



Local Government Performance Assessment

Rukiga District

(Vote Code: 620)

| Assessment | Scores |
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| Accountability Requirements | 67% |
| Crosscutting Performance Measures | 42% |
| Educational Performance Measures | 49% |
| Health Performance Measures | 61% |
| Water Performance Measures | 48% |

| Summary of requirements | Definition of compliance | Compliance justification | Compliant? |
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| Annual performance contract | | | |
| <p>LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.</p> | <ul style="list-style-type: none"> • From MoFPED's inventory/schedule of LG submissions of performance contracts, check dates of submission and issuance of receipts and: <ul style="list-style-type: none"> o If LG submitted before or by due date, then state 'compliant' o If LG had not submitted or submitted later than the due date, state 'non-compliant' • From the Uganda budget website: www.budget.go.ug, check and compare recorded date therein with date of LG submission to confirm. | <p>Annual Performance Contract Submitted & received at MoFPED on 30/7/2018 which is within the timeline date of 1st August 2018</p> | Yes |
| Supporting Documents for the Budget required as per the PFMA are submitted and available | | | |
| <p>LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY by 30th June (LG PPDA Regulations, 2006).</p> | <ul style="list-style-type: none"> • From MoFPED's inventory of LG budget submissions, check whether: <ul style="list-style-type: none"> o The LG budget is accompanied by a Procurement Plan or not. If a LG submission includes a Procurement Plan, the LG is compliant; otherwise it is not compliant. | <p>Consolidated Procurement Plan was embedded in the performance contract for 2018/2019</p> | Yes |
| Reporting: submission of annual and quarterly budget performance reports | | | |

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| <p>LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)</p> | <p>From MoFPED's official record/inventory of LG submission of annual performance report submitted to MoFPED, check the date MoFPED received the annual performance report:</p> <ul style="list-style-type: none"> • If LG submitted report to MoFPED in time, then it is compliant • If LG submitted late or did not submit, then it is not compliant | <p>Annual Performance report- Q4 was submitted to MoFPED and received on 4th September 2018 which is outside the timeline date of 31st July 2018</p> | <p>No</p> |
| <p>LG has submitted the quarterly budget performance report for all the four quarters of the previous FY by end of the FY; PFMA Act, 2015).</p> | <p>From MoFPED's official record/ inventory of LG submission of quarterly reports submitted to MoFPED, check the date MoFPED received the quarterly performance reports:</p> <ul style="list-style-type: none"> • If LG submitted all four reports to MoFPED of the previous FY by July 31, then it is compliant (timely submission of each quarterly report, is not an accountability requirement, but by end of the FY, all quarterly reports should be available). • If LG submitted late or did not submit at all, then it is not compliant. | <p>LG Planning 4. LG submitted the quarterly budget performance report for all the four quarters of the previous FY; submitted as follows: Q1 dated 7/12/2017 Q2 dated 15/03/2018 Q3 dated 10/04/2018 Q4 dated 4/9/2018 which was outside the timeline date of 31st July 2018</p> | <p>No</p> |
| <p>Audit</p> | | | |

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| <p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General and the Auditor General's findings for the previous financial year by end of February (PFMA s. 11 2g). This statement includes actions against all findings where the Internal Auditor and the Auditor General recommended the Accounting Officer to take action in lines with applicable laws.</p> | <p>From MoFPED's Inventory/record of LG submissions of statements entitled "Actions to Address Internal Auditor General's findings",</p> <p>Check:</p> <ul style="list-style-type: none"> • If LG submitted a 'Response' (and provide details), then it is compliant • If LG did not submit a 'response', then it is non-compliant • If there is a response for all –LG is compliant • If there are partial or not all issues responded to – LG is not compliant. | <p>The district provided and submitted information to the PS/ST on the of implementation of Internal Auditor General findings for the financial year 2017/2018 in a letter REF RDLG dated 21st March, 2018 which was received by the Directorate of Internal Audit (MoFPED) on 23rd March 2018 . There was no Auditor General's report since the District LG is still new.</p> <p>All the internal audit findings for the 4 quarters for the FY 2027/18 were responded to.</p> | <p>Yes</p> |
| <p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.</p> | | <p>The external audit report for the FY 2017/18 was unqualified.</p> | <p>Yes</p> |

