Local Government Performance Assessment

Mayuge District

(Vote Code: 535)

<table>
<thead>
<tr>
<th>Assessment</th>
<th>Scores</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accountability Requirements</td>
<td>50%</td>
</tr>
<tr>
<td>Crosscutting Performance Measures</td>
<td>52%</td>
</tr>
<tr>
<td>Educational Performance Measures</td>
<td>71%</td>
</tr>
<tr>
<td>Health Performance Measures</td>
<td>76%</td>
</tr>
<tr>
<td>Water Performance Measures</td>
<td>62%</td>
</tr>
<tr>
<td>Summary of requirements</td>
<td>Definition of compliance</td>
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<tr>
<td>--------------------------------</td>
<td>-----------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Annual performance contract</td>
<td>• From MoFPED's inventory/schedule of LG submissons of performance contracts, check dates of submission and issuance of receipts and:</td>
</tr>
<tr>
<td></td>
<td>o If LG submitted before or by due date, then state ‘compliant’</td>
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<tr>
<td></td>
<td>o If LG had not submitted or submitted later than the due date, state ‘non-compliant’</td>
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<tr>
<td></td>
<td>• 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.</td>
</tr>
<tr>
<td>Supporting Documents for the Budget required as per the PFMA are submitted and available</td>
<td></td>
</tr>
<tr>
<td>LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY by 30th June (LG PPDA Regulations, 2006).</td>
<td>• From MoFPED’s inventory of LG budget submissions, check whether:</td>
</tr>
<tr>
<td></td>
<td>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.</td>
</tr>
<tr>
<td>Reporting: submission of annual and quarterly budget performance reports</td>
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</tbody>
</table>
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).

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:
- If LG submitted report to MoFPED in time, then it is compliant
- If LG submitted late or did not submit, then it is not compliant

Mayuge LG submitted the Annual Performance Report for the previous FY on 11th/08/2018, (not as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015).

(Note, dates of submission were not properly captured by the MoFPED in the spreadsheet though still beyond the deadline.

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).

From MoFPED’s official record/inventory of LG submission of quarterly reports submitted to MoFPED, check the date MoFPED received the quarterly performance reports:
- If LG submitted all four reports to MoFPED of the previous FY by July 31, then it is compliant (timely submission of each quarterly report, is not an accountability requirement, but by end of the FY, all quarterly reports should be available).
- If LG submitted late or did not submit at all, then it is not compliant.

LG submitted the quarterly budget performance report for all the four quarters. Through the PBS system of all quarters are as below:
- Q1 submitted on 3rd/01/2018
- Q2 submitted on 22nd/02/2018
- Q3 submitted on 29th/05/2018
- Q4 submitted on 11th/08/2018.

The LG did not submit Q4 as per PFMA Act, 2015.

Audit

The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General and the Auditor General’s findings for the previous financial year by end of February (PFMA s. 11 2g). This statement includes actions against all findings where the Internal Auditor

From MoFPED’s Inventory/record of LG submissions of statements entitled “Actions to Address Internal Auditor General’s findings”,

Check:

The LG did not submit a status of implementation of Internal Auditor General and Auditor General’s findings to the PS/ST as evidenced below;
and the Auditor General recommended the Accounting Officer to take action in lines with applicable laws.

- 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.

Internal Auditor General

In a correspondence from the Internal Auditor General dated 9 April 2018 Ref: IIA 50/260/01 that was addressed to the Accounting officer and received by The LG central registry on 25 April 2018.

The issues raised by the Internal Auditor General were:

1. Expenditure in excess of warrants Shs 945,278,473 as per appropriation statement.
2. Doubtful expenditure Shs 66,934,682
3. Unremitted NSSF Shs. 6,684,000

The above were responded to in the status of implementation of Internal Audit recommendations 2016/2017 Ref: CR/251/1 dated 07 Feb 2018 addressed to the PS/ST received by Directorate of Internal Audit on 15 Feb 2018.

Auditor General’s Report

The Auditor General’s report was not availed and neither was the Status of implementation of the Auditor General’s findings.
The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.

The LG had an unqualified audit opinion as per AG's Report.

(Source: Report of the Auditor General to Parliament for FY ended 30 June 2018; Annexure IV; 4.2)
## Summary of requirements

### Definition of compliance

### Compliance justification

<table>
<thead>
<tr>
<th>Score</th>
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</table>

Planning, budgeting and execution
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.

Maximum 4 points for this performance measure.

Evidence that a district/municipality has:
- A functional Physical Planning Committee in place that considers new investments on time: score 1.

Mayuge district has a functional Physical Planning Committee (PPC) which considers new investments.

The Committee consists of 15 members. Letters of appointment of members were available eg a letter dated November 11st, 2015; signed by Mr. Naika Wasswa Richard the then Chief Administrative Officer (CAO). (under PPA part III sections 9). PPC has a plan registration book to register new investments. The committee sat only 2 times last FY in the 3rd and 4th quarter to approve plans submitted. Minutes were available ie

- PPC meeting held on 1st/ 02/2018 and
- PPC meeting held on 21st /06/2018

Below are examples; of committee business;

Under Min. MD/DPPC/4./2/2018 consideration of building plans for approval

Petrol Station c/o Ssekanjako Sivan (Petrol station in Buwanga Village) was approved

MD/DPPC/5/01/2018; consideration of building plans for approval

Asaba Julius (Petrol Station)
- Submission 21st /05/2018
- Approval 21st /06/2018

Wagooli Bakari (Petrol Station)
- Submitted on 7th/06/2018
- Approved on 21st/06/2018
- Submission on 17th /10/2017
- Approved on 1st /02/2018

Seventh day Adventists Church at Lugolole village
- Submitted on 14th /12/2017
- Approved on 1st/02/2018

The PPC does not consider new applications on time.
| 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 | Maximum 4 points for this performance measure. | • Evidence that district/MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD. Score 1. | 0 |
| --- | --- | The District did not submit any set of minutes to the Physical Planning Committee of the MoLHUD. | 

<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 | Maximum 4 points for this performance measure. | • All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0. | 0 |
| --- | --- | The LG has no Physical Plan, thus no infrastructure investments can be consistent with physical development which is not in place. No plans have been approved following the Physical Plan developed by the district. The committee approves and controls physical developments in LLGs as per Part V, section 40 of the Physical Planning Act 2010 sub section (1, 2, 3). |</p>
<table>
<thead>
<tr>
<th>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</th>
<th>Maximum 4 points for this performance measure.</th>
<th>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</th>
<th>Maximum 5 points on this performance measure.</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Action area plan prepared for the previous FY: score 1 or else 0</td>
<td></td>
<td>• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.</td>
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<tr>
<td>The LG did not prepare Action Area Plan for the previous FY.</td>
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<td>There was evidence that priorities in the AWP for the current FY are based on the outcomes of Budget conferences (BCR). A budget conference for FY 2018/19 was held on November 8th, 2017 at the District Council hall Mayuge. Priorities in the AWP and Budget from the BCR were as below;</td>
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<tr>
<td>Administration BCR page 4</td>
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<td>• Creation of physical plans for the new town councils; Bwondha and Bugadde TCs</td>
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<td>• Extension of the administration block</td>
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<td>Works and Technical Services BCR page 4</td>
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<tr>
<td>• Conduct routine Mechanised maintenance of roads (Musoma-Busabala 4kms, Mpungwe Buwaya, Kityerera Kibungo, Bukatabira-Nango-Kabuuka</td>
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<tr>
<td>Education and Sports; page 5 BCR</td>
<td></td>
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<tr>
<td>• Construction of classroom blocks</td>
<td></td>
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<tr>
<td>• Construction of 5 stance lined latrines at Nanvunano, Kabuuka, Ibanga St. Joseph Bukoba, Bugadde, Busimu PS.</td>
<td></td>
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<td>• Suppply od desks to selected schools</td>
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<tr>
<td>Health page5 BCR</td>
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<td>Health page5 BCR</td>
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</table>
The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles. Maximum 5

• 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.

Mayuge district has an approved a 5 year Development Plan (2015/16-2019/2020, approved by Council on April 30, 2015 under minute: Min 06/MDC/03/2015 signed and stamped by Chairperson Mr. Omar Bongo Muwaya on 18th/03/2015. Capital investments in the approved annual work plan for the current FY are derived from the approved five-year development plan as shown below;

Education and Sports
Supply of 756 desks on Page 145 of the AWP and Page 88 of the DDP

• Construction of classroom blocks AWP page 144 and DDP page 88 at Bugadde, Bulondo, and Kasozi Ps

• Construction of 5 stance lined latrines at Nanvunano, Kabuuka, Ibanga St. Joseph Bukoba, Bugadde, Busimu PS, AWP page 144 and DDP page 88

Works and Technical Services

• Routine mechanize maintenance of district roads (okumu’s Place-Swaibu, Bukatabira Trading centre to...
points on this performance measure.

- Maintenance of community access roads: Lugolole-Lukone 2.5 km, Kinawambuzi-Lwandela 3.5km, Nabukone- Kaliro 1.5 among others page 69 AWP and DDP page 88
- Maintenance of Urban roads Naluwerere-Dembe 3.5km, Buyego to Nakawa 1.5 km, Igunda-Busima-Wakiwungu 2.12km AWP page 66, and DDP page 88

**Water**

- Drilling od 17 deep bore holes (Katonte, Kigulamo, Nvunwa, Wamulongo, Bubago, Lukindu A, Bukasero B, Bubalagala, Namulwana A, Kilongo A, Butumbula among others)
- Rehabilitation of 12 boreholes AWP 61-62 page and DDP page 889 Namoni, Malongo HC III, Bugoya, Kirongo A, Bufuta A among others

**Health** page 24 of AWB and DDP page 89

- Construction of latrines at Sagitu HCII
- Upgrading of Busala HCII to HCIII
- Upgrading Jagusi HCII to HCIII

**Production** page ....AWP and DDP page

Procurement of bee hives, tsetsefly traps 12,542,000
The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles.

Maximum 5 points on this performance measure.

| 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. | Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2. | Mayuge District developed project profiles for FY 2017/18 Feb, 2018; profiles were presented to TPC and discussed in a meeting held on 26th /02/2018 (Min:005/DTPC/02/18. Presentation and discussion of project profiles for FY 2018/19. The profiles seen are elaborate, for all projects and follow the format; they include work plan, M&E strategy, M&E plan, and EIA and mitigation plan. | 2 |

| • Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2. | Mayuge District developed project profiles for FY 2017/18 Feb, 2018; profiles were presented to TPC and discussed in a meeting held on 26th /02/2018 (Min:005/DTPC/02/18. Presentation and discussion of project profiles for FY 2018/19. The profiles seen are elaborate, for all projects and follow the format; they include work plan, M&E strategy, M&E plan, and EIA and mitigation plan. | 2 |

| • 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. | Mayuge District developed project profiles for FY 2017/18 Feb, 2018; profiles were presented to TPC and discussed in a meeting held on 26th /02/2018 (Min:005/DTPC/02/18. Presentation and discussion of project profiles for FY 2018/19. The profiles seen are elaborate, for all projects and follow the format; they include work plan, M&E strategy, M&E plan, and EIA and mitigation plan. | 1 |

| Annual statistical abstract developed and applied | 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. | Mayuge LG compiled a Statistical Abstract FY 2018/19, dated June, 2018. It included gender disaggregated data: male and female, rural and urban population, disaggregated gender data by Council, district departments and other population segments. The Abstract was presented to TPC meeting on May 28th, 2018 under Min: 005/DTPC/05/18. | 1 |
Investment activities in the previous FY were implemented as per AWP. Maximum 6 points on this performance measure.

- 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

From the Annual Budget Performance Report for FY2017/18, all infrastructure projects implemented by the LG were derived from the AWP and budget approved; examples are captured below:

Roads (APR pg 62-63)
- Maintained community access roads page 99 AWP FY 2017/18 and budget page 26 (118,245,000); Mitimito-Kitovu 0.9km, Busuyi-Buyengo 1.59km, Musita A-Musita B, Bukatube a-Ssembogo-Muyita 0.05km etc
- District roads maintained 39.8km (URF) AWP FY 2017/18 page 100 and budget 27 and (617,204,000)

Water and Sanitation (APR pg 60)
- Constructed 5 stance VIP lined latrine at Nango RGC, AWP FY 2017/18 page 60 and budget page 29 (shs 29,870,000)
- Borehole drilling AWP FY2017/18 page 60 and budget page 29 (424,092,000); Bugodi A, nalwesambula, bugumya-Kaliro, Bukatube B, Wamondo etc.

Education (APR page 52)
- Four (4) Classrooms constructed at Nabyama and St. Joseph Bukuba PS AWP FY 2017/18 page 51-52 and budget page 22 (116,000,000)
- Latrine construction and rehabilitation of Kigandalo PS, Buluta SDA PS, Musita PS, Kaaza Island PS etc, AWP FY 2017/18 page 52 and budget page 22 (246,000,000)

Production (APR page 44-45)
- Procured water testing kits and fish feeds; AWP page 37 FY 2017/18 and budget page 12 (shs 19,600,000)
- Procured beehives (KTB) type, bee wax, AWP page 38 FY 2017/18 and budget page 12 (shs 12,542,000)
- Improved banana varieties AWP page 36 FY 2017/18, budget page 11,(20,000,000)
Investment activities in the previous FY were implemented as per AWP. Maximum 6 points on this performance measure.

- Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY.
  - 100%: score 4
  - 80-99%: score 2
  - Below 80%: 0

From the Annual Budget Performance Report, the investment projects implemented by the LG were completed as per work plan by end of FY 2017/18.

