under MIN II "Remarks from the in-charge". Q3 minutes for meeting held on 30/1/18 were availed. Resource issues were discussed under Agenda 3 "Communication from the chairperson HUMC". Q4 minutes dated 20/6/18 were availed. Budget &amp; resource issues were discussed under Min 3 "communication from in-charge".</li> </ol>	<p>0</p>

		<p>3. Kyebando HCIII HUMC list dated 7/3/18 was availed with 6 names and 5 of them are approved by the guidelines (2 females &amp; 3 males). Q3 minutes for meeting held on 7/3/18 were availed. Budget &amp; resource issues were discussed under MIN 02/MARCH/2018 "Communication from HUMC chairperson". Q4 minutes for meeting held on 16/6/18 were availed. Budget &amp; resource issues had been discussed under MIN 03/JUNE/2018 "Report from health unit in-charge".</p> <p>4. Mugarama HCIII HUMC list dated 22/3/17 was availed with 10 names and 9 are among those approved by the guidelines (2 females &amp; 7 males). Q2 minutes for meeting held on 28th December 2017 were availed. Resource issues had been discussed under Min 3 "Remarks from in-charge". Q3 minutes for meeting held on 15th March 2018 were availed. Resource issues had been discussed under Min 5 "Remarks from in-charge". Q4 minutes for meeting held on 30th June 2018 were availed. Resource issues were discussed under Min 2 "Welcoming remarks from in-charge".</p> <p>5. Kibaale HCIV HUMC members list dated 1/7/18 was availed with 12 names and 9 are among those approved by the guidelines (3 females &amp; 6 males). Q2 minutes for meeting held on 13/10/17 were availed. Budget &amp; resource issues were discussed under "communication from the in-charge". Q3 minutes for meeting held on 9/3/18 were availed. Budget &amp; resource issues were discussed under Min 04/09/2018. Q4 minutes for meeting held on 25/5/18 were availed. Budget &amp; resource issues were discussed under Minute 4 "communication from the in-charge".</p>	
<p>The LG has publicised all health facilities receiving PHC non-wage recurrent grants</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards: score 4</li> </ul>	<ul style="list-style-type: none"> <li>A list of 7 HFs (Gov't – 1HCIV, 3HCIIIs, 1HCII &amp; PNFP - 1HCIII, 1HCII) to receive PHC NWR in FY 2018/19 with DHO stamp dated 31st August 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 procurement plan was submitted late and the letter of submission by health department was missing.</p> <ul style="list-style-type: none"> <li>The District Procurement Plan for FY 2018/19 with stamp dated 30th July 2018 was availed. The Plan for Health was recorded on <i>pages 11-13</i> with 7 items listed for procurement.</li> <li>No letter of submission of the Health department plan was availed by the DHO at the time of assessment.</li> </ul>	<p>0</p>
<p>The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2.</li> </ul>	<p>Only 2 out of the 5 expected PP1 filled forms were availed at the time of assessment.</p> <ul style="list-style-type: none"> <li>Two filled PP1 forms both dated 30th June 2018 were availed at the time of assessment i.e. construction of semi detached staff house at Matala HCII (UGX 185,267,460) and construction of maternity ward at Matala HCII (UGX 277,900,500)</li> </ul>	<p>0</p>
<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4.</li> </ul>	<ul style="list-style-type: none"> <li>There were no Investment Activities carried out during this Financial year in the Health Sector</li> </ul>	<p>0</p>
<p>Financial management and reporting</p>			

<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4</li> </ul>	<p>The department 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 13th 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>Five query: <ul style="list-style-type: none"> <li>(1) Non accountability of Advances to worth SHS 54,167,700 at District Health Department. No response.</li> <li>(2) No Cash books and bank reconciliation statements at District Health Department. No response.</li> <li>(3) No schedules for transfer of funds to lower Health Units. Response on 15/3/2018.</li> <li>(4) No personal files at Station- Nyamarwa Health Centre III and Matale HCIII. Response 25/1/2018.</li> <li>(5) Delayed release of PHC funds to Nyamarwa Health Centre and Matale HCIII. Response on 13/3/2018.</li> </ul> </li> </ul> <p>At the time of Assessment two queries had not been attended too by the District Health Department. 1 &amp; 2 above.</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>2 out of the 5 sampled facilities failed to meet the minimum gender composition required.