| Summary of requirements | Definition of compliance | Compliance justification | Score |
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| Planning, budgeting and execution | | | |
| <p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p> | <p>Evidence that a district/ municipality has:</p> <ul style="list-style-type: none"> • A functional Physical Planning Committee in place that considers new investments on time: score 1. | <p>There is a functional physical planning committee in place that considers new investments as evidenced by: Minutes of 15/11/17,12/2/2018 14,8/2017 and the letter by CAO appointing 12 members to the District Physical Planning Committee of Rukiga District dated 13th June 2018.</p> | 1 |
| <p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p> | <ul style="list-style-type: none"> • Evidence that district/ MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD score 1. | <p>There were no evidence was given that the district had submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD</p> | 0 |

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| <p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p> | <ul style="list-style-type: none"> • All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0 | <p>In the absence of a Physical Development plan, it was difficult to ascertain any consistency of planning with new infrastructure investments</p> | <p>0</p> |
| <p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p> | <ul style="list-style-type: none"> • Action area plan prepared for the previous FY: score 1 or else 0 | <p>There was no evidence that Action area plan was prepared for the previous Financial year. The LG did not have any action area plan in place.</p> | <p>0</p> |

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| <p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p> | <ul style="list-style-type: none"> • Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2. | <p>AWP page 48, Budget page 31 and Five year Development plan page 57 under Education sector had priorities such as; Construction of VIP pit Latrine at Buzooba primary school in Rwamucucu sub county, which were based on the outcomes of the budget conference held on 15th November, 2017</p> | <p>2</p> |
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| <p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p> | <ul style="list-style-type: none"> • Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If differences appear, a justification has to be provided and evidence provided that it was approved by the Council. Score 1. | <p>AWP page 72, District Development plan page 58, and budget page 41 under water sector there are priorities such as: Construction of gravity flow scheme at Kabisha in kasambya sub county which demonstrates a clear linkage</p> | <p>1</p> |
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| <p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p> | <ul style="list-style-type: none"> • Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2. | <p>There was no evidence that Project profiles were developed and discussed by TPC for all investments in the AWP as per LG Planning guideline. There were neither project profiles presented nor TPC minutes attesting to their discussion</p> | <p>0</p> |
| <p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p> | <ul style="list-style-type: none"> • Annual statistical abstract, with gender-disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum score 1. | <p>No annual statistical abstract nor TPC minutes to support budget allocation was availed for assessment.</p> | <p>0</p> |

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| <p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p> | <ul style="list-style-type: none"> • Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2 | <p>There was 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: eg construction of 5 stance VIP latrines at omunkore primary school in kamwezi sub county page 73 AWP UGX 20,085,000, construction of 5 stance pit latrine in Rwempisi primary school in Rwamucucu sub county UGX 19,276,000 were some of the infrastructure projects implemented that show linkage with the approved budget(pg 17) by the Council.</p> | <p>2</p> |
| <p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p> | <ul style="list-style-type: none"> • Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. <ul style="list-style-type: none"> o 100%: score 4 o 80-99%: score 2 o Below 80%: 0 | <p>From the review of payments certificates for the following investments in the department of Health and Works & Technical services i.e. construction of 5 stance VIP latrine at Bwirambere primary school at shs 21,901,980, payment for roofing of Mukyogo HCII in Kasambya UGX 16,068,118. Partial completion of the Rukiga Administration block at UGX 429,479,562 all these investments were completed as per work plan by end of FY. DLG has already issued Final certificates of completion indicating 100% execution.</p> | <p>4</p> |
| <p>The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p> | <ul style="list-style-type: none"> • Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2 | <p>From the District Annual budget performance report a number of projects have been reported completed within the budget and these include: construction of 5 stance lined Latrine at Rukiga district Hqrts at shs 19,237,680, Rehabilitation of shoko GFS at shsh 19,680,948, Excution of protected springs in kashambya and Rwamucucu sub counties at shs 82,133,039, Construction of omunkore Bridge in kamwezi UGX 10,578,999, and reinforcement of construction of Kabumbiro Bridge shs 5,400,000, all were completed within approved budget</p> | <p>2</p> |