**Roads (APR pg 62)**

- Maintained roads page 62 AWP FY 2017/18 and budget page …; Kitovu, Busuyi,-Buyengo, Musita S-Musita B; Completed as per work plan = 100%
- Routine and periodic maintenance of 25 and 80(kms) page 63 AWP; Nondwe-Bugote, Bumasena-Namoni etc. Works not completed as per work plan= 65%

**Water and Sanitation (APR pg 60)**

- Constructed 5 stances VIP lined latrine AWP FY 2017/18 page 60. Completed as per work plan = 99%
- Borehole drilling AWP FY2017/18 page 60. Kasokwe, Bungolo, Busui. Completed as per work plan = 102%

**Education (APR page 56-57)**

- Four (4) Classrooms constructed at Nabyama and St. Joseph Bukuba PS AWP FY 2017/18 page 56. Completed as per work plan = 73%
- Latrine construction and rehabilitation of Kigandalo PS, Buluta SDA PS, Musita PS, Kaaza Island PS etc, and AWP FY 2017/18 page 57. Completed as per work plan= 87%

**Production (APR page 44)**

- Procured water testing kits; AWP page 44 FY 2017/18 Completed as per work plan 99%
- Procured beehives (KTB) type, bee wax, AWP page 46 FY 2017/18. Completed as per work plan 99%

Overall 90.5% performance
<table>
<thead>
<tr>
<th>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects during the previous FY</th>
<th>Maximum 4 points on this Performance Measure.</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2</td>
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<tr>
<td>From the Annual Budget Performance Report 2017/18 investment projects were implemented and completed within approved budget; examples below</td>
<td></td>
</tr>
<tr>
<td>Education</td>
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<tr>
<td>Classroom construction and rehabilitation</td>
<td></td>
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<tr>
<td>Budget 116,000,000</td>
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<tr>
<td>Actual 85,259,000 =73%</td>
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<tr>
<td>Latrine construction &amp; rehabilitation</td>
<td></td>
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<tr>
<td>Budget 246,000,000</td>
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<tr>
<td>Actual 213,879,000 =87%</td>
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<tr>
<td>Not ALL investment projects in the previous FY 2017/18 were completed within approved budget – Max. 15% plus or minus of original budget</td>
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<table>
<thead>
<tr>
<th>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects during the previous FY</th>
<th>Maximum 4 points on this Performance Measure.</th>
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<tbody>
<tr>
<td>• 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</td>
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<tr>
<td>Expenditure on O&amp;M for infrastructure</td>
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<tr>
<td>Budget 9,000,000</td>
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<tr>
<td>Actual 6,181,000</td>
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<tr>
<td>The LG spent 68.7% below the 80% required to be spent on infrastructure.</td>
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Human Resource Management
LG has substantively recruited and appraised all Heads of Departments. Maximum 5 points on this Performance Measure.

- Evidence that the LG has filled all HoDs positions substantively: score 3

- The LG has 11 HoDs in its approved structure. Of these 10 are substantively filled.

  While CFO Mr. Kisita James whose appointment letter was not available on file although he heads a department of Finance. The only seen appointment letter is for the senior internal auditor appointed under minute 316/DSC/05-06/2012.

  - The details of sampled HoDs are indicated below:

    - Dr. Nabangi Charles DHO appointed under min. no. 33(f)/DSC/04/2014
    - Mr. Nantabya Sulaiman Principal Internal Auditor appointed under min. No. 144/DSC/01/2008
    - Mr. Mukooli Paul District Community Development Officer appointed under min. no. 326/DSC/2010
    - Mr. Nadiope William DEO appointed under Min. No. 221/DSC/05/2017
    - Mr. Babi Christopher Senior Procurement Officer appointed under Min.no. 129/DSC/12/2007
    - Dr. Ouma Constantine Mukoche District Production officer appointed under Min. No. 104(a)/DSC/06/2015
    - Mr. Baligeya Ronald District Planner appointed under Min. No. 100(b)/DSC/06/2018
    - Mr. Lubanga Musa District Natural Resources Officer appointed under Min. No. 320/DSC/06/2010
LG has substantively recruited and appraised all Heads of Departments. Maximum 5 points on this Performance Measure.

- Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2

- Evidence from personnel files and appraisal reports, most of the HoDs were not appraised. Examples are as follows:

  Dr. Nabangi Charles DHO. The performance agreement signed on 5th July 2017 available on file but no report seen.

  - Mr. Lubanga Musa District Natural Resources Officer. There was a performance agreement signed on 3rd August 2017 but not stamped by supervisor. The report was not on file.

  - Mr. Baligeya Ronald District Planner. No performance agreement on file although there was a report not dated and stamped.

  - Dr. Ouma Constantine Mukoche District Production officer. There was no performance agreement seen on file. The performance report seen but not signed by supervisor.

  - Mr. Babi Christopher Senior Procurement Officer. was appraised on 29th June 2018

  - Mr. Nadiope William DEO. There was a performance agreement on file signed on 1st July 2017 but no performance report.

  - Mr. Mukooli Paul District Community Development Officer. No performance agreement and report on file.

  - Mr. Nantabya Sulaiman. Principal Internal Auditor. There was no performance agreement and report on file.

  - Mr. Wanjusi Febiano District Engineer. was appraised since performance report and agreement on file.

  - Mr. Kisita James CFO. was appraised since the performance agreement on file but no report.

Therefore 27 percent appraisal was done.
<table>
<thead>
<tr>
<th>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</th>
<th>Maximum 4 points on this Performance Measure.</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Evidence that 100% of staff submitted for recruitment have been considered: score 2</td>
<td>• From the submission of ref. No. CR/156/1 dated 11th Jan 2018 signed by CAO Ms. Nambooze Joyce Loyce, these posts were submitted for consideration:</td>
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<tr>
<td></td>
<td>1 Medical Officer</td>
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<td>1 Enrolled Midwife</td>
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<td>1 Enrolled Nurse</td>
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<td>83 Education Assistants</td>
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<td></td>
<td>1 Senior Education Officer</td>
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<td>1 Principal Human Resource</td>
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<td></td>
<td>1 Records Officer</td>
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<td>From ref. No. MDSC/01/2018, all these posts were advertised in the New Vision of 29th Jan 2018 page 65.</td>
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<thead>
<tr>
<th>• Evidence that 100% of positions submitted for confirmation have been considered: score 1</th>
<th>There were 64 members of staff who were submitted for confirmation and 3 out of the 64 were not considered for confirmation.</th>
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<tbody>
<tr>
<td></td>
<td>These are:</td>
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<tr>
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<td>Nakyeywa Diana Sylvia was submitted for confirmation on ref. No. CR/159/1 dated 14/11/2017 but no DSC minute for consideration.</td>
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<td></td>
<td>Kagwa Derrick was submitted for confirmation on ref. No. CR/159/1 dated 10/3/2017 but no DSC minute for consideration.</td>
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<td></td>
<td>Gubayanga Moses was submitted for confirmation on ref. No. CR/159/1 dated 21/11/2017 but no DSC minute for consideration.</td>
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<tr>
<td></td>
<td>Therefore 95 percent were considered for confirmation not 100 percent.</td>
</tr>
<tr>
<td>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY. Maximum 4 points on this Performance Measure.</td>
<td>• Evidence that 100% of positions submitted for disciplinary actions have been considered: score 1</td>
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<tr>
<td></td>
<td>• Submission ref. No. CR/156/1 dated 15th Feb 2018, two members of staff were recommended for disciplinary. These are; Mr. Mbatya Martin Community Development Officer appointed under Min. No. 320/DSC/06/2010 Mr. Idiro John grade 3 teacher appointed under Min. No. 15/2000(b)(V) The office of DSC wrote to the above mentioned staff according to letter ref. No. DSC/117 dated 8th June 2018 signed by Mr. Musenze Ibrahim PHD (MUK) the Secretary DSC inviting them to attend disciplinary meeting. Both received the communication and acknowledged on 11th June 2018. all submissions for disciplinary action were considered.</td>
</tr>
<tr>
<td>Staff recruited and retiring access the salary and pension payroll respectively within two months Maximum 5 points on this Performance Measure.</td>
<td>• 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</td>
</tr>
<tr>
<td></td>
<td>• Evidence from recruited staff lists, minutes of DSC and salary payroll of staff, it was established that 80 new staff were recruited and appointed on 16th April 2018 Out of these recruited new staff, not all accessed the salary payroll in two months. Examples of those who didn’t access are, Nairuba Budesta Bweza primary school accessed payroll of July 2018 Ntende Abubakar Bweza primary school accessed payroll of July 2018 payroll Munyhanga Kagoya Maina primary school accessed payroll of July 2018 payroll Kasulungaine Francis Lukungu primary school accessed payroll of July 2018 payroll Nangobi Eseza Katonte parents primary school accessed payroll of July 2018 payroll All these accessed salary payroll after 3 months. The percentage access was 93.7</td>
</tr>
</tbody>
</table>
Staff recruited and retiring access the salary and pension payroll respectively within two months

Maximum 5 points on this Performance Measure.

- 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

- Evidence from the pension payroll and retired staff list shows that there are 12 staff who were retired in FY 2017/18. Of these only two accessed pension payroll making it 16.7 percent. These are:
  - Njulu Njali Robert who was retired on 5th May 2018 and accessed payroll of June 2018
  - Mulembe David who was retired on 20th May 2018 and accessed pension payroll of July 2018

The other 10, some accessed after two months and others have not yet accessed pension payroll.

Examples are:

- Naireka Peter who was retired on 4th April 2018 and accessed the pension payroll of July 2018
- Kalenzi Jonah who was retired on 30th March 2018 and accessed pension payroll of June 2018
- Masuba Twaha Mudanga who was retired on 25th Feb 2018 and has not yet accessed pension payroll.
- Byali Bamu Erina who was retired on 18th Oct 2017 and has not yet accessed pension payroll
- Galubare Sam who was retired on 21st Sept 2017 and has not yet accessed pensions payroll
- Kigenyi Sam who was retired on 1st Feb 2017 and has not yet accessed pensions payroll

Revenue Mobilization

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)

Maximum 4 points on this Performance Measure.

- If increase in OSR (excluding one/off, e.g. sale of assets) from previous FY but one to previous FY is more than 10 %: score 4.
- If the increase is from 5% -10 %: score 2.
- If the increase is less than 5 %: score 0.

The LG registered shs 181,034,739 in FY 2017/18 local revenue compared to Shs 115,398,585 in FY 2016/17. This indicated an increase in revenue of 65,636,154. This was a percentage increase of 56.8%.

Source (Final Accounts 2016/17 & 2017/18 drafts)
LG has collected local revenues as per budget (collection ratio)  
Maximum 2 points on this performance measure

- 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.

Budgeted local revenue was Shs 277,450,000 and the actual revenue collected was Shs 181,034,739. Only 65.2% of the budgeted revenue was collected. Budget realisation was -34.1%.

(Source: Final Accounts 2017/18 & 2017/18 budget)

<table>
<thead>
<tr>
<th>Local revenue administration, allocation and transparency</th>
<th>• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2</th>
</tr>
</thead>
</table>

The LG remitted a total of Shs 15,856,062 to LLGs out of shs 181,034,739 that was collected in the FY 2017/2018.

This makes a percentage of 13.7% of Local revenue remitted to LLGs which is very much below the mandated 65% as elaborated below;

2. Bukatube Sub county- Shs 607,875 Voucher AD00229 dated 08/05/2018
3. Buwaaya Sub county- Shs 1,297,750 Voucher No. AD00230 dated 01/12/17
4. Baitambogwe Sub county- Shs 2,540,000 Voucher No. AD00232 dated 08/05/18.
5. Bukabooli Sub county- Shs 1,305,625 Voucher No. AD00226 dated 08/05/18
6. Imanyiro Sub county-Shs 841,000 Voucher No. AD00228 dated 08/05/2018.
7. Kigandalo Sub county-Shs 1,708,060 Voucher No. AD00225 dated 08/05/2018
8. Kityerera Sub county- Shs 1,478,530 Voucher No. AD00227 dated 08/05/18
9. Wairasa Sub county- Shs 424,500 Voucher No. AD00233 dated 08/05/2018.
10. Mpungwe Sub county –Shs 1,287,722 voucher No. AD00231 dated 08/05/2018
### Local revenue administration, allocation and transparency

**Maximum 4 points on this performance measure.**

- 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

Revenue collected in the FY 2016/17 was Shs 115,398,585 and Council expenses for FY 2017/18 amounted to Shs 63,492,280

Council expenditure compared to Revenue collection (63,492,280/115,398,585) was 55% which was above the threshold of 20%

### Procurement and contract management

The LG has in place the capacity to manage the procurement function

**Maximum 4 points on this performance measure.**

- 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

Senior Procurement Officer (SPO) position was substantially filled as indicated in the letter dated 21st December 2007 under the District Service Commission (DCS) Minute Number: 129/DSC/12/07 stamped & signed by CAO.

Procurement Officer (PO) position was substantially filled as indicated in the letter dated 21st December 2007 on probation under the District Service Commission (DCS) Minute Number: 129/DSC/12/07 stamped & signed by CAO. The DSC was later confirmed as Procurement officer in a letter dated 23rd December 2011 under DSC minute 290/DSC/05/2010 & 277/DSC/10/2011(g)
The LG has in place the capacity to manage the procurement function.

Maximum 4 points on this performance measure.

- Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1

**Technical Evaluation Committee (TEC) produced and submitted reports to the Contracts Committee (CC).**

For example:

**Education Sector:**

TEC report dated 18th June 2017 recommended M&S Must Contractors Ltd for the Construction of a 2 Classroom Block at Nabyaama P/S in Bukabooli S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00015) at a cost of UGX 57,420,201.


**Health Sector:**

TEC report dated 18th September 2017 recommended Kisjo Company Ltd for the Construction of a Waterborne Toilet at Mayuge HCIII in Mayuge Town Council (Proc Ref No: MAYU 535 /WRKS/2017-18/00081) at a cost of UGX 10,000,000 only VAT inclusive.

TEC report dated 18th September 2017 recommended Zodiac Consultancy Ltd for the Construction of a Lined Pit Latrine at Jagusi HCII under DDEG in Jagusi S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/000102) at a cost of UGX 11,000,000.

**Water Sector:**


**Works:**

The District Engineer presented the BoQs and Programme Schedule for the Force on Account for the Routine maintenance of district roads, for example, the 9.3km of Igamba-Girigiri Road and 7.7km of Mayuge-Isikiro Road.
Contracts

Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1

Maximum 4 points on this performance measure.

place the
capacity to
manage the
procurement
function

recommendations of the TEC. For example,

Under CC Minute Number 04/04/07/17/MDCC dated 25th July 2017, CC approved the recommendations of TEC and awarded the contract to M&S Must Contractors Ltd for the Construction of a 2 Classroom Block at Nabyaama P/S in Bukabooli S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00015) at a cost of UGX 57,420,201.

Under CC Minute Number 04/02/10/17/MDCC dated 17th October 2017, CC approved the recommendations of TEC and awarded the contract to Sonsole General Contractors Ltd for the Construction of a stance pit latrines at Kaaza P/S in Jagusi S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00074) at a cost of UGX 29,988,303.

Under CC Minute Number 04/02/10/17/MDCC dated 17th October 2017, CC approved the recommendations of TEC and awarded the contract to Kisjo Company Ltd for the Construction of a Waterborne Toilet under DDEG at Mayuge HCIII in Mayuge Town Council (Proc Ref No: MAYU 535 /WRKS/2017-18/00081) at a cost of UGX 10,000,000 only VAT inclusive.

Under CC Minute Number 04/01/12/17/MDCC dated 17th October 2017, CC approved the recommendations of TEC and awarded the contract to Zodiac Consultancy Ltd for the Construction of a Lined Pit Latrine at Jagusi HCII under DDEG in Jagusi S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/000102) at a cost of UGX 11,000,000.

Under CC Minute Number 04/03/07/17/MDCC dated 11th July 2017, CC approved the recommendations of TEC and awarded the contract to KLR Uganda Ltd for the Construction and Siting Boreholes at Nanfungirwa, Buguwa, Buwalira and Namaiga in Buwaaya S/C, Mpungwe S/C and Kigandalo S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00002) at a cost of UGX 199,777,540.