</p> <ol style="list-style-type: none"> <li>Matale HCII HUMC list was availed with 9 names recorded. The approved are 6 and based on the approved the gender composition is 1 female and 5 males which is 20% composition</li> <li>Nyamarwa HCIII HUMC list for FY 2018/19 was availed with 5 members recorded (2 females &amp; 3 males). This is 66.7% composition</li> <li>Kyebando HCIII HUMC list dated 7/3/18 was availed with 6 names and 5 of them are approved by the guidelines (2 females &amp; 3 males). This is 66.7% composition</li> <li>Mugarama HCIII HUMC list dated 22/3/17 was availed with 10 names and 9 are among those approved by the guidelines (2 females &amp; 7 males). This is 28.6% composition</li> <li>Kibaale HCIV HUMC members list dated 1/7/18 was availed with 12 names and 9 are among those approved by the guidelines (3 females &amp; 6 males). This is 50% 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 updated district procurement plan FY 2017/18 with stamp dated 30th July 2018 was availed. The Plan for Health department was recorded on <i>pages 12-14</i> with 5 items listed. Two capital projects were listed both to be done at Kibaale HCIV i.e. construction of mortuary and general ward</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 checked whether the mitigation plans are complied with: Score 2</li> </ul>	<p>The environmental officer only visited one project for which he made a report. However, no evidence was availed to show that the CDO visited the sites.</p> <ul style="list-style-type: none"> <li>An Environment/Social, Health and Safety supervision report by the Senior Environment Officer, dated 20th June 2018 was availed at the DHO's office. This only covered one project for the general ward.</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>Approaches to Health Care Waste Management, Health Workers Guide Second Edition 2013 was availed.</li> <li>No evidence was availed at the time of assessment to show that these guidelines were issued</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>• Kibaale's global safe water coverage stands at 70% - a decline from last year's 72%</li> <li>• Four sub-counties are below the district average: Nyamarwa 41%; Karama 48%; Bubango 53% and Nyamurunda 57%</li> <li>• Three of the four low-coverage sub-counties are targeted in FY 2018/19:               <ul style="list-style-type: none"> <li>o Nyamarwa: borehole (BH) rehabilitation (1 No.)</li> <li>o Bubango: BH rehabilitation (1 No.)</li> <li>o Nyamurunda: BH rehabilitation (2 No.)</li> </ul> </li> <li>• Investments in the low-coverage sub-counties account for a paltry 1% of total capital purchases in the water and sanitation conditional grant FY 2018/19 (UGX 415 million)</li> <li>• The bulk of the LG's water development grant has been committed to Kabasekende piped water system (PWS) – in Kabasekende sub-county (safe water coverage: 73%)</li> </ul>	0

<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>• As per quarterly progress reports, three capital projects were implemented in FY 2017/18, viz.:</li> <li>o Drilling and installation of 15 No. deep boreholes</li> <li>o Rehabilitation of 11 No. boreholes</li> <li>o Construction of a public VIP latrine at Kirigwaijo Shrine</li> <li>• As per aforesaid reports, the low-coverage sub-counties were catered for via the water grant as follows:</li> <li>o Nyamarwa: BH installation (1 No.); BH rehabilitation (2 No.)</li> <li>o Karama: BH installation (1 No.)</li> <li>o Bubango: BH installation (1 No.)</li> <li>o Nyamarunda: BH installation (1 No.); BH rehab (2 No.)</li> <li>• In capital terms, less than half of WSS projects were implemented in the low-coverage sub-counties</li> </ul>	<p>0</p>
<p>Monitoring and Supervision</p>			
<p>The district Water department carries out monthly monitoring of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the district Water department has monitored each of WSS facilities at least annually.</p> <ul style="list-style-type: none"> <li>• If more than 95% of the WSS facilities monitored: score 15</li> <li>• 80% - 95% of the WSS facilities - monitored: score 10</li> <li>• 70 - 79%: score 7</li> <li>• 60% - 69% monitored: score 5</li> <li>• 50% - 59%: score 3</li> <li>• Less than 50% of WSS facilities monitored: score 0</li> </ul>	<ul style="list-style-type: none"> <li>• Implementation monitoring reports for the WSS investments made in FY 2017/18 were reviewed:</li> <li>o BH drilling (by KLR Ltd): supervision report dated April 2018 prepared by the consultant (SAG Geo Consult Ltd)</li> <li>o BH rehabilitation (by Art Centre Ltd): status report dated December 2, 2017 prepared by the DWO</li> <li>o Construction of public sanitation facility (by Mbasia Investments Ltd): inspection report dated March 1, 2018 prepared by the DWO</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>As intimated in Performance Measure #2, Kibaale LG reported all its FY 2017/18 achievements in Q4</li> <li>The Q4 report dated August 8, 2018 highlighted achievements in relation to borehole installation (15 No.) and rehabilitation (11 No.), and construction of a public sanitation facility</li> </ul>	5