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| <p>The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p> | <ul style="list-style-type: none"> • Evidence that the LG has budgeted and spent at least 80% of the O&M budget for infrastructure in the previous FY: score 2 | <p>There was no evidence that the LG budgeted and spent at least 80% of the O&M budget for infrastructure in the previous FY</p> | <p>0</p> |
| <p>Human Resource Management</p> | | | |

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

• Not all HoDs positions are substantively filled at the LG of Rukiga during FY 2017/18. As per the staff structure, there are 11 HoDs. In Rukiga district, only 3 HoDs are substantively filled. This represents 27% of HoD positions filled. Broken down as follows:

? Chief Finance Officer (Natumanya Erasmus) – position is not substantively appointed but only assigned duties as per letter dated 29/9/2018 signed by Wilson T under min DSC1/54/01.

? Head Statutory Bodies (Clerk to Council) – position is not substantively appointed.

? District Education Officer (Beyendera Vastiina) – position not filled substantively but assigned duties as per letter dated 11/06/2018, signed by Hanny Turyaheeba.

? Principle HR Officer (Musimenta Ntamirika) position – position is not substantively appointed but only assigned duties.

? District Internal Auditor (Byarugaba Geoffrey Bujara) position – not filled substantively but assigned duties although letter of assignment was not presented.

? District Health Officer (Dr. Ahabwe Davis) – only assigned as acting as per appointment letter dated 29th June 2017, signed by Wilson Tibugyenda.

? District Production & Marketing (Kansiime Robert) – position is not substantively appointed but only assigned duties.

? Senior Procurement Officer (Musimenta Ntamirika) – position filled as per appointment letter 28/5/2018 and signed by Turyaheebwa Hanny under min DSC19/2018.

? Dist Community Development Officer (Mbeguta Dorothy Okello) – position substantively filled as per appointment letter dated 18th June 2018 and signed by Turyaheebwa Hanny with min DSC19/2018.

? District Engineer (Kiganda James) – only assigned as acting as per appointment letter dated 3.1.2014 with min DSC28/59/01, signed by Ntaho Frank.

? Natural Resources Officer (Byaruhanga J) – there was no evidence of appointment presented.

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| <p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p> | <ul style="list-style-type: none"> • Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2 | <ul style="list-style-type: none"> • Appraisals during FY 2017/18 in Rukiga District: 9 HoDs and Units were appraised during FY 2017/18 using standard guidelines from Ministry of Public Service by various officers. This represents 82% of HoDs appraised. Appraisal dates for those HoDs were: 11/7/2017 (Production & Marketing) by Turyaheebwa Hanny, 11th July 2017 (Dist Health Officer) by Hanny Turyaheebwa, Chief Finance Officer appraised on 12/7/17 by Turyaheebwa Hanny, 12/7/2017 (Community Based Services) by Turyaheebwa Hanny, 11/7/2017 (Internal Auditor) by Turyaheebwa Hanny. Two HoDs were recent recruits and were not yet eligible for appraisal during the FY 2017/18. | <p>0</p> |
| <p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p> | <ul style="list-style-type: none"> • Evidence that 100 % of staff submitted for recruitment have been considered: score 2 | <ul style="list-style-type: none"> • According to DSC minutes and submission lists viewed (dated 21.1.18 and 21.2.18 in Rukiga district, a total of 98 positions were submitted for recruitment at DSC during FY 2017/18. Some of the positions submitted include: Accountant, water engineer, staff surveyor, Porter, Office attendant, Driver, dist Production Officer, Environmental Officer etc. New Vision advert such as that of 29/01/2018 confirmed that all the 98 positions submitted were all considered for recruitment. That is 100%. | <p>2</p> |
| <p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p> | <ul style="list-style-type: none"> • Evidence that 100 % of positions submitted for confirmation have been considered: score 1 | <ul style="list-style-type: none"> • There is no submission list presented for staff submitted for confirmation in Rukiga district during FY 2017/18. This confirms that the District Service Commission did not receive any list of staff due for confirmation. The reason is that the district being still young, it had no staff eligible yet for confirmation during FY 2017/18. | <p>1</p> |