Under CC Minute Number 05/01/08/17/MDCC dated 4th August 2017, CC approved the BoQs for the Force on Account for the Routine maintenance of 9.3km of Igamba-Girigiri. CC approved supplies to be procured under framework contracts.
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

The AWP 2018/19 was generated from the PBS on 26th July 2018.

The current Procurement Plan for FY 2018/19 was generated from PBS on 8th August 2018. Both plans were submitted to MFPED via the PBS system.

The current approved Procurement plan for FY 2018/19 covered cover all major investments/infrastructure projects in the current approved and AWP/B for FY 2018/19 that was generated from the PBS.

For example,

Output 088183: OPD & other wards constructed and rehabilitated at UGX 265,597,000 was on page 128 of the AWP 2018/19 and Procurement Plan 2018/19 attached to it.

Output 098183: Borehole drilling & rehabilitation at UGX 424,092,000 was on page 77 of AWP 2018/19 and the Procurement Plan 2018/19 attached to it.

Output 178180: Construction and Rehabilitation of classrooms estimated at UGX 1,508,000,000 was on page 62 of AWP 2018/19 and the Procurement Plan 2018/19 attached to it.

Output 048180: Rural Roads constructed and rehabilitated estimated at UGX 200,000,000 was on page 71 of AWP 2018/19 and the Procurement Plan 2018/19 attached to it.

Output 078180: Latrine Constructed and rehabilitated estimated at UGX 138,000,000 was on page 62 of AWP 2018/19 and the Procurement Plan 2018/19 attached to it.

In addition, the Mayuge LG made procurements in FY2017/18 as per plan (adhered to the procurement plan) for FY 2017/18. The 5 sampled completed projects were included in the procurement plan for FY 2017/18 and the AWP 2017/18 report obtained from the PBS.

Construction of a 2 Construction of a 2 Classroom Block at Nabyaama P/S in Bukabooli S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00015)

Construction of a stance pit latrines at Kaaza P/S in Jagusi S/C (Proc Ref No: MAYU 535 /WRKS/2017-
Construction of a Waterborne Toilet under DDEG at Mayuge HCIII in Mayuge Town Council (*Proc Ref No: MAYU 535 /WRKS/2017-18/00081*).

Construction of a Lined Pit Latrine at Jagusi HCII under DDEG in Jagusi S/C (*Proc Ref No: MAYU 535 /WRKS/2017-18/000102*).


Routine maintenance of 9.3km of Igamba-Girigiri under Force on Account.

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<table>
<thead>
<tr>
<th>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</th>
<th>Maximum 6 points on this performance measure.</th>
</tr>
</thead>
<tbody>
<tr>
<td>• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2</td>
<td>All bid documents for infrastructure projects for the current FY 2018/19 are still under preparation by the PDU. There was no completed bid documents on file for all infrastructure projects indicated in the current Procurement Plan 2018/19 had been approved by the contracts committee by 30th August 2018. Therefore, the percentage was calculated to be 0% which was less than 80% required by the LGPA manual of June 2018.</td>
</tr>
</tbody>
</table>
The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.

Maximum 6 points on this performance measure.

- For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2

There was an updated contract register signed and stamped by the Senior Procurement Officer SPO 29th June 2018 and with complete procurement activity files for all procurements made in FY 2017/18. It had columns indicating the Procurement Reference number, Project description, Contracts committee minute, service provider, contract price, commencement date, completion date, retention date, and status e.g completed but waiting for retention.

For example, from a sample of 5 projects with serial numbers listed below;


Kisjo Company Ltd for the Construction of a Waterborne Toilet under DDEG at Mayuge HCIII in Mayuge Town Council (Proc Ref No: MAYU 535 /WRKS/2017-18/00081).

Zodiac Consultancy Ltd for the Construction of a 2 stance Lined Pit Latrine with urinal at Jagusi HCII under DDEG in Jagusi S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/000102).

The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.

Maximum 6 points on this performance measure.

- For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.

Mayuge District LG adhered to the procurement thresholds. For example, from the sampled projects below, indicated compliance with the procurement thresholds & method of procurement.

Open Domestic Bidding (ODB) applied for the Construction of a 2 Classroom Block at Nabyaama P/S in Bukabooli S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00015) at a cost of UGX 57,420,201.

Selective Bidding (SB) applied for the Construction of a stance pit latrines at Kaaza P/S in Jagusi S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00074) at a cost of UGX 29,988,303.

Selective Bidding (SB) applied for the Construction of a Waterborne Toilet under DDEG at Mayuge HCIII in Mayuge Town Council (Proc Ref No: MAYU 535 /WRKS/2017-18/00081) at a cost of UGX 10,000,000 only VAT inclusive.

Selective Bidding (SB) applied for the Construction of a Lined Pit Latrine at Jagusi HCII under DDEG in Jagusi S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00010) at a cost of UGX 11,000,000.


The LG has certified and provided detailed project information on all investments.

Maximum 4 points on this performance measure.

- 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

All works projects implemented in the previous FY 2017/18 were appropriately certified. Interim and completion certificates were attached to the payment vouchers on file in finance and user departments.

For example, the following projects had interim or completion certificates based on technical supervision.

1. Form 8 Certificate for Works/Furniture supply issued 30th October 2017 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at Ntinkalu
2. Form 8 Certificate for Works/Furniture supply issued 30th October 2017 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at Musoli P/S under SFG.

3. Form 8 Certificate for Works/Furniture supply issued 26th September 2017 signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 2 classroom Block at Nbyaama P/S under SFG.

4. Form 8 Certificate for Works/Furniture supply issued 3rd October 2017 signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 2 classroom Block at St. Joseph Bukoba P/S at UGX 57,399,201 under SFG.

5. Form 8 Certificate for Works/Furniture supply issued 6th November 2017 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at Buluuta SDA P/S at UGX 17,997,832 under SFG. Pictures were on file indicating project status at completion.

6. Form 8 Certificate for Works/Furniture supply number 2 issued 16th January 2018 signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 2 classroom Block at Nbyaama P/S under SFG. Pictures were on file indicating project status at completion.

7. Form 8 Certificate for Works/Furniture supply issued 11th January 2018 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at Baitambogwe P/S under SFG.

8. Form 8 Certificate for Works/Furniture supply issued 13th December 2017 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at Mugeri P/S under SFG. Pictures were on file indicating project status at completion.

9. Form 8 Certificate for Works/Furniture supply issued 13th December 2017 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at Bulyangada P/S under SFG. Pictures were on file indicating project status at completion.

10. Form 8 Certificate for Works/Furniture supply issued 13th December 2017 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at
11. Form 8 Certificate for Works/Furniture supply issued 22nd March 2018 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at Kigandalo P/S under SFG. Pictures were on file indicating project status at completion.

12. Form 8 Certificate for Works/Furniture supply issued 24th November 2017 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at Bukatabira P/S under SFG. Pictures were on file indicating project status at completion.

13. Form 8 Certificate for Works/Furniture supply issued 20th June 2018 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at Ntinkalu P/S under SFG. Pictures were on file indicating project status at completion.

14. Form 8 Certificate for Works/Furniture supply issued 19th June 2018 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 2 Classroom Block at St., Joseph Bukoba P/S under SFG. Pictures were on file indicating project status at completion.

15. Form 8 Certificate for Works/Furniture supply issued 12th June 2018 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at Bukabooli P/S under SFG. Pictures were on file indicating project status at completion.

16. Form 8 Certificate for Works/Furniture supply issued 12th June 2018 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at Kaaza Island P/S under SFG.

17. Form 8 Certificate for Works/Furniture supply issued 5th January 2018 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 2 Classroom Block Nakazigo P/S under SFG.

18. Form 8 Certificate for Works/Furniture supply issued 20th December 2017 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at Goli P/S under SFG. Pictures were on file indicating project status at completion.

19. Form 8 Certificate for Works/Furniture supply
issued 24th November 2017 for signed by the Engineering Assistant (MoES) and District Engineer for the Construction of a 5 Stance lined pit latrine at Butakabira P/S under SFG. Pictures were on file indicating project status at completion.

| The LG has certified and provided detailed project information on all investments | • 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 | Site Boards specifications for all infrastructure projects in FY 2018/19 did not indicate contract values. For example, the BoQs and site boards did not included actual contract values.
Construction of a 2 Classroom Block at Nabyaama P/S in Bukabooli S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00015) at a cost of UGX 57,420,201. Construction of a stance pit latrines at Kaaza P/S in Jagusi S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00074) at a cost of UGX 29,988,303. Construction of a Waterborne Toilet under DDEG at Mayuge HCIII in Mayuge Town Council (Proc Ref No: MAYU 535 /WRKS/2017-18/00081) at a cost of UGX 10,000,000 only VAT inclusive. Construction of a Lined Pit Latrine at Jagusi HCII under DDEG in Jagusi S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/000102) at a cost of UGX 11,000,000. Construction and Siting Boreholes at Nanfungirwa, Buguwa, Buwalira and Namaiga in Buwaaya S/C, Mpungwe S/C and Kigandalo S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00002) at a cost of UGX 199,777,540. Therefore the actual contract value was not displayed on the site boards. | 0 |

**Financial management**

| The LG makes monthly and up to-date bank reconciliations | • Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4 | The LG maintained a total of 4 Bank Accounts. The cash books were maintained in the PBS-system. Not all reconciliations were done on time as elaborated below;
1. MAYUGE DISTRICT TREASURY SINGLE A/C- Bank Of Uganda
A/c No. 005350528000000
1. July 2017 was reconciled on 06 March 2018
2. October 2017 reconciliation was done on 15 March 2018
3. Dec 2017 reconciliation was done on 19 March 2018 | 0 |
4. Jan 2018 reconciliation was done on 21 March 2018.
5. The months from Feb 2018 to August 2018 were not reconciled.

2. MAYUGE DISTRICT YOUTH LIVELIHOOD PROJECT
A/c No- 4812100046
1. 30 June 2018 was reconciled but not dated
2. April 2018 reconciliation was done but not dated
3. Jan 2018 reconciliation was done but not dated.
4. Nov 2017 reconciliation was done but not dated
5. July 2017 was reconciled but not dated
6. The last reconciliation done was for June 2018, July and August 2018 were not reconciled.

3. UGANDA SANITATION FUND PROJECT MAYUGE-DFCU Bank
A/c No.- 3505010923
1. July 2018 reconciliation was done but not dated
2. June 2018 reconciliation was done but not dated
3. May 2018 reconciliation was done but not dated
This account had only 3 months reconciliations in the cash book (May, June and July 2018).

Note: The reconciliation dates were based on the last reconciled date/entry date in the system for that particular month.

The months of July and August were not reconciled as required by the manual. (up-dated reconciliations up to the time of assessment). All BRS were not signed by the CFO as required by the LG Financial and Accounting Regulations 2007 Part VI Sec 73.

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The LG made timely payment of suppliers during the previous FY

Maximum 2 points on this performance measure

- 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.

The LG made timely payments to suppliers during FY 2017/2018 as evidenced by the sample below;
1. Gets trading Services Limited for consultancy services for feasibility and detailed design of water supply system in Kigandalo Contract No. 2017/MYG/CONSLT/DWSCDG/01 (Shs 54,103,000) dated 08 June 2018.

Payment process,
Requisition- 12 June 2018

Payment process:

Requisition- 11 December 2017
Certified by DEO- 08 Feb 2018
Approved by CFO- 19 Feb 2018
Paid- 23 March 2018 (Vr No. ED00881)

3. Mercury Commercial Agencies Limited (shs. 16,072,063) for construction of 5 stances VIP latrine at Ntinkalu Primary School.

Payment process:

Requisition- 30 Oct 2017
Certified by DEO – 19 Dec 2017
Approved by CFO- 10 Jan 2018
Paid- 08 Feb 2018 (Vr No. ED001119)

4. Kisjo Company Limited Contract No. 2018/MYG/DWSCDG/VLT/01(Shs 28,000,000) for construction of 4 stance VIP lined latrine with 2 bathrooms in Nango RGC under DWSCDG.

Payment process:

Requisition- 08 June 2018
Certified by DWO- 08 June 2018
Approved by CFO- 13 June 2018
Paid – 16 June 2018 (Vr No. WHT-01001)

5. KK filing station requisition for fuel payment for the health department.

Payment process:

Requisition- 10 Sept 2017
Certified by DHO- 10 Sept 2017
Paid – 02 Nov 2017 (Vr No. HE00130)

The sampled suppliers did not have a clause on payment terms in their contracts. Therefore, a time frame of 2 months after requisition was considered.
<table>
<thead>
<tr>
<th>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum 6 points on this performance measure.</td>
</tr>
</tbody>
</table>

- Evidence that the LG has a substantive Senior Internal Auditor: 1 point.
- LG has produced all quarterly internal audit reports for the previous FY: score 2.

<table>
<thead>
<tr>
<th>The LG had a substantive District Internal Auditor (Nantabya Suleiman) Appointed on accelerated promotion on pensionable terms. Ref: CR/156 scale U2 under Min144/DSC/01/08. Dated 12/02/2008 signed by the CAO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internal Audit had all the reports for the four quarters.</td>
</tr>
<tr>
<td>Quarter 1 report dated 26 October 2017 received by Directorate of Internal Audit on 30 November 2017</td>
</tr>
<tr>
<td>Quarter 2 report dated 24 January 2018 received by Directorate of Internal Audit on 31 Jan 2018</td>
</tr>
<tr>
<td>Quarter 3 report dated 30 April 2018 received by Directorate of Internal Audit on 03 May 2018</td>
</tr>
<tr>
<td>Quarter 4 report dated 20 July 2018 received by Directorate of Internal Audit on 01 August 2018</td>
</tr>
</tbody>
</table>

*References to Internal Audit meeting minutes.*

The Internal Audit minutes availed showed that there were 3 meetings in the FY 2017/18 held on 20 July 2018, 20 October 2017 and 20 April 2018.