<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <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>The list of FY 2017/18 achievements is consistent with both MWE and PBS records as follows: <ul style="list-style-type: none"> <li>Drilling and installation of 15 No. deep boreholes</li> <li>Rehabilitation of 11 No. boreholes</li> <li>Construction of a public VIP latrine at Kirigwaijo Shrine</li> </ul> </li> <li>The relevant MoWE MIS file: Quarterly Achievements FY 2017/18</li> </ul>	5
Procurement and contract management			
<p>The district Water department has submitted input for district's procurement plan, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has submitted input for the district procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4</p>	<ul style="list-style-type: none"> <li>The following WSS investments are planned for FY 2018/19: <ul style="list-style-type: none"> <li>Rehabilitation of 12 No. BHs</li> <li>Construction of Kabasekende PWS Phase III</li> </ul> </li> <li>Procurement requisitions for FY 2018/19 were raised on July 6, 2018</li> <li>PDU records confirm submission of PRs beyond the April 30 deadline</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>• The Chief Accounting Officer appointed the DWO as Contract Manager for all WSS projects on October 23, 2017</li> <li>• Regular implementation monitoring (site) visits are conducted as highlighted in performance measure 3</li> <li>• Minutes of the site meeting conducted April 24, 2018 to review progress of Kabasekende PWS were assessed</li> <li>• Participants in the site meeting included local leaders, LG technical staff, contractor (Olanzicon) and beneficiaries.</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 water and sanitation facilities constructed as per design(s): score 2</li> </ul>	<ul style="list-style-type: none"> <li>• The bidding document for the 15 No. DBHs issued in August 2017 details technical specifications for the same</li> <li>• Field assessment was conducted for four DBHs in Bwamiramira and Kyebando sub-counties, and the public sanitation facility at Kirigwaijo Shrine</li> <li>• It was established the WSS facilities were built as per designs</li> <li>• Locations of sampled WSS facilities are presented in Performance Measure 11</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>• The DWO prepared completion reports (dates in subsequent section) for WSS facilities delivered in previous FY</li> <li>• Field assessments confirmed beneficiary communities handle routine O&amp;M of the WSS facilities via WSCs (details of WSCs presented in Performance Measure 14)</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 Project Managers certified and prepared (practical) completion reports dated as follows: <ul style="list-style-type: none"> <li>Public sanitation facility at Kirigwajjo (by Mbaso Investments) – March 12, 2018</li> <li>Drilling and installation of 10 No. BHs (by KLR Ltd) – April 20, 2018</li> <li>Installation of additional (5 No.) DBHs – June 11, 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 during the year to KLR Uganda Limited: Drilling Casting pump testing and installation of 12 Deep Boreholes in Kibaale District at Kyanyi Central, Kyabayonjo LC1, Kyebando HC, Igomero LC1, Kiruruma, Kigujju, Kiyanja A, Karangara (Nguse), Kyamakabugo LC1, Kasisa-Kasaka LC1, Buyanja SSS and Hamuseto.</li> <li>Drilling Borehole at Kiribanga in Bwamiramira Sub County</li> <li>Drilling five boreholes at Busesa, Matala Sub County, Kirembo, Karuguuza Town Council, Kizengwa, Kyakanyonyi and Muhangi HCIII in Mugarama Sub County.</li> <li>Mbaso Investments Uganda Limited: Construction of 4 stance lined VIP Latrines with a Urinal at Kirigwajjo Shrine in Bubanga Sub County.</li> <li></li> <li>All the above payments were worth Ugx 295,622,146.</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 12th 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 <ul style="list-style-type: none"> <li>If sector has no audit query score 5</li> <li>If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3</li> </ul> </li> <li>If queries are not responded to score 0</li> </ul>	<ul style="list-style-type: none"> <li>Three Queries <ul style="list-style-type: none"> <li>(1) Bore hole sites in Kiyanja LC1, Kyabayonjo LC1 and Kyebando Health Center III lacked grass planted to control running water.</li> <li>(2) User Committees not saving for operations and maintenance of the boreholes</li> <li>(3) Incomplete boreholes at St Jude Busesa, Kirembo Kyakanyonyi, Muhangi and Kizagira- non completion by the year ends.</li> </ul> </li> <li>These queries were responded too by the Water office on 10/8/201, 18/8/2018 &amp; 10/8 2018</li> </ul>	<p>3</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>At the Sitting of the Works, Education, Health, Community and Security Services Committee meeting held on 22/02/2018, the Committee discussed service delivery issues under Min. 49/GPC/02/2018(4): Reports from HODS/SECS (Pg5). It considered among others projects under implementation for the FY 2017/18, disbursements of Q1 &amp; Q2 &amp; Q3 and the drilling of 22 boreholes.</p>	<p>3</p>