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| <p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p> | <ul style="list-style-type: none"> • Evidence that 100 % of positions submitted for disciplinary actions have been considered: score 1 | <ul style="list-style-type: none"> • There was no submission of staff for disciplinary action in Rukiga district during FY 2017/18. Neither a submission list for disciplinary action nor disciplinary meeting minute extract were presented for viewing. This confirms that the district did not have any staff disciplined during FY17/18. | <p>1</p> |
| <p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p> | <ul style="list-style-type: none"> • Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3 | <ul style="list-style-type: none"> • Of the 91 staff verified as recruited in Rukiga district during FY 2017/18. Of the 91 staff a sample of 10%, which is 9 newly recruited staff was analysed. The analysis and verification of payslips and recruitment dates indicates that 5 staff out of 9 accessed salary payroll within 2 months of recruitment. This is 55% of staff entered salary payroll within two months of recruitment and the other 45% accessed beyond 2 months or more of recruitment in Rukiga district. Some of the pay slip numbers viewed are 10266616 (for Birungi) appointed on 28.5.18, payslip No. 102666667 (for Orishaba Justus) appointed on 28.5.18, payslip No. 1026876 (appointed on 28.5.18 DSC19/2018) etc – all payslips presented displayed run dates of 28/7/2018. | <p>0</p> |

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| <p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p> | <ul style="list-style-type: none"> Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2 | <p>Rukiga District LG submitted 27 staff who retired during FY 2017/18. The list viewed indicated that the 27 staff retired on different months within the FY17/18. Retirement dates list and pension payroll lists indicated that none of the 27 retired staff accessed the pension within 2 months of retirement. For example, Kyarikunda Bernardette retired on 10.8.17 – not yet accessed pension payroll by Sept 2018, Atoreinwe Katsikano retired on 5.11.17 and accessed pension payroll in June 2018 (7 months later), Besigomwe George retired on 28/7/17 and accessed pension payroll in July 2018 (12 months later), Ndinawe George and Rugungira Richard retired in 30.6.18 and 15.5.18 respectively but together with others like Kabaganda Apalinari and Twesigye Francis, they have not accessed pension payroll by the time of assessment. Kakiboobo Charles retired on 4.9.17 but only accessed pension payroll in June 2018, a whole 9 months later according to the pension payroll viewed. Therefore, no staff accessed pension payroll within 2 months of retirement in Rukiga district. i.e. 0 out of 27 is 0%.</p> | <p>0</p> |
| <p>Revenue Mobilization</p> | | | |
| <p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p> | <ul style="list-style-type: none"> 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. | <p>The OSR for the district LG in the FY 2017/18 was UGX 79,181,518. The LG is new and did not have comparative figures for the previous year FY 2016/17. It is therefore not easy to compare.</p> | <p>0</p> |

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| <p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p> | <ul style="list-style-type: none"> • If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within <p>+/- 10 %: then score 2. If more than +/- 10 %: Score 0.</p> | <p>The actual/budget revenue collection ratio for the FY 2017/18 was 20% (ie UGX 79,181,518/391,621,000). This resulted in a budget variance of 80% which is higher than 10%.(Source: budget and financial statements for FY2016/17) .</p> | <p>0</p> |
| <p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p> | <ul style="list-style-type: none"> • Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2 | <p>The financial statements for the FY 2017/18 indicated that Local Service Tax (LST) amounting to UGX 44,991,268 was collected at the District Level, out of which the UGX 8,500,000 was remitted to Lower LGs, which was 19% of the total LST. (Source: DLG accounts and the cash book for the FY 2016/17). The rest of the revenue was collected by the LLGs. This was lower than the statutory remission requirement of 65% (source: financial statements for FY 2017/18).</p> | <p>0</p> |
| <p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p> | <ul style="list-style-type: none"> • Evidence that the total Council expenditures on allowances and emoluments- (including from all sources) is not higher than 20% of the OSR collected in the previous FY: score 2 | <p>The LG spent a total of UGX 124,901,948 in the FY 2017/18 on Council allowances and emoluments on budget codes 211101,211103 for council committees, Political and executive oversight and Council administration services. While there was no figure for comparison for the FY 2016/17 this expenditure was inevitably big compared to its collection for the same FY 2017/17. It is however possible that this expenditure included central government grants which the CFO agreed was not able to separate.</p> | <p>0</p> |
| <p>Procurement and contract management</p> | | | |