In all these minutes there was no minute about submission or discussion of quarterly reports.
| The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations  
| Maximum 6 points on this performance measure. | Evidence that 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. | The LG did not provide information to the Council and the LG PAC on the status of implementation of internal audit findings because Pac did not review all the reports in order to provide recommendations to implement.  
PAC Secretary attributes this to the low composition of PAC. The committee had 3 members for a long time instead of 5. When one of the 3 members was absent no decisions could be taken because the quorum was not met hence few meetings were held. |
<p>| All internal Audit reports for FY 2017/2018 were submitted to LG PAC but not to the Accounting officer as elaborated below; |
| SUBMISSION TO LGPAC |
| Quarter 1- 26 October 2017. |
| Quarter 2- 27 April 2018 |
| Quarter 3- 30 April 2018 |
| Quarter 4- 20 July 2018 |
| BUT there is no evidence to show that the reports were submitted to the Accounting Officer. The Internal Auditor’s copies were not signed or stamped by the CAO neither could we find the CAO’s copies. |
| In reference to LG PAC minutes; |
| The few minutes found in the PAC minute file were about discussions for FY 2015/2016 quarterly reports. For example the meetings held on 29 Aug 2017, 27 July 2017, 23 Aug 2017 and 12 Sept 2017. |
| The PAC Secretary attributed this to PAC not being fullyt constituted for a long time. The committee had only 3 members for years instead of a minimum of 5. When one member failed to attend a meeting then the quorum was not met hence no decision could be made/passed. |</p>
<table>
<thead>
<tr>
<th>The LG maintains a detailed and updated assets register</th>
<th>• 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</th>
<th>The LG maintains an assets register but it is not updated. Office furniture and fittings schedule had no value attached to all it items. The land register had no valuer’s name and last value date as required by the Accounting Manual under form AC 33 (c). The Vehicles schedule had no values attached to the items as required in the Form AC 33 (b)-Accounting Manual.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The LG has obtained an unqualified or qualified Audit opinion</td>
<td>Quality of Annual financial statement from previous FY: • Unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0</td>
<td>The LG had an unqualified audit opinion as per AG’s Report. <em>(Source: Report of the Auditor General to Parliament for FY ended 30 June 2018; Annexure IV; 4.2)</em></td>
</tr>
</tbody>
</table>

**Governance, oversight, transparency and accountability**
<table>
<thead>
<tr>
<th>The LG Council meets and discusses service delivery related issues</th>
<th>• 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</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum 2 points on this performance measure</td>
<td>In FY 2017/18, Council sitting of 28/09/201: Presentation of committee reports</td>
</tr>
<tr>
<td></td>
<td>Report from Finance Planning, Management/admin &amp; CBS Committee; under Min.04/MDC/04/2017 Discussion and approval of Sub County Area Land Committees.</td>
</tr>
<tr>
<td></td>
<td>Min.06/MDC/04/2017 Council approved the request to Create new LCI boundaries</td>
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<td></td>
<td>Reports from Works, Health and Education Committee</td>
</tr>
<tr>
<td></td>
<td>Min. 05/MDC/04/2017 Council approved new school management committees and parents contributions towards children’s’ welfare while at school.</td>
</tr>
<tr>
<td></td>
<td>Min. 07/MDC/04/2017, Council approved request to form new ones and train them</td>
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<td></td>
<td>Report from Finance Planning Admin/Management and CBS Committee;</td>
</tr>
<tr>
<td></td>
<td>Council sitting on December 22nd, 2017, under Min. 03/MDC/05/2017. Council Approved establishment of national Oil Palm project in Mayuge</td>
</tr>
<tr>
<td></td>
<td>Min.04/MDC/05/2017; Council reviewed and discussed a report of Working committee on revenue. Discussed sharing modalities; the 20% Versus 15% of Local Revenue allocated to Council Activities</td>
</tr>
<tr>
<td></td>
<td>Council Sitting on May 30th, 2018; min 03/MDC/03/2018- Discussion of standing Committee reports on the budget and Annual work plan and approval of the budget for FY 2018/2019</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The LG has responded to the feedback/complaints provided by citizens</th>
<th>• Evidence that LG has designated a person to coordinate response to feedback (grievance/complaints) and responded to feedback and complaints: score 1.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum 2 points on this Performance Measure</td>
<td>Mayuge District CAO has appointed a staff Mr. Baligeya Ronald, the District Planner - Mayuge DLC as a coordinator to offer responses/feedback to citizens and on website. A letter dated July 1st, 2016; ref. CR/156/4, Signed by Mr. Muzige Paul for CAO was available.</td>
</tr>
<tr>
<td>The LG has responded to the feedback/complaints provided by citizens</td>
<td>• 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</td>
</tr>
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</tr>
<tr>
<td>Maximum 2 points on this Performance Measure</td>
<td>Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2</td>
</tr>
<tr>
<td>The LG shares information with citizens (Transparency)</td>
<td>• Evidence that the procurement plan and awarded contracts and amounts are published: score 1.</td>
</tr>
<tr>
<td>Total maximum 4 points on this Performance Measure</td>
<td>• 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.</td>
</tr>
</tbody>
</table>
### The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens

<table>
<thead>
<tr>
<th>Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>There was evidence that the district has communicated and explained guidelines, circulars and policies issued by the national level to LLGs eg Budget call circular FY 2018/19 was circulated to Senior Assistant Secretaries (SAS) by the planer on March 21st, 2018 TPC meeting and through emails. Under DTPC Min 05/06/2018; Dissemination of Guidelines and Policies, these included:</td>
</tr>
<tr>
<td>- DDEG Guidelines</td>
</tr>
<tr>
<td>- Local Government Planning Guidelines from NPA</td>
</tr>
<tr>
<td>- Key policy issues regarding budgeting FY 2018/19</td>
</tr>
<tr>
<td>- Indicative planning figures (Departments and LLGs) 2018/19</td>
</tr>
<tr>
<td>- Health guidelines</td>
</tr>
<tr>
<td>- Education guidelines</td>
</tr>
<tr>
<td>The LG has on various occasions shared and explained guidelines to technical staffs and urged them to follow disseminated guidelines and policies.</td>
</tr>
</tbody>
</table>

### The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens

<table>
<thead>
<tr>
<th>Evidence that LG during the previous FY conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc.) with the public to provide feedback on status of activity implementation: score 1.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The LG in the previous FY conducted discussions with citizens on May 7th, 2018 at Malongo Sub County Hqs. Issues in the baraza included: challenges and gaps in roads, fishing villages' complaints to enforcement by UPDF, education, health. A schedule of radio talk show was available with the Communications Officer (the LG had 5 hours contact in the month of May 2018 to provide feedback to citizens on Radio Stations; Busoga 1 FM, Smart FM, Radio and NBS FM all based in Jinja.</td>
</tr>
</tbody>
</table>

# Social and environmental safeguards
The LG has mainstreamed gender into their activities and planned activities to strengthen women’s roles. Maximum 4 points on this performance measure.

- 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.

Gender focal person (GFP) & DCDO provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities. For example,

DCDO conducted an Orientation of Heads of Departments (HoDs) and Sector on Gender mainstreaming took place on 6th August 2018. The report was dated 8th August 2018 and was on file. Cao informed HoDs that gender was a crosscutting issue and therefore it was a requirement that all departments have to integrate gender in the workplans and budgets. DCDO presented gender Mainstreaming Guidelines in departments and sectors.

The CAO assigned a CDO to the water sector to support water mobilisation activities i.e mobilization, sensitization and training of water user committees.

Report on Community Dialogues Meetings dated 30th April 2018. The activity was conducted between Feb-April 2018 and 5 meetings were held in 5 sub counties (Mpungwe, Magamaga Town Council, Bukatube, Busakira, and Buwaya). The objectives were; (i) To disseminate the National Strategy on ending teenage pregnancy and early marriage in Uganda; (ii) Share experiences, causes and drivers to teenage pregnancy and early marriages; and (iii) Highlight some possible solutions in ending this tragedy and also to develop action points to the solutions developed.
The LG has mainstreamed gender into their activities and planned activities to strengthen women’s roles. Maximum 4 points on this performance measure.

- Evidence that the gender focal point and CDO have planned for minimum 2 activities for current FY to strengthen women’s roles and address vulnerability and social inclusions and that more than 90% of previous year’s budget for gender activities/vulnerability/social inclusion has been implemented: score 2.

In the AWP for FY 2018/19 indicated that Mayuge district LG gender focal point and CDO planned 2 activities for current FY 2018/19 to strengthen women’s roles and address vulnerability and social inclusion. Activities included

Under Output 108107: Gender mainstreaming within the AWP 2018/19 generated on 19th May 2018 at 09:38am on page 87 of AWP 2018/19 estimated UGX 2 million, community based service (CBS) department planned for GBV coordination meetings, skills development for community activities, training of community activities, monthly engagement of community groups, conducting coordination meetings, monitoring & supervision of government programmes e.g YLP, FAL,

Social inquiry, juveniles traced & resettled, OVC followed up indicated on page 175 of AWP 2018/19.

Support to Women Councils.

Youths, Women and PWD projects monitored and supervised on page 174 of AWP 2018/19 estimated at UGX 15,113,000.

However, form the End of Year Financial Statements Final as at 30th June 2018 submitted to Office of Auditor General (OAG) in a letter dated 29th August 2018 signed and stamped by CAO on 28th August 2018 and bears a receipt stamp of OAG dated 31st August 2018 indicated that out of the total expenditure of UGX 484,946,937 less the General staff salaries of UGX 297,766,999 in FY 2017/18 for CBS, only UGX 182,179,938, was spent on gender activities/vulnerability/social inclusion (38.6%) which was less than 90%.

LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition. Maximum 6 points on this performance measure.

- 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

Records on files from a sample of 5 projects below showed that the all projects were screened by the Senior Environment Officer (SEO) using ESSF forms all signed and stamped by the Senior Environment Officer (SEO).

The sampled five (5) infrastructure project screened and have ESMP are;

Works:

i. Routine maintenance of 9.3km of Igamba-Girigiri Road has ESSF signed and stamped by SEO on 26th July 2017. The ESMP dated 25th Sept 2017 was on file signed by SEO only.

ii. Routine maintenance of 7.7km of Mayuge-Isikiro
Road has ESSF signed and stamped by SEO on 26th July 2017. The ESMP dated 25th Sept 2017 was on file signed by SEO only.

Education Sector:

iii. Construction of a 2 Classroom Block at Nabyama P/S in Bukabooli S/C has ESSF signed and stamped by SEO on 27th October 2017. The ESMP dated 25th Sept 2017 was on file signed by SEO only.

iv. Construction of a stance pit latrines at Kaaza P/S in Jagusi S/C has ESSF signed and stamped by SEO only on 25th September 2017. The ESMP dated 25th Sept 2017 was on file signed by SEO only.

Health Sector:

There was no infrastructure projects undertaken by the health sector in FY 2017/18.

Water Sector:

v. Construction of a Waterborne Toilet at Mayuge HCIII in Mayuge Town Council has ESSF signed and stamped by SEO only on 2nd August 2017. The ESMP dated 25th Sept 2017 was on file signed by SEO only.

vi. Construction of a Lined Pit Latrine at Jagusi HCII in Jagusi S/C had ESSF signed and stamped by SEO only on 27th September 2017. The ESMP dated 25th Sept 2017 was on file signed by SEO only. Project funded under DDEG.

vii. Construction and Siting Boreholes at Nanfungirwa, Buguwa, Buwalira and Namaiga in Buwaaya S/C, Mpungwe S/C and Kigandalo S/C respectively had ESSF signed and stamped by SEO only on 10th November 2017. The ESMP dated 18th November 2017 was on file signed by SEO only.

viii. Construction and Siting Boreholes at Ndiga B had ESSF signed and stamped by SEO only on 20th July 2017. The ESMP dated 24th July 2017 was on file signed by SEO only. Some of the health issues raised include the following; conduct hygiene campaign to raise awareness of careless disposal of defecation waste. Clear debris from drain around the pit latrine,
locate the boreholes at least 60m away from the latrines.
LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition.

Maximum 6 points on this performance measure

- Evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1

Mayuge District LG did not integrated environmental and social management and health and safety plans in the contract bid documents. For example, the 5 sampled bid documents/BoQs for all infrastructure projects listed below did not had environmental, social, health and safety issues and mitigation measures incorporated and budgeted for yet these infrastructure projects were screened using ESSF by the SEO and subsequently, the Environment and Social Management Plans (ESMPs) were developed for each infrastructure project in FY 2017/18.

- Construction of a 2 Classroom Block at Nabyaama P/S in Bukabooli S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00015) at a cost of UGX 57,420,201.


- Construction of a Waterborne Toilet under DDEG at Mayuge HCIII in Mayuge Town Council (Proc Ref No: MAYU 535 /WRKS/2017-18/00081) at a cost of UGX 10,000,000 only VAT inclusive.

- Construction of a Lined Pit Latrine at Jagusi HCII under DDEG in Jagusi S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00102) at a cost of UGX 11,000,000.


However, only contract BoQs for infrastructure projects under the Force on Account, for example, BoQs for the Force on Account for the Routine maintenance of 9.3km of Igamba-Girigiri incorporated environmental and social management and health and safety plans. Provision of environment mitigation measures was budgeted for at UGX 3 million.

Conclusion:

The district Engineer & the Engineering Assistant (MoES) should make use of the ESMP developed by the SEO to incorporate the environmental and social management and health and safety plans in the contract bid documents/BoQs. The environment officer and CDO should cost the mitigation measures indicated in the ESMP to inform the process of budgeting for mitigation measures by the sectors/ user departments.
LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition.

Maximum 6 points on this performance measure.

- Evidence that all projects are implemented on land where the LG has proof of ownership (e.g., a land title, agreement, MoU, etc.): score 1

Not all infrastructure projects were implemented on land where the LG has proof of ownership (e.g., a land title, agreement, MoU, etc.). For example, there was no evidence on file showing proof for the following projects:

Construction of a 2 classroom Block at St. Joseph Bukoba P/S at UGX 57,399,201 under SFG had an agreement between the School Management Committee and the District LG (Education Department) indicating roles and responsibilities of each party but had no mention of land endorsed by those with powers to sign on MoUs or agreements of land between the district LG and St. Joseph Bukoba P/S founding body.

However, Water sector had MoUs on file for water projects (Boreholes drilled and installed) on land that belonged to individuals but the boreholes served the communities.

| 0 |

LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition.

Maximum 6 points on this performance measure.

- Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1

Not all completed projects had Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO.

For example, out of the 43 infrastructure projects which were completed and those under defects liability period waiting for retention money to be paid, only 16 infrastructure projects had Environmental and Social Mitigation Certification Form completed and signed and stamped by the Environmental Officer and CDO in FY 2017/18. The Certification of Completion of Environment & Social Certification for LG project signed and stamped by the SEO only on 4th January 2018 and 11th January 2018 for the following projects were on file:


<table>
<thead>
<tr>
<th>Description</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</td>
<td>1</td>
</tr>
<tr>
<td>Evidence that the contract payment certificated includes prior environmental and social clearance (new one):</td>
<td>Score 1</td>
</tr>
<tr>
<td>Records on file indicated that the contract payment certificate included prior environmental and social clearance signed by the SEO and CDO. The sample of 5 projects listed below were certified by SEO &amp; CDO.</td>
<td></td>
</tr>
<tr>
<td>Construction of a stance pit latrines at Kaaza P/S in Jagusi S/C (Proc Ref No: MAYU 535 /WRKS/2017-18/00074)</td>
<td></td>
</tr>
<tr>
<td>Construction of a Waterborne Toilet under DDEG at Mayuge HCIII in Mayuge Town Council (Proc Ref No: MAYU 535 /WRKS/2017-18/00081).</td>
<td></td>
</tr>
<tr>
<td>Evidence that environmental officer and CDO monthly report includes a) completed checklists, b) deviations observed with pictures, c) corrective actions taken.</td>
<td>0</td>
</tr>
<tr>
<td>Records on file did not have monthly report bu SEO and CDO including: a) completed checklists, b) deviations observed with pictures, c) corrective actions taken. There was no Progress reports on the implementation of mitigation measures on Capital Development Projects on files by the signed and stamped by the Environmental Officer and CDO in FY 2017/18. SEO &amp; CDO certified projects without Progress reports on the implementation of mitigation measures attached to payment vouchers.</td>
<td></td>
</tr>
<tr>
<td>Summary of requirements</td>
<td>Definition of compliance</td>
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<td>-------------------------</td>
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<tr>
<td>Human resource planning and management</td>
<td>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</td>
</tr>
<tr>
<td></td>
<td>Evidence that the LG has deployed 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</td>
</tr>
<tr>
<td><strong>LG has substantively recruited all primary school teachers where there is a wage bill provision</strong></td>
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</table>
| • Evidence that the LG has filled the structure for primary teachers with a wage bill provision  
  o If 100%: score 6  
  o If 80 - 99%: score 3  
  o If below 80%: score 0 |
| Local Government filled the structure for primary teachers with a wage bill provision however vacant posts still existed as indicated in the recruitment plan teachers’ salaries wage bill was UGX 11,520,257,675.  
• Approved Head teachers were 142, filled 122 and vacant 20  
• Deputy Head teachers approved were 142, filled 120 and vacant 22.  
• Senior Education Assistant approved were 200 filled 169, and 31 vacant.  
• Education Assistant approved 1242 vacant 1293 |

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<th><strong>Maximun 6 for this performance measure</strong></th>
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| LG substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision of UGX 10,742,374,452 as presented in the PBS system.  
As indicated on file, Mayuge local government had all 4 positions school inspectors filled that included:  
• Ojwang Daniel was appointed on promotion as school inspector on 13th /06/2017 under District Service Commission minute number 13/06/2017  
• Baliraine Paul Magaju was appointed as school inspector on 15th /04/2014 under District Service Commission minute number 121/JDSC/2014.  
• Ntale Fu-adi Haruna was appointed as school inspector on 16th /06/2015 under District Service Commission minute number 75 (a) DSC/05/2015  
• Nabirye Allen Jalia was appointed on promotion on 13th/ 10/2009 under District Service Commission minute number 351/JDSC/09/09.  
• Tibenda Margret was appointed on promotion on 16th /06/2015st/06/2018 under District Service Commission minute number 75 (a) /DSC/05/2015. |
<table>
<thead>
<tr>
<th>Monitoring and Inspection</th>
<th>Evidence that the LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</th>
<th>LG Education department submitted a recruitment plan to HRM for the current FY 2018/2019 to fill positions of primary teachers: score 2</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of • Primary Teachers: score 2</td>
<td>As indicated on the submitted recruitment plan for current FY 2018/2019, the following vacant posts in the Education Department were submitted to CAO 23rd /08/2018. For example Approved Head teachers were 142, filled 122 and vacant 20 Deputy Head teachers approved were 142, filled 120 and vacant 22. Senior Education Assistant approved were 200 filled 169, and 31 vacant. Education Assistant approved 1242 vacant 1293 vacant 0. Note: However current F/Y 2018/2019 recruitment plan the HR was still in the process of submitting it to the District Service Commission.</td>
</tr>
<tr>
<td>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</td>
<td>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of • School Inspectors: score 2</td>
<td>LG Education department didn’t submit a recruitment plan to HRM for the current FY 2018/2019 to fill positions of inspectors since the structure for school inspectors was already filled as indicted in the staff structure.</td>
</tr>
</tbody>
</table>
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:

- 100% school inspectors: score 3

- There are 4 school inspectors in the LG and all of them were appraised according to appraisal forms on their personal files. These are the following:

Ms Nabirye Allen Jalia was appraised by Mr. Nadiope William on 1st July 2018

Tibenda Margret was appraised by Mr. Nadiope William on 1st July 2018

Ojwang Daniel was appraised by Mr. Nadiope William on 1st July 2018

Ntale Haruna F. was appraised by Mr. Nadiope William on 1st July 2018
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 90 - 100%: score 3
- 70% and 89%: score 2
- Below 70%: score 0

- There are 85 Head teachers in the district. 8 personal files of the Head Teachers were selected at random and the following was discovered:

  1. Mr. Kunya Alfred
     Mwezi P/S Mpugwe Sub County
     Performance agreement seen but not signed by appraiser and no performance report.

  2. Mr. Kirya Saibu
     Bukawongo P/S, Imanyiro Sub County
     Performance agreement seen on file but not signed by appraiser. There was no performance report.

  3. Mr. Kakuma David
     Walukuba P/S, Kigandalo Sub County
     No performance agreement and report on file.

  4. Mr. Gubi Godffrey
     Bugadde P/S, Kityerera Sub County
     Performance agreement seen but not signed by sub county chief. No report on file.

  5. Mr. Basomerani Johnson
     Lutate P/S, Kityerera Sub County
     Performance agreement and report not on file.

  6. Mr. Dikusooka Charles
     Bukagabo P/S, Malongo Sub County
     Performance agreement seen but not signed by sub county chief. No report on file.

  7. Mr. Kitya Saibu
     Bukawongo P/S, Imanyiro Sub County
     Performance agreement seen but not signed by sub county chief. No report on file.

  8. Aliwayoki Cissy
     Baliita P/S, Mpugwe Sub County
     Performance agreement seen but not signed by sub county chief. No report on file.

No appraisal was done.
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

LG Education department effectively communicated and explained guidelines, policies, circulars issued by the national level in the FY 2017/18. As presented on file these circulars, guidelines and policies that were communicated included the following:

4th /04/ 2018 Immunization against cancer of the cervix (HPV), 26th /03/2018 enforcement closure of illegal schools, 9th/ 05/2017 circular No 8 Adherence to school calendar, 15th /02/ 2018 Enforcement of standard operating procedures for private schools in Uganda and on 25th /08/2017 Adherence to school calendar.

Guidelines that were communicated included:

1st/07/2018 communicated adherence to universal primary education on 1st/07/2018 communicated adherence to universal primary Education and 25th/11/ 2017 guidelines on school charges.

As the 5 sampled schools most circulars that were received included:

- At Peterson Memorial P/S received Adherence to UPE guidelines, Management of school attendance register, Guidelines on school charges, Adherence to school calendar.

- Bugadde P/S received on 25th /11/2017 guidelines on school charges, 4th /04 /2018 received immunisation against cancer of the cervix, 5th /03/ 2018 received monitoring utilization of UPE funds and management of school attendance registers, on 25th /08/2017 received Adherence to school calendar.

- Ikulwe P/S received management of school attendance register on 25th /11/2017 received deadlines on school charges and management of school attendance registers.

- Baitambogwe P/S, on 4th /04/2018 received immunization against cancer of the cervix, on 25th /11/2017 received deadlines on school charges and management of school attendance registers.

- Wabulungu P/S received management of attendance registers, on 2nd /10/2017 received hygiene in education institutions, on 25th /11/2017 received guidelines on school charges and on 25th/08/2017 Adherence to school calendar.
<table>
<thead>
<tr>
<th>Maximum 3 for this performance measure</th>
<th>Maximum 12 for this performance measure</th>
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<tbody>
<tr>
<td><strong>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</strong></td>
<td><strong>The LG Education Department has effectively inspected all registered primary schools</strong></td>
</tr>
</tbody>
</table>
| *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* | *Evidence that all licensed or registered schools have been inspected at least once per term and reports produced:*
| For example: Meeting held at Bunya SSS on 6th 02 2018 DEO communicated to the head teachers under minute number 04/10/ 17 advised head teachers to update pupils attendance registers through their class teachers, staff attendance register both to be signed on arrival in the morning and afternoon for departure | For example: Term 1 (quarter 2) 142 public schools were inspected and 48 private schools. Reports were submitted to CAO on 13th /03/2018 |
| | Term 2 (quarter 3) inspected 139 public schools and 31 private schools. Reports were submitted to CAO on 2nd/04/2018 |
| | Term 3 (quarter 4) inspected 140 public schools and 75 private schools Reports were submitted to CAO on 15/12/2017 |
| | As the sampled schools it was observed on file that schools were inspected at least twice a term and reports produced as observed in the visitors book |
LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations.

Maximum 10 for this performance measure.

- 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

Education department discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY 2017/2018.

The following meetings were held during Education departmental meetings:

Education departmental meeting held on 25th /06/2018 under the tree shed under number 5 presented inspection reports and discussed on the way forward. Also under minute number 5/Educ/2018, generally the issues of teaching and learning was rated good at 64% very good 4%, fair 28% and poor 4% and recommended DEO to take action and write to the CAO to recruit more teachers on replacement basis to feel the gap as there was high teacher pupil ratio in classes especially P1 to P3.

Meeting held on 6th /09/2017 in the DEOs Office under minute number 3/9/2017, DEO raised that poor performance was coming out of poor appraisal of teachers and head teachers. Recommended that all inspectors to appraise all the teachers in their catchment areas and DEO and CAO were to follow up on the senior assistant secretaries about the appraisal since it was in their mandate.

Meeting held on 25th /06/2018 under the tree shed under minute number 05/Educ/2018 inappropriateness of teaching methods, consciousness of learners with special needs, ineffectiveness of assessment strategies of learners with SNE. Recommended that both teachers and school inspectors that were not inducted in the early grade reading methodology and inclusive method of teaching were to be trained at center coordinating levels by CCTs and DIS. As well as regular meaningful support supervision at least twice per term per school should be conducted effective the next FY 2018/2019 by DEO, DIS, CCTS and Head teachers.
LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations.

**Maximum 10 for this performance measure**

<table>
<thead>
<tr>
<th>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</th>
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<tbody>
<tr>
<td>LG Education department submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES) in the previous FY 2017/2018 on 11th/09/2018. However evidence was based on stamp no acknowledgement forms that were on file</td>
</tr>
<tr>
<td>Evidence that the inspection recommendations are followed-up: score 4.</td>
</tr>
<tr>
<td>Inspection recommendations are followed. As presented on file, to address the inadequate pupil teacher ratio the DEO wrote to CAO proposing to deploy newly appointed education assistants on 17th/04/2018 which was accepted on 17th/04/2018.</td>
</tr>
<tr>
<td>School Level</td>
</tr>
<tr>
<td>LG Education department provided inspection recommendations and followed them up. It was observed on file that on 9th/04/2018 the head teachers held a meeting at the DEOs office. Also in the sampled schools it was observed that inspectors shared with the head teacher’s inspection reports and were followed up.</td>
</tr>
<tr>
<td>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>Evidence that the LG has submitted accurate/consistent data:</td>
</tr>
<tr>
<td>o List of schools which are consistent with both EMIS reports and PBS: score 5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</th>
<th>Maximum 10 for this performance measure</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidence that the LG has submitted accurate/consistent data:</td>
<td>There was evidence on file that the education department submitted accurate/consistent data (i.e. enrollment data which are consistent with both EMIS reports and PBS) in current FY 2018/19. Both PBS and EMIS reports submitted on 10th/03/201 were all consistent with a total enrollment of 100741 as presented on PBS system.</td>
<td>5</td>
</tr>
<tr>
<td>• Enrolment data for all schools which is consistent with EMIS report and PBS: score 5</td>
<td>However this wasn’t indicated on file only observed on clearance email sent back to the DEO.</td>
<td></td>
</tr>
</tbody>
</table>

Governance, oversight, transparency and accountability
<table>
<thead>
<tr>
<th>The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum 4 for this performance measure</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Standing Committee sitting on March 21st, 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Min. 03/WHEC/03/2018 discussion of service delivery issues of:</td>
</tr>
<tr>
<td>• Discussion of supervision, monitoring and performance reports</td>
</tr>
<tr>
<td>• Discussion of PLE performance results of 2017, these were very poor; why over 200 pupils were in Division X and escalating drop outs especially girl child, weak monitoring and supervision of schools</td>
</tr>
<tr>
<td>• Discussion of SMCs 2018, low levels of staffing and motivation of teachers</td>
</tr>
</tbody>
</table>

In a standing committee meeting held on May 23rd, 2018, under Min.03/WHEC/05/2018; Presentation and discussion of education sector work plan FY 2018/19
The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council. Maximum 4 for this performance measure.

- Evidence that the education sector committee has presented issues that require approval to Council: score 2
- There was evidence that sectoral committee on education presented to Council issues for approval.
- Council committee meeting held on April 11th, 2018.
- Min/ WHEC/27/2018 recommended to Council approval of SMCs 2018;
  - Min WHEC/27/2018 recommended to council approval of education sector work plan FY 2018/19
  - Min. 05/MDC/04/2017 Council received education sector request to approve new school management committees and parents contributions towards children’s welfare while at school. Min. 07/MDC/04/2017, Council approved request to form new SMCs and train them. To lobby government for more funding for wage bill to accommodate more teachers.
- Standing Council committee sitting on Dec.14th, 2018 recommended to Council to approve the following; under Min.02/ WHEC/12/2017
  - Action on teachers deleted from the payroll due to contracting loans beyond 50% of their salaries
  - Enforcing parents paying for mid-day meals for learners across schools
  - District to write to lobby MoES and MoFPED to increase on the size of grant
  - Health sector committee, submitted to full Council a request to approve the Budget and Annual Work plan for approval for FY 2018/2019. Council sitting on May 30th, 2018; under Min 03/MDC/03/2018 discussion of standing Committee reports, Council considered the recommendations.

Primary schools in a LG have functional SMCs
Maximum 5 for this performance measure

- Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO/ MEO)
  - 100% schools: score 5
  - 80 to 99% schools: score 3
- There was evidence on file to show that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO and MEO)
- As indicated in the 5 random sampled SMC school reports submitted to the DEO. The reports indicated the following:
  - Ikulwe P/S held SMC meeting 26th/ 06 20178 and under minute number 2/SMC/06/2018, the head teacher requested the SMC to approve a budget of 900,000 from development fee collections to renovate some classes because teaching and learning
environment was not conducive for learners, Meeting held on 28th/02/2018 under minute number 4/PM/02/2018 head teacher reminded parents to provide scholastic materials and also feed their children while at school.

Mitimiti P/S meeting was held on 14th 06/2018, under minute number 7/4/6/18 budget estimates were approved and allowed head teacher to spend as per approved work plan, meeting held on 23rd / 05 /2018 under minute number 5/23/5/2018 the headmaster explained to the SMC to sensitize parents in language training in teaching lower classes in early grade reading, meeting 23rd/02/2018 under minute number 7/23/2/18 chairperson SMC requested head teacher to fight late coming and absenteeism among learners and teachers.

Kyebando P/S meeting held on 25th /07/2017 under minute number 3/7/17 head teacher called on SMC members to pass a resolution to allow the old block to be used as a nursery section since were many under aged children in P1, meeting held on 27th/04/2018 under minute number 4/2017 resolved that they should cut two big trees to make more furniture and shutters for classes without

St Joseph Kabuki P/S meeting held on 13th/07/2017 under minute number 3/SMC /2018 teaching and learning emphasis on early grade reading emphasis on cluster supervision to be headed by the CCT, meeting held on 14th /05/2017 budget and work plan approved, meeting held on 24th/05/2018 discussed about academic performance and improvement, meeting held on 24th/05/2018 under minute number 3/SMC/2018 environment and sanitation improvement of the school

Buggadde P/S meeting held on 10th /06/2018 under minute number iv/6/2018 head teacher informed SMC members that they have received 3,790,000 and requested them to itemize it but requested for prioritization of debt clearance, meeting held on 27th/03/2081 under minute number iii/3/2018 monitoring and supervision and guidance of all teachers which was supposed to be done by head teacher deputy head teacher senior education assistant and supervised by SMC,

Meeting held on 20th /08/2017 under minute number vi/8/2017 head teacher requested the senior woman teacher to use the old office as a safe space for girls and also changing room in case there was emergencies and also to allocate funds for buying emergency pads and emergency uniforms.
The LG has publicised all schools receiving non-wage recurrent grants. Maximum 3 for this performance measure.

- Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3

LG Education department publicized all the 142 schools receiving non-wage recurrent grants through posting on public notice board for quarter 1, 3 and 4. For example:

Bulondo P/S Quarter 1 (UGX 1,056,480) Quarter 3 (UGX 1,056,480) and Quarter 4 (UGX 1,056,480), Kabuka PS Quarter 1 (UGX 1,315,721), Quarter 3 (UGX 1,315,720) Quarter 4 (UGX 1,315,720) and Wabulungu P/S Quarter 1 (UGX 4,604,985), Quarter 3 (UGX 4604985), and Quarter 4 (UGX 4,604,985).

However non-wage recurrent grants were displayed in the DEOs office.

Not all the 5 sampled schools had publicized non-wage recurrent grants for public viewing in the head teacher’s office. I.e.

Bugadde Quarter 1 (UGX 3,709,000), Quarter 2 (UGX 3,667,000), Quarter 3 (UGX 3,709,000)

Ikulwe P/S Quarter 1 (UGX 2,480,000), Quarter 2 (UGX 2,470,000), Quarter 3 (UGX 2,500,000).

Baitambogwe P/S Quarter 1 (UGX 2,890,000,000), Quarter 2 (UGX 2,971,056,000), Quarter 3 (UGX 2,971,056). However only Quarter 2 and Quarter 3 was displayed.

Wabulungu P/S Quarter 1 (UGX 4,604,985) Quarter 2 (UGX 4,490,000), Quarter 3 (UGX 4,604,985)

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

All investment items in the approved Sector annual work plan and budget were submitted on 29th/04/2017. For example:

Construction of a two classroom block at Nabyama P/S UGX 58,000,000 was submitted on 29th/04/2017.

Construction of a two classroom block at St Joseph Bukoba P/S UGX 58,000,000 was submitted on 29th/04/2017.


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Financial management and reporting

The LG Education department has certified and initiated payment for supplies on time.

Maximum 3 for this performance measure

The Education department certified and recommended suppliers for payment on time as evidenced below:

1. M & S Contractors Limited for construction of 2 classroom block at Nabyama Primary school under SFG

   Requisition Amount-Shs 22,292,280
   Requisition date- 11 September 2017
   DEO Certification date- 16 October 2017

2. Sonsole General Contractors Limited for construction of 5- stance lined pit latrine at Kaaza Island Primary school under SFG

   Requisition Amount- Shs 26,788,484
   Requisition date- 15 December 2017
   DEO Certification date- 21 December 2017

NOTE: All sampled suppliers had contracts that did not have a clause about payment terms/periods therefore, the certification ceiling/deadline used in this case was 2 months after completion/requisition.
<table>
<thead>
<tr>
<th>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit. Maximum 4 for this performance measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>The department submitted the annual performance report for the previous FY of all quarter.</td>
</tr>
<tr>
<td>Q1 submitted on 20th /12/2017</td>
</tr>
<tr>
<td>Q2 submitted on 6th /02/2018</td>
</tr>
<tr>
<td>Q3 submitted on 13th /05/2018</td>
</tr>
<tr>
<td>Q4 submitted on 3rd /08/2018</td>
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</tbody>
</table>

( LG submitted Q4 very late)

<table>
<thead>
<tr>
<th>LG Education has acted on Internal Audit recommendation (if any) Maximum 4 for this performance measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>The sector did not submit a status of implementation for all the queries in the Quarterly reports. Sometimes the queries were responded to verbally as explained by the District Internal Auditor.</td>
</tr>
<tr>
<td>There were no sector letters and notes addressed to CFO or IA.</td>
</tr>
</tbody>
</table>

<p>| Social and environmental safeguards |</p>
<table>
<thead>
<tr>
<th>LG Education Department has disseminated and promoted adherence to gender guidelines</th>
<th>Maximum 5 points for this performance measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Evidence that the LG Education department in consultation with the gender focal person 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</td>
<td>LG Education department in consultation with the gender focal person disseminated guidelines from Department of gender labour and community development dated 6th /09/2017 were disseminated during the meeting that was held on 5th/12/2017 and 6th / 12/2017 at Ikulwe P/S resource center to the senior woman and senior man purposely to disseminate sexual reproductive health information to learners, create safe spaces in schools, sensitzation of sexual reproductive health issues during PTA meetings. As indicated in the report for disseminating sexual reproductive health program in schools.</td>
</tr>
<tr>
<td>LG Education Department has disseminated and promoted adherence to gender guidelines</td>
<td>Maximum 5 points for this performance measure</td>
</tr>
<tr>
<td>• 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</td>
<td>There was no evidence on file showing that LG Education department in collaboration with gender department issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools</td>
</tr>
<tr>
<td>LG Education Department has disseminated and promoted adherence to gender guidelines</td>
<td>Maximum 5 points for this performance measure</td>
</tr>
<tr>
<td>• Evidence that the School Management Committee meets the guideline on gender composition: score 1</td>
<td>Not all the 5 sampled schools met the guidelines on gender composition i.e. a third of SMC members must be female minimum. For example: Peterson Memorial P/S SMC had 3 females and 9 males. Bugadde SMC members were 12, Ladies 4 Men 8. Ikulwe P/S SMC members were 12, 3 females and 9 males. Baitambogwe SMC members were 12, 10 men and 2 females. Wabulungu P/S SMC members were 12, 2 females and 10 males.</td>
</tr>
<tr>
<td>LG Education department has ensured that guidelines on environmental management are disseminated and complied with</td>
<td>• 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.</td>
</tr>
<tr>
<td>---</td>
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</tr>
<tr>
<td>LG Education department has ensured that guidelines on environmental management are disseminated and complied with</td>
<td>• 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</td>
</tr>
<tr>
<td>LG Education department has ensured that guidelines on environmental management are disseminated and complied with</td>
<td>• The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 1</td>
</tr>
</tbody>
</table>
### Human resource planning and management

<table>
<thead>
<tr>
<th>Summary of requirements</th>
<th>Definition of compliance</th>
<th>Compliance justification</th>
<th>Score</th>
</tr>
</thead>
</table>
| LG has substantively recruited primary health care workers with a wage bill provision from PHC wage | Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY  
- More than 80% filled: score 8  
- 60 – 80% - score 4  
- Less than 60% filled: score 0 | The wage IPFs for FY 2018/19 for Mayuge DLG was available and the PHC non-wage recurrent was UGX 348, 919, 082.  
Approved staff structure was seen. The Wage bill provision for health department 2018/19 was available and it was UGX 3,692,884,506.  
The public service performance agreement for FY 2017/18 for the DHO signed on 5/7/2017 was available.  
Staffing norms were seen on the computer with no evidence of submission and percentage computed to be 79% filled | 4     |
| The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department | Evidence that Health department has submitted a comprehensive recruitment plan/re- quest to HRM for the current FY, covering the vacant positions of primary health care workers: score 6 | The health sector recruitment plan proposals 2018/19 dated 18th/07/2018 was communicated to the CAO's office by the DHO | 6     |
The LG Health department has conducted performance appraisal for Health Centre IVs and Hospital In-charge and ensured performance appraisals for HC III and II in-charges are conducted.

Maximum 8 points for this performance measure.

<table>
<thead>
<tr>
<th>Evidence that all health facilities in-charges have been appraised during the previous FY:</th>
</tr>
</thead>
<tbody>
<tr>
<td>o 100%: score 8</td>
</tr>
<tr>
<td>o 70 – 99%: score 4</td>
</tr>
<tr>
<td>o Below 70%: score 0</td>
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</tbody>
</table>

- Evidence from health in-charge facility list, appraisal reports and personal files, it was established that there are 42 health facilities in the district. 8 files of health in-charges selected at random revealed that 6 out of 8 these staff were not appraised because there was no evidence on file showing appraisal. 2 staff appraised out of 8 gives 25 percent only.

- Examples are:
  1. Buyinza Joab
     Clinical Officer, Malongo HC III Appraised on 5th July 2018 by Dr. Nabangi Charles
  2. Abenakyo Lovisa
     Enrolled Nurse, Bute HC II Not appraised
  3. Namuganza Lydia
     Enrolled Nurse, Muggi HC II Not appraised
  4. Mwima Patrick
     Senior Clinical Officer Bwaiswa HC III Not appraised
  5. Dr. Gwaluka
     Senior Medical Officer, Kigandalo HC IV Appraised by Dr. Nabangi Charles on 1st August 2018 but no stamp
  6. Basembeza Asuman
     Orthopaedic Technician, Kityerera HC IV not appraised
  7. Kyakuware Sophia
     Enrolled Nurse, Bukatube HC II not appraised
  8. Kato Francis Xavier
     Enrolled Nurse, Sagito HC II not appraised
<table>
<thead>
<tr>
<th>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.</th>
<th>• 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</th>
<th>There was evidence for health workers' on deployment with the budget per person. A wage budget per person and cost center was available for FY2018/19 was available.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum 4 points for this performance measure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Monitoring and Supervision</td>
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</tbody>
</table>
The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities

<table>
<thead>
<tr>
<th>Maximum 6 for this performance measure</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evidence that the DHO/MHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities:</strong> score 3</td>
</tr>
</tbody>
</table>

Evidence of communication of circulars, guidelines, and policies from the Ministry of Health by the DHO's office to different in-charges were seen and they included:

- Introduction of New TB Pediatric formulations RHZ 75/50/150mg, Ethambutal 100mg and RH 75/50mg dated 30/08/2017
- Switching from TT vaccine to TT (TD) Vaccine dated 3/5/2018
- Immediate withdrawal of the National Guidelines and service standards for sexual and reproductive health and rights 4th edition August 2017 dated 21st/11/2017
- Circular: The Surge initiative to rapidly increase the number of individuals enrolled on ART to meet the meet national targets for HIV control dated 24th/05/2018
- Availability of Amox. 250mgs dispersible tablets dated 20th /06/2018
- Guidance on implementing the new HIV testing services (HTC) policy and implementation guidelines 2016, dated 2nd /05/2018.
- Cholera Alert – ministry of health issues mitigation measures a head of rainy season dated 11/10/2017
- Circular No. 01/18NMCP/2018 dated 24/02/2018
- General supply chain guidance on role out of consolidated guidelines 2016 dated 14th/08/2017
- Submission of bed capacities of general hospitals in HCIVs dated 25th/07/2017

In Kigandalo HCIV, evidence of circulars received included:

- Cholera Alert – ministry of health issues mitigation measures a head of rainy season dated 11/10/2017
- Guidance on implementing the new HIV testing services (HTC) policy and
Maximum 6 for this performance measure

implementation guidelines 2016, dated 2nd/05/2018.

• Circular: The Surge initiative to rapidly increase the number of individuals enrolled on ART to meet the meet national targets for HIV control dated 24th/05/2018

• Circular No. 01/18NMCP/2018 dated 24/02/2018

• Immediate withdrawal of the National Guidelines and service standards for sexual and reproductive health and rights 4th edition August 2017 dated 21st/11/2017

The minutes with the DHO that was available that had issues of the guideline were dated 14/09/2017.

In Kityerera HCIV, evidence of circulars received included:

• Cholera Alert – ministry of health issues mitigation measures a head of rainy season dated 13/10/2017

• Switching from TT to TD dated 17th/05/2018

• Guidance on implementing the new HIV testing services (HTC) policy and implementation guidelines 2016, dated 15th/05/2018.

• Circular: The Surge initiative to rapidly increase the number of individuals enrolled on ART to meet the meet national targets for HIV control dated 24th/05/2018

• Circular No. 01/18NMCP/2018 dated 13/04/2018

The minutes with the DHO that was available that had issues of the guideline were dated 6th/10/2017 and meeting discussed documentation and timely reporting in HMIS.

Another meeting with DHO was held on 7th/11/2017 and issues discussed were TB documentation, TB screening and staff appraisal.

At Francis hospital, Buluba the DHO is a member of the hospital board of governors.
At Baitambogwe HCIII following circulars were found at the facility:

• Switching from TT vaccine to TT (TD) Vaccine dated 14/5/2018

• Immediate withdrawal of the National Guidelines and service standards for sexual and reproductive health and rights 4th edition August 2017 dated 4th/12/2017

• Circular: The Surge initiative to rapidly increase the number of individuals enrolled on ART to meet the meet national targets for HIV control dated 5th/06/2018

• Guidance on implementing the new HIV testing services (HTC) policy and implementation guidelines 2016, dated 15th/05/2018.

• Cholera Alert –ministry of health issues mitigation measures a head of rainy season dated 20/10/2017

• General supply chain guidance on role out of consolidated guidelines 2016 dated 30th/08/2017

Meeting with DHO at took place on 11th/01/2018 and discussed duty roster ,and absenteeism
The LG Health Department has effectively provided support supervision to district health services.

Maximum 6 points for this performance measure

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>July-September 2017</td>
<td>Report dated 05/10/2017</td>
</tr>
<tr>
<td>April -June 2018</td>
<td>Report dated 05/07/2018</td>
</tr>
<tr>
<td>January-March 2018</td>
<td>Report dated 03/04/2018</td>
</tr>
<tr>
<td>October-December 2017</td>
<td>Report dated 09/01/2018</td>
</tr>
<tr>
<td>24th/10/2017</td>
<td>Monitoring of delivery of vaccines.</td>
</tr>
<tr>
<td>20th/04/2018</td>
<td>Integrated support supervision which recommended waste management and display waste management of SOPS.</td>
</tr>
<tr>
<td>25th/04/2018</td>
<td>Delivery of vaccines and emphasized documentation and tally sheets.</td>
</tr>
<tr>
<td>27th/07/2017</td>
<td>26th/09/2017 for HMIS follow up and mentorship</td>
</tr>
<tr>
<td>08/05/2018</td>
<td>Data improvement and immunization.</td>
</tr>
</tbody>
</table>

In Kityerera HCIV, evidence from integrated support supervision from the DHO's office seen in the DHOs were:

- 24th/10/2017 for monitoring of delivery of vaccines.
- 20th/04/2018 for integrated support supervision which recommended waste management and display waste management display of SOPS.
- 25th/04/2018 for delivery of vaccines and emphasized documentation and tally sheets.
- 27th/07/2017 and issues discussed were supervision and support supervision;
- On 26/09/2017 for HMIS follow up and mentorship
- On 7th/11/2017 for data improvement and immunization.
- 08/05/2018 for data validation exercise.
The LG Health Department has effectively provided support supervision to district health services. Maximum 6 points for this performance measure. 

Evidence that DHT/MHT has ensured that HSD has supervised lower level health facilities within the previous FY:
- If 100% supervised: score 3
- 80 - 99% of the health facilities: score 2
- 60% - 79% of the health facilities: score 1
- Less than 60% of the health facilities: score 0

HSD supervision reports to lower level health units submitted to the DHO’s office and received and noted included:
- April- June 2017 Report for Bunya West HSD dated 20th/07/2017
- Quarter III Report for Bunya South HSD dated 28th/04/2018
- Quarter III Report for Bunya East HSD dated 9th/04/2018
- 2017/18 Report for Bunya South HSD dated 14th/07/2018
- Quarter II Report for Bunya south HSD dated 15th/03/2018
- Quarter II Report for Bunya East HSD dated 9th/01/2018
- Quarter IV Report for Bunya East HSD dated 9th/02/2018

In addition, integrated support supervision was done in all health center III that were sampled and recommendations made for corrective action with evidence of reinforcements from the DHOs support visits.

The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up. Maximum 10 points for this performance measure.

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

The recommendations from DHT and HSD supervision reports found for each report included the following:
- July-September 2017 report dated 05/10/2017
- Recommendations:
  - Follow up on plotting of immunization charts at health facilities.
  - DCCT to ensure supply of cards and charts
- April -June 2018 report dated 05/07/2018
- Recommendations:
  - Facilitation for supervision recommended
- January- March 2018 report dated 03/04/2018
Recommendations:
- Disciplining of staff who are absentee themselves
- Intensification of support supervision
October-December 2017 report dated 09/01/2018

Recommendations:
- Analysis and utilization of EPI data
April- June 2017 Report for Bunya West HSD dated 20th/07/2017

Recommendations:
- Transfer of vaccines
- Updating stock cards
Quarter III Report for Bunya South HSD dated 28th/04/2018

Recommendations:
- Infrastructure and referral system improvement
Quarter III Report for Bunya East HSD dated 9th/04/2018

Recommendations:
- Analysis and utilization of EPI data
- Repairing vaccine fridge
- Graph charts plotting mentorship
2017/18 Report for Bunya South HSD dated 14th/07/2018

Recommendations:
- Orienting staff on charts
- Providing child health cards
Quarter II Report for Bunya south HSD dated 15th/03/2018

Recommendations:
- Provision of HIV testing kits to HCII s
Quarter II Report for Bunya East HSD dated 9th/01/2018

Recommendations:
### Absenteeism

- Fencing follow up

Quarter IV Report for Bunya East HSD dated 9th/02/2018

**Recommendations:**
- Fumigating bats
- Use of data, charts

### The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up

Maximum 10 points for this performance measure

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

Evidence of recommendations followed up activities for corrective action included:
- Communication on absenteeism from duty dated 22/06/2018 for Richard kabala
- Chronic absenteeism from duty letter for 7 staff members dated 18th/06/2018
- A letter forwarding Mr. Arineitwe for absconding from the facility dated 23/04/2018.

### The LG Health department has submitted accurate/consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH

Maximum 10 for this performance measure

- Evidence that the LG has submitted accurate/consistent data regarding:
  - List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10

Evidence of consistent data submitted in line with PBS was available and included a list of facilities receiving PHC funding was seen.

### Governance, oversight, transparency and accountability

- Absenteeism
- Fencing follow up
<p>| 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 |
| Council Standing Committee sitting on March 21s, 2018, under Min .03/WHEC/03/2018 |
| - Presentation and discussion of Health sector quarterly report (monitoring and support supervision report). Issues were; Absenteeism of health workers, support supervision, performance assessment report. |
| - DHO’s report on status of health in Mayuge for the period Oct-Dec. 2017 Committee sitting on Dec. 14thth, 2017; Min. 02/WHEC/12/2017: DHO’s report on health in the district. |
| - Perpetual absenteeism of health workers at various health centres in guise of attending to outreaches |
| - HIV Testing kits for pregnant mothers not available at HCII where majority of mothers go. |
| Standing committee on health held a meeting on 3rd/05/2018. Min. 03/WHEC/05/2018 ; presentation and discussion of health sector work plan FY 2018/19 |</p>
<table>
<thead>
<tr>
<th>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</th>
<th>• Evidence that the health sector committee has presented issues that require approval to Council: score 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum 4 for this performance measure</td>
<td>Council committee sitting on 14th / 12/ 2017</td>
</tr>
<tr>
<td>Min03/WHEC/12/2018 discussion of service delivery issues, supervision, monitoring and performance assessment report and PAC report</td>
<td>• Recommendation for approval of members of the HUMCs;</td>
</tr>
<tr>
<td>• Strengthen malaria control interventions,</td>
<td>• Extending HIV testing care and treatment at HCIs to pregnant mothers</td>
</tr>
<tr>
<td>• Support to implement sector performance assessment findings, and</td>
<td>• Upgrading Mayuge HCI to a health sub district</td>
</tr>
<tr>
<td>Standing committee meeting of 3rd/05/2018. Min. 03/WHEC/05/2018; presentation and discussion of health sector work plan FY 2018/19: and recommending to Council for approval.</td>
<td>Council sitting on May 30th, 2018; under Min. 03/MDC/03/2018- discussion of standing Committee reports, Council considered the recommendations.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The Health Unit Management Committees and Hospital Board are operational/functioning</th>
<th>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum 6 points</td>
<td>• If 100% of randomly sampled facilities: score 6</td>
</tr>
<tr>
<td></td>
<td>• If 80-99 %: score 4</td>
</tr>
<tr>
<td></td>
<td>• If 70-79: %: score 2</td>
</tr>
<tr>
<td></td>
<td>• If less than 70%: score 0</td>
</tr>
<tr>
<td>HUMC meeting minutes in Mayuge HCIII obtained were:</td>
<td>HUMC meeting minutes in Kityerera HCIV obtained were:</td>
</tr>
<tr>
<td></td>
<td>Quarter 01 minutes held on 30th/09/2017, discussed was human resources and medicines and supplies among others</td>
</tr>
<tr>
<td></td>
<td>Quarter 02 minutes held on 21st /12/2017 discussed was infrastructure renovation, environment and sanitation among others</td>
</tr>
<tr>
<td></td>
<td>Quarter 03 minutes held on 18th/04/2018 discussed was human resources, environment and sanitation and security among others</td>
</tr>
<tr>
<td></td>
<td>Quarter 04 minutes held on 29th/06/2018 discussed was PHC funding, land, medicines and supplies and Hepatitis B screening.</td>
</tr>
</tbody>
</table>
Quarter 01 minutes held on 2nd/10/2017, discussed were immunization coverage, hygiene and sanitation as well as infrastructure and land demarcation.

Quarter 02 minutes held on 20st /12/2017 which discussed issues about service delivery and functionalizing theater as well as security (fencing the facility).

Quarter 03 minutes held on 17th/04/2018 and issues discussed were personnel absence.

Quarter 04 minutes held on 14th/07/2018 and main issues discussed were immunization, Hepatitis B vaccine, monitoring of staff absenteeism and construction of the latrine.

HUMC meeting minutes in St Francis Hospital Buluba obtained were dated 06/12/2017; 17/10/2017; 9/11/2017 and 14th/03/2018; 29/01/2018. Other minutes for other quarters were available but not signed. The issues discussed included; establishment of VHT members; training of CHEWS; staff management; infrastructure maintenance; reporting system among others.

HUMC meeting minutes in Baitambogwe HCIII obtained were:

Quarter 01 meeting held on 28th/09/2017 and staff transfers and replacement were discussed. The HUMC re-composition was done at the same meeting.

Quarter 02 meeting held on 28th /12/2017 where issues of discussion included security of the facility and personnel issues.

Quarter 03 meeting held on 30th/03/2018 and among issues discussed was dissemination of Hepatitis B dissemination.

Quarter 04 meeting held on 29th/06/2018 and the key discussion was budget plan 2018/19.

HUMC meeting minutes in Kigandalo HCIV obtained were:

Quarter 01 minutes held on 12th/07/2017, issues discussed were work plan and budget among others.
<table>
<thead>
<tr>
<th>The LG has publicised all health facilities receiving PHC non-wage recurrent grants</th>
<th>• 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</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum 4 for this performance measure</td>
<td>The noticeboards of health department have publicized all facilities receiving PHC grants. All facilities sampled had publicized PHC grants received with accountabilities on the noticeboards.</td>
</tr>
<tr>
<td>Procurement and contract management</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>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</th>
<th>• 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</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum 4 for this performance measure</td>
<td>There was no submission seen to PDU. Guidelines for capital development grants delayed to be availed to the district.</td>
</tr>
<tr>
<td></td>
<td>0</td>
</tr>
</tbody>
</table>
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

Maximum 4 for this performance measure

<table>
<thead>
<tr>
<th>Maximum 4 for this performance measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2.</td>
</tr>
</tbody>
</table>

- Evidence that the DHO/MHO (as per contract) certified and recommended suppliers timely for payment: score 4.

Payment requisitions were certified/recommended by DHO on time as evidenced below:

1. St Francis Hospital- Transfer to St. Francis Hospital (Vr. HE00304)
   Requisition Amount- Shs 20,838,685
   Requisition date- 08 June 2018
   DHO Certification date- 08 June 2018

2. KK filing station- Fuel for Health department (Vr. HE00130)
   Requisition Amount- Shs 10,869,950
   Requisition date- 10 September 2017
   DHO Certification date- 10 September 2017

NOTE: the health department did not have capital developments for the FY 2017/18 therefor supplier payments were very few.

Financial management and reporting
<table>
<thead>
<tr>
<th>Performance Measure</th>
<th>Evidence</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</td>
<td>Maximum 4 for this performance measure</td>
<td>0</td>
</tr>
</tbody>
</table>
| 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 | The department submitted the annual performance report for the previous FY of all quarter.  
Q1 submitted on 22nd /12/2017  
Q2 submitted on 7th /02/2018  
Q3 submitted on 13th/05/2018  
Q4 submitted on 2nd /08/2018 ( late submission of Q4) | 0     |
| LG Health department has acted on Internal Audit recommendation (if any)           | 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  
- If sector has no audit query: Score 4  
- If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: Score 2 points  
- If all queries are not responded to Score 0 | The Sector did not submit a status of implementation of audit findings for the previous year audit findings. There were no sector letters or notes to CFO or IA. | 0     |
| Maximum 4 for this performance measure | 0     |
### Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines (i.e. minimum 30% women: score 2</td>
<td>2</td>
</tr>
</tbody>
</table>

Guidelines for HUMC guidelines are available at the DHOs office as well as the HUMC lists for all the Health facilities.

Sampled Health facilities and their HUMC composition included the following:

1. Kityerera HCIV - 3/9 (30%) Women
2. Kigandalo HCIV - 2/7 (28%) Women
3. St Francis Hospital Buluba 3/8 (38%) Women
4. Mayuge HCIII - 3/7 (43%) Women
5. Baitambogwe HCIII - 3/7 (43%) Women

### Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2</td>
<td>2</td>
</tr>
</tbody>
</table>

In Mayuge HCIII, a press release from ministry of health on cholera alert and how to mitigate during rainy season including water and sanitation issues was available.

In Kityerera HCIV, there was a MOH press release on cholera alert on health issues mitigation measures ahead of rainy season dated 11/10/2017. The latrines were clearly labeled for men and women.

In Kigandalo HCIV, there was a health facility WASH audit improvement action plan for 16/08/18. In addition there was a MOH press release on cholera alert on health issues mitigation measures ahead of rainy season dated 11/10/2017.

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

<table>
<thead>
<tr>
<th>Evidence</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>- 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</td>
<td>2</td>
</tr>
</tbody>
</table>

Mayuge DLG did not access developmental funds for health projects.
LG Health department has ensured that guidelines on environmental management are disseminated and complied with.

Maximum 4 points for this performance measure

- The environmental officer and community development officer have visited the sites to check whether the mitigation plans are complied with: Score 2

No developmental projects were carried out in previous financial year.
The LG Health department has issued guidelines on medical waste management.

Maximum 4 points

- 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.

In Mayuge HCIII, there are a number of medical waste guidelines available on the various service points in the facility. Examples are: waste segregation charts, destruction of obsolete/expired medicines and health supplies dated 17/8/2017. The national guidelines on management of health care waste generated from safe male circumcision procedures were available.

In Kityerera HCIV, there were medical waste management charts available in various departments. For example waste segregation charts in maternity, OPD, lab, noticeboards. There are also waste bins that have been provided. Refresher trainings were done by RHITES EC on infection control.

In Kigandalo HCIV there were medical waste management charts available in various departments. For example waste segregation charts in maternity, OPD and lab.

At St Francis Hospital Buluba, there are a number of medical waste guidelines available on the various service points in the facility which included waste segregation charts.

At Baitambogwe HCIII, the medical wastage disposal guidelines were contained in a file for standard operating procedures which included medical waste management. These guidelines are further pinned in points of delivery in various rooms at the facility.
### Summary of requirements

**Planning, budgeting and execution**

<table>
<thead>
<tr>
<th>Definition of compliance</th>
<th>Compliance justification</th>
<th>Score</th>
</tr>
</thead>
</table>
| The DWO has targeted allocations to sub-counties with safe water coverage below the district average. Maximum score 10 for this performance measure.                                                                                     | 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:  
  - If 100% of the budget allocation for the current FY is allocated to S/Cs below average coverage: score 10  
  - If 80-99%: Score 7  
  - If 60-79: Score 4  
  - If below 60 %: Score 0  

According to the updated District safe water coverage as of 30th August 2018, Mayuge District Local Government had a safe water coverage of 55%. In FY 2018/19 the district had a budget of UGX 357,346,000 for drilling and installation of 16 boreholes and UGX 63,720,000 for rehabilitation of 12 boreholes. Sub-counties below district average included Bukabooli (40%), Kityerera (32%) Malongo (22%) and Wairasa with (37%). The district water department managed to allocate water projects (borehole drilling and rehabilitation) in most of the sub-counties below average. However, the sub-county of Kiterera with 32% was not allocated any water project and the justification was that it had an intervention of an NGO (Living Water International) that was planning to construct 13 boreholes in the area. This was off the budget support and there was no documented evidence to the effect. Secondly the LG water budget allocation to sub-counties below district average was only 30% of the total budget. | 0     |
The district Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)

Maximum 15 points for this performance measure

- Evidence that the district Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY.
  - If 100% of the water projects are implemented in the targeted S/Cs:
    Score 15
  - If 80-99%:
    Score 10
  - If 60-79%:
    Score 5
  - If below 60%:
    Score 0

In FY 2017/18 the district LG water department implemented three (3) projects which included drilling of 15 boreholes at a cost 313,500,000/=, rehabilitation of 15 boreholes with contract value of 69,600,000/= and construction of a 4-stanch VIP lined pit latrines with 2 Bathrooms at Nango RGC in Malongo sub-county at a cost of 29,870,000/=. Sub-counties below district average had water projects implemented for example 2 boreholes were drilled and 2 rehabilitated in both Bukabooli and Kityerera sub-counties, Malongo sub-county had 4 boreholes drilled and 1 rehabilitated, while Wairasa had 1 borehole drilled. This information was well captured in the District Annual Progress Report FY 2017/18.

Monitoring and Supervision
The district Water department carries out monthly monitoring of project investments in the sector.

Maximum 15 points for this performance measure

Evidence that the district Water department has monitored each of WSS facilities at least annually:

- If more than 95% of the WSS facilities monitored: score 15
- 80% - 95% of the WSS facilities monitored: score 10
- 70% - 79%: score 7
- 60% - 69% monitored: score 5
- 50% - 59%: score 3
- Less than 50% of WSS facilities monitored: score 0

There was evidence that the district LG water department monitored each Water and Sanitation Source (WSS). In Mayuge District, WSS projects were monitored per sub-county on a monthly basis. For example, on file an inspection report dated 30th/07/2017 detailing status of water sources in Kigandaalo sub-county was reviewed. The report was compiled by DWO and received by CAO, comments made and signed.

A monitoring report dated 30th/08/2017 for Water sources in Kityerera sub-county. Activities during the monitoring included carrying out detailed assessment of the functionality of water sources and WSS committees.

Dated 28th/09/2017 a monthly Water and Sanitation monitoring field report for the month of September. The report detailed inspection of water facilities in Malongo sub-counties while assessing the functionality of WUCs and Gender issues.

A field monitoring report for WSS dated 29th/10/2017 for Mpugwe sub-county. The report detailed status of all water sources in the sub-county. It was compiled by the Assistant Engineering Officer (AEO) approved by DWO addressed to CAO.

There was evidence of a Project Report for construction of 4-stance VIP Latrine with 2 bathrooms by M/S KISJO CO. LTD. Procurement Ref.NO: Mayu 535/wrks/17-18/00114 with a contract value of UGX 28,000,000/=. The report was addressed to CAO.

A report on the Rehabilitation of 15 boreholes implemented by M/S SONSELE General Contractor Ltd. Procurement Ref.No: Mayu535/wrks/17-18/00005 with a contract value of UGX 69,945,000/=. The report was compiled on 30th/08/2017 by DWO to CAO copied to District Engineer and Senior Procurement Officer.
| **The district Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE** | **Evidence that the district has submitted accurate/consistent data for the current FY:** Score 5  
**List of water facility which are consistent in both sector MIS reports and PBS:** score 5 | **Mayuge LG water department submitted accurate/consistent data lists of water facilities as per MoWE formats. For instance, in the Management Information Systems (MIS) reports reviewed at the Ministry, the department reported 15 boreholes and this was the exact data recorded in the LG PBS. Review of the Performance Agreement signed between the Chief Administrative Officer (CAO) and Head of Department on 13th/07/2018 has corresponding figures. According to the performance Agreement, all budget was realized.** |
<table>
<thead>
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</thead>
<tbody>
<tr>
<td><strong>Maximum 10 for this performance measure</strong></td>
<td><strong>List of water facilities funded from Rural Water development grant included 15 boreholes in Bukabooli (2), Imanyiro (1), Bukatube (2), Kigandaalo (1), Mpuwge (2), Malongo (1), Bayitambogwe (1), Wairasa (1), Busakira (1)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Procurement and contract management</strong></td>
<td><strong>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</strong></td>
<td><strong>The District Water department submitted procurement inputs that covers all investment items in the sector annual work plan to the Procurement and Disposal Unit for incorporation into the district procurement plan on 20th/April/2018. This was timely as it was before the stipulated 30th/April deadline.</strong></td>
</tr>
<tr>
<td><strong>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</strong></td>
<td><strong>Maximum 4 for this performance measure</strong></td>
<td><strong>5</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>5</strong></td>
</tr>
<tr>
<td>The district has appointed Contract Manager and has effectively managed the WSS contracts</td>
<td>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</td>
<td>The chief Administrative officer appointed a contract manager for all water projects in the District. Reviewed was an appointment letter Ref: CR/214/15 to Mr. Tom Freeman Muhindo as contract manager for borehole drilling and test pumping of 15 bore holes contracted by KLR-Uganda Ltd. This was in line with PPDA Regulations, 2006 Review of Project files, there was evidence of an Implementation plan for the Rehabilitation of 15 boreholes. The plan clearly indicated the dates of contract signing (15th/07/2017) commencement date was 22nd/07/2017 and the contract duration was Three months. The implementation plan was prepared by the DWO/Contract Manager.</td>
</tr>
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</tr>
<tr>
<td>The district has appointed Contract Manager and has effectively managed the WSS contracts</td>
<td>If water and sanitation facilities constructed as per design(s): score 2</td>
<td>The 5 sampled WSS projects included; DWD 60669-Bunyola village source, DWO 60670-Kakindu village source in Buwaya sub-county, DWD 60670-Kasokwe in Mpungwe sub-county, DWD 60679 Busui village source in Kigandaalo sub-county and DWD 60683-Kaluuba village source in Busakira sub-county. These sources were found to be functional, however, water source DWD 60683-Kaluuba was not protected, cracks were observed just after a year and the drainage channel just 3m compared to the 10m stipulated in the BOQs None of the source had a drainage pit filled with marvel as stipulated in the Bills of Quantity.</td>
</tr>
<tr>
<td>The district has appointed Contract Manager and has effectively managed the WSS contracts</td>
<td>If contractor handed over all completed WSS facilities: score 2</td>
<td>There was evidence that contractor handed over completed WSS facilities. On project file there was a Hand over report by SONSELE General Contractors Ltd dated 4th/08/2017 with contract no:2017/MYG/BHR/DWSCG/01 and procurement no: Mayu/535/wrks/17-18/00005. The report was addressed to the DWO/Contract Manager copied to the Head of PDU Mayuge District. A completion/hand over report for drilling and test pumping of 15 Deep Boreholes under Procurement Ref No: MAYU/535/WRK/17-18/00002. The report was submitted on 5th/03/2018. It detailed water source names, actual location and sub-county. It was signed by the Director KLR-Uganda Ltd.</td>
</tr>
<tr>
<td>The district has appointed Contract Manager and has effectively managed the WSS contracts</td>
<td>• If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2</td>
<td>Review of projected files, there was evidence of final completion certificate contract No:2016/Myg/PAF/GWC/01 certificate No:02 issued on 27th/10/2017 to Gets Technical Services (GTS) Ltd for consultancy services in borehole sitting &amp; construction supervision of 15 boreholes. (MAYU/535/SRVCS/17-18/00003 with a contract value of UGX 58,542,750/=) Partial completion certificate issued to Kisjo Company Ltd. Contract No:2018/Myg/DWSCDG/VLT/01 certificate No:1 for construction of a 4-stance VIP latrine in Kigandaalo sub-county. The project had a contract value of UGX 28,000,000/=. The project was still under defects liability period. There were no completion reports prepared by the District Water Officer.</td>
</tr>
<tr>
<td>Maximum 8 points for this performance measure</td>
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</table>

| The district Water department has certified and initiated payment for works and supplies on time | • Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points | The LG Water department certified and initiated payments for works on time as evidenced below; 1. Sonsole General Contractors Limited for rehabilitation of 15 boreholes under DWSCDG. Contract No. 2017/MyG/DWSCDG/BHR/01. Requisition Amount-Shs 68,581,060 Requisition date- 07 Aug 2017 DWO Certification date- 07 Aug 2017 2. Kisjo Company Limited for construction of 4 stance lined VIP latrine with 2 bathrooms in Nango RGC under DWSCDG. Contract No. 2018/MyG/DWSCDG/VLT/03 Requisition Amount- Shs 25,004,000 Requisition date- 08 June 2018 DWO Certification date- 08 June 2018 |
| Maximum 3 for this performance measure | | |

<p>| Financial management and reporting | | |
| The district Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit | • 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 | The LG water department submitted the Annual Progress report beyond the stipulated time frame. This was after mid-July. For instance; Quarter 4 report was submitted on 31st/07/2018. Quarter 3 report was submitted on 14th/05/2018 Quarter 2 report was submitted on 7th/02/2018 Quarter 1 report was submitted on 19th/12/2017 |</p>
<table>
<thead>
<tr>
<th>The District Water Department has acted on Internal Audit recommendation (if any)</th>
<th>Maximum 5 for this performance measure</th>
</tr>
</thead>
</table>
| - 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:  
  - If sector has no audit query score 5  
  - If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3  
  - If queries are not responded to score 0 | The Sector did not submit a status of implementation of audit findings for the previous year. The Water department responded to one finding in the 1st quarter report only. |

Governance, oversight, transparency and accountability
The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council.

Maximum 6 for this performance measure.

- 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.

Standing Committee on Works and Technical Service sitting on 12th /06/2018;

Min. /WC25/2018. Service delivery, supervision reports, performance assessment and submissions from the DWSCC. Committee agreed with the reports and that monitoring was done well.

Min/DWC/20/2018 discussion of the PAC Report for FY 2018/19, committee upheld the decision of PAC on unaccounted for funds totalling to 5,000,000.

Min/WC/15/2018- Presentation and discussion of sectoral work plan/budget for FY 2017/18

The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council.

Maximum 6 for this performance measure.

- Evidence that the water sector committee has presented issues that require approval to Council: score 3.

Council committee sitting on April 11th, 2018;

Presentation and discussion of departmental work plans:

- Recommended to council sector work plan and budget for FY 18/19 for water department under Min /DWC/20/2018

- Recommended to Council sector work plan and budget for FY 18/19 for Roads department under Min /DWC/21/2018

- Recommended to Council monitoring report for FY 18/19 for WATSAN facilities under Min /DWC/22/2018
<table>
<thead>
<tr>
<th>The district Water department has shared information widely to the public to enhance transparency</th>
<th>• 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.</th>
<th>The AWP, budget and the water Development grant expenditures were not displayed on notice boards by the time of the assessment. There was equally no evidence in form of meeting minutes for advocacy meetings conducted.</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum 6 points for this performance measure</td>
<td>All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2</td>
<td>All the sampled/visited WSS projects were not properly labelled. These sources included Bunyola-DWD 60669, Kakindu-DWD 60670, Kasokwe-DWD 60670, Busui-DWD 60679 and Kaluuba-DWD 60683. All the sources did not have the name of contractor, there were no dates for construction and instead of DWSCG as the source of funding all had Mayuge DLG. However the FY and source name was indicated.</td>
<td>0</td>
</tr>
<tr>
<td>Maximum 6 points for this performance measure</td>
<td>Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2</td>
<td>By the time the assessment was conducted, information on tenders and contract awards was not displayed on the District Notice board.</td>
<td>0</td>
</tr>
<tr>
<td>Maximum 6 points for this performance measure</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Participation of communities in WSS programmes</td>
<td>• If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1</td>
<td>Communities of Mayuge applied for water/public sanitation facilities as per sector critical requirements. For example, residents of Senda village in Kigadaalo sub-county applied for a borehole in their area. They used the Village Application Form and their letter was dated 11th/03/2018. There was also evidence of community contribution as a receipt of payment of two hundred thousand (UGX200,000/=) serial no:19239 was attached on the application letter.</td>
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<td>Participation of communities in WSS programmes</td>
<td>• 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</td>
<td>Review of Mayuge District Software component report FY 2017/18, 68% of the WSC’s were functional. Field visits to the 5 sampled water sources revealed that all the visited sources had well established committees that spearheaded source protection with strong poles, all the sources visited had evidence of collection of O&amp;M funds for preventive maintenance and minor repairs. Note: One of parameters above is sufficient for the score.</td>
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<td>Social and environmental safeguards</td>
<td>• 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</td>
<td>There was evidence of environmental screening (as per templates) for all projects. All water projects were screened in line with section 19 of the National Environment Act cap 153. The projects were screened by the Senior Environment Officer using the ESS Forms.</td>
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<td>Performance Measure</td>
<td>Evidence</td>
<td>Points</td>
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<td>The LG Water department has devised strategies for environmental conservation and management</td>
<td>Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1</td>
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<td>By the time of the assessment there was no evidence produced in line with environment follow up support provided in cases of unacceptable environmental concerns in FY 2017/18</td>
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<td>In the contract document signed between Mayuge District Local and KLR-Uganda Ltd for the drilling, test pumping of 15 deep boreholes. Procurement Ref No:Mayu/535/wrks/17-18/00002. In the contract, there were environmental guidelines. However, in the contract signed between Mayuge DLG and KISJO Company Ltd for the construction of 4-stance VIP Latrine with Two bathrooms at Nango RGC had no environmental clauses.</td>
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<td>Review of the district software component report 2017/18 revealed that there existed WSC’s with women composition below 50%. Consultations with members of the 5 visited water sources revealed the following percentages of women composition; Bunyola water source in Bwuya sub-county had 57%, Kakindu village water source in Buwaya sub-county had 42%, Kasokwe water source in Mpugwe sub-county had 40%, Busui village water source in Kigandaalo sub-county had 57% while Kaluuba village source had 40%. According to the DWO emphasis was only put on women occupying key positions on the committees. It was also revealed that the software funding was cut hence no funds for re-activating WUCs.</td>
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<td>Gender and special needs-sensitive sanitation facilities in public places/RGCs provided by the Water Department.</td>
<td>Maximum 3 points for this performance measure</td>
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<td>• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3</td>
<td>The sampled public sanitation facilities sampled included a two 3-stance pit latrine at the district headquarters and a 2-stance pit latrine at Mayuge Police station. These facilities did not have earmarked stances for men and women and construction did not pay attention to provisions for People with Disabilities.</td>
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