<p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the water sector committee has presented issues that require approval to Council: score 3</li> </ul>	<p>No evidence was found in the 6 sets of minutes of council availed. However only mention (but no requirement for approval) about water was made by the District Chairperson to Council to note that the water offices in Nyamarwa and Kyakatangwa had been constructed under the Min: 82/KDLC/03/2018 (Pg.5) in the meeting of 7th Council held on 6th March 2018.</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>At the time of assessment, information on key water development projects for FY 2017/18 (PM #2) and FY 2018/19 (PM #5) was displayed on the LG notice board</li> <li>The above-mentioned info was stamped and date September 5, 2018</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>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>The sampled projects are furnished with required details as follows: <ul style="list-style-type: none"> <li>Borehole #1: Igomero Village, Bwamiramira sub-county <p>Funding: Poverty Action Fund; Date: 24.02.18</p> <p>Contractor: KLR Ltd</p> </li> <li>Borehole #2: Kiyanja Village, Kyebando sub-county <p>Funding: Poverty Action Fund; Date: 25.02.18</p> <p>Contractor: KLR Ltd</p> </li> <li>Borehole #3: Kyebando Health Centre, Kyebando sub-county <p>Funding: Poverty Action Fund; Date: 26.02.18</p> <p>Contractor: KLR Ltd</p> </li> <li>Borehole #4: Kigujju Village, Bubango sub-county <p>Funding: Poverty Action Fund; Date: 24.02.18</p> <p>Contractor: KLR Ltd</p> </li> <li>4-stance lined VIP latrine at Kirigwaijo Shrine <p>Funding: DWSCG ; Date: FY 2017/18</p> <p>Contractor: Mbasa Investments Ltd</p> </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 assessment, an invitation to bid for construction of public sanitation facilities was displayed on the notice board</li> <li>The above-mentioned notice was dated August 31, 2018 – and restricted to firms already pre-qualified by the LG</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 were not on file/availed</li> <li>The DWO affirmed locations for FY 2017/18 were politically-motivated, not user-driven</li> </ul>	<p>0</p>
<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Water and Sanitation Committees that are functioning evidenced by either: i) collection of O&amp;M funds, ii( carrying out preventive maintenance and minor repairs, iii) facility fenced/protected, or iv) they an M&amp;E plan for the previous FY: score 2</li> </ul> <p>Note: One of parameters above is sufficient for the score.</p>	<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>Environment and Social Screening Forms (reports) prepared by the Senior Environment Officer (SEO) were reviewed</li> <li>The screening forms for BH installation were dated April 17, 2017</li> <li>Mitigation measures proposed during screening include fencing sites, constructing soakaway pits, backfilling, among others</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>Compliance to mitigation measures was documented in an Environmental Monitoring and Inspection Report dated June 28, 2018</li> <li>The aforesaid report prepared by the SEO confirmed compliance to environmental concerns</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>The bidding document for the 15 No. DBHs issued in August 2017 provides for tree planting, drainage and fencing all the sites</li> <li>The successful bidder (KLR Ltd) was bound the aforesaid document</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>The LG water department undertook training of WSC members in March 2018 and prepared a report to same effect</li> <li>The report (dated March 2018) details composition and position of the WSCs</li> <li>For the sampled facilities presented in PM 11, women make up at least half of the members of committees</li> <li>Treasurer and/or secretary are the common roles for women</li> </ul>	<p>3</p>

<p>Gender and special needs-sensitive sanitation facilities in public places/</p> <p>RGCs provided by the Water Department.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3</li> </ul>	<ul style="list-style-type: none"> <li>• Assessment was done for public sanitation facilities built in the last two FYs</li> <li>• It was established the sanitation facilities at Kabasekende market (Kasekende sub-county) and Kirigwaijo Shrine are sex-separated</li> <li>• The above-mentioned facilities have adequately provided for PWDs</li> </ul>	<p>3</p>
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