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| <p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p> | <ul style="list-style-type: none"> Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2 | <p>The district had a substantively appointed procurement officer (Musiimenta Milka) in an appointment letter dated 28th May 2018 under DSC79/2017(7) by CAO (Turyaheebwa Hanny).</p> <p>There was no senior procurement officer.</p> | <p>0</p> |
| <p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p> | <ul style="list-style-type: none"> Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1 | <p>For the 5 sampled projects there was evidence that the TEC produced and submitted reports to the contracts committee as shown below;</p> <p>Construction of Rukiga district administration block 1st phase TEC produced the evaluation report on 20th February 2018 at 491,992,563ushs price and submitted to the contracts committee on 9th March 2018 which approved on the same day under minute number CC06/2017-2018.</p> <ul style="list-style-type: none"> Construction of Rukiga Town Council office block TEC produced the evaluation report on 15th February 2018 at 80,796,320ushs price and submitted to the contracts committee on 13th March 2018. The CC referred back to the TEC for further clarifications and TEC submitted another report on 18th April 2018 which was approved on 2nd May 2018 under minute number CC08/2017-2018. Construction of 5 stance VIP latrines at Ntaraga and Kasooni Primary Schools TEC produced the evaluation reports for both on 10th November 2017 at 20,907,948ushs price and submitted to the contracts committee on 30th November 2017 which approved on 1st December 2017 under minute number CC04/2017-2018 proc. reference RUKI620/WRKS/2017-2018/00003 and RUKI620/WRKS/2017-2018/00005 respectively. Renovation of Rukiga district offices there was no TEC report because contracts committee sitting on 27th October 2018 approved force on account under minute number CC03/2017-2018. | <p>1</p> |

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| <p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p> | <ul style="list-style-type: none"> • Evidence that the Contracts Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1 | <p>The contracts committee considered the recommendations of the TEC and approved the award of the contracts without any deviations for the five sampled projects.</p> | <p>1</p> |
| <p>The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.</p> <p>Maximum 2 points on this performance measure.</p> | <ul style="list-style-type: none"> • a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2 | <p>There was evidence that the procurement and disposal plan for FY 2018/2019 availed which was received by PPDA on 18th July 2018 and approved by the CAO covers all Infrastructure projects in the approved AWP for the current FY 2018/2019.</p> <p>Considering the sampled projects there was adherence to the procurement plan in the previous FY 2017/18</p> | <p>2</p> |

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| <p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p> | <ul style="list-style-type: none"> • For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/ infrastructure by August 30: score 2 | <p>According to the procurement plan for the FY 2018/2019 which was received by PPDA on 18th July 2018 and approved by the CAO there were 24 infrastructure projects (inclusive of road maintenance) and none had approved bid documents which is 0%.</p> | <p>0</p> |
| <p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p> | <ul style="list-style-type: none"> • For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2 | <p>The LG had a contracts register for the previous FY 2017/2018 but was not updated though the procurement activity files were complete.</p> | <p>0</p> |

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| <p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p> | <ul style="list-style-type: none"> • For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2. | <p>According to PPDA guidelines 2008 LG adhered to procurement thresholds for all the sampled five projects. Construction of Rukiga district administration block 1st phase the budget was 500 million and the method of procurement was open bidding, Construction of Rukiga Town Council office block the budget was 92,866,400Ushs and the method of procurement was open bidding, Construction of 5 stance VIP latrines at Ntaraga and Kasooni Primary Schools the budget was 22,420,000Ushs each and the method of procurement was selective bidding and renovation of Rukiga district offices the budget was 23 million and the method of procurement was force on account.</p> | <p>2</p> |
| <p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p> | <ul style="list-style-type: none"> • Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2 | <p>For the sampled projects there was evidence of certification though not all were issued with both interim and completion certificates as indicated;</p> <ul style="list-style-type: none"> • Construction of Rukiga district administration block 1st phase three certificates were issued dated 29/05/18, 26/06/18 and 29/06/18 respectively. • Construction of Rukiga Town Council office block only one certificate was issued on 18th June 2018. • Construction of 5 stance VIP latrine at Ntaraga Primary School only one certificate was issued on 20/06/2018. • Construction of 5 stance VIP latrine at Kasooni Primary School two certificates were issued on 28/03/18 and 04/06/18 respectively. • Renovation of Rukiga district offices no certificate. <p>This showed that the certification was not appropriate.</p> | <p>0</p> |

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| <p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p> | <ul style="list-style-type: none"> Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2 | <p>For all the five sampled projects only one project (construction of Rukiga district administration block 1st phase) had a site board showing the project name, contractor, client/employer, source of funding and the FY but the contract value and expected duration were not indicated and the other four did not have site boards.</p> | <p>0</p> |
| <p>Financial management</p> | | | |
| <p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p> | <ul style="list-style-type: none"> Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4 | <p>The monthly bank reconciliation statements (BRS) for the FY 2017/18 were updated on a daily basis in manual cash books up to August 2018. Samples of copies for the months ended July and August were signed/verified by the CFO, Vote Controllers and the accountants.</p> | <p>4</p> |
| <p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p> | <ul style="list-style-type: none"> If the LG makes timely payment of suppliers during the previous FY <ul style="list-style-type: none"> – no overdue bills (e.g. procurement bills) of over 2 months: score 2. | <p>In the education, health and water sectors, all the 34 sampled payments were cleared on time (within 30 days) as provided for in the contracts ie there were no overdue payments.</p> | <p>2</p> |

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| <p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p> | <ul style="list-style-type: none"> • Evidence that the LG has a substantive Senior Internal Auditor: 1 point. • LG has produced all quarterly internal audit reports for the previous FY: score 2. | <p>There was no evidence that District Internal Auditor (Mr Byarugaba Geoffrey) was substantively appointed a Senior or Principal Internal Auditor by the District Service Commission. While Mr Byarugaba himself agreed verbally that he had never been substantively appointed, it was not possible for the assessor to verify his assertion because the district staff files where appointment letters were expected to be were allegedly in Kabale District (their mother district) which could not be independently verified.</p> | <p>0</p> |
| <p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p> | <ul style="list-style-type: none"> • LG has produced all quarterly internal audit reports for the previous FY: score 2. | <p>There was evidence that internal audit reports for the FY 2017/18 were submitted to both AO and LGPAC on the following dates respectively : : 1st quarter report on 11th /10/2017 and 11th /10/2017</p> <p>2nd quarter report on 19th /01/2018 and 19th /01/2018</p> <p>3rd quarter report on 23rd /04/2018 and 11th /04/2018</p> <p>4th quarter report on 31st /07/2018 and 31st /07/2018</p> <p>There was evidence of review and follow up of all internal audit issues for the FY 2017/18 as per report addressed to the District Chairperson by the Secretary of the LGPAC. The 1st and 2nd quarter reports were discussed.</p> | <p>2</p> |
| <p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p> | <p>Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries from all quarterly audit reports: score 2.</p> | <p>There was evidence that internal audit reports for the FY 2017/18 were submitted to the Chairperson, Speaker, AO and LGPAC on the following dates respectively : : 1st quarter report on 11th /10/2017 and 11th /10/2017</p> <p>2nd quarter report on 19th /01/2018 and 19th /01/2018</p> <p>3rd quarter report on 23rd /04/2018 and 11th /04/2018</p> <p>4th quarter report on 31st /07/2018 and 31st /07/2018</p> <p>However, there was partial review and follow up of all internal audit issues for the FY 2017/18 as per report addressed to the District Chairperson by the Secretary of the LGPAC. Only the 1st and 2nd quarter reports were discussed.</p> | <p>0</p> |

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| <p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p> | <ul style="list-style-type: none"> • Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1. | <p>There was only partial review and follow up of all internal audit issues for the FY 2017/18 as per report addressed to the District Chairperson by the Secretary of the LGPAC. Only the 1st and 2nd quarter reports were discussed.</p> | <p>0</p> |
| <p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p> | <ul style="list-style-type: none"> • 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 | <p>There was evidence of an updated register. The DLG had 3 assets registers namely 1. For Vehicles and Heavy Plants, 2. Assets Register for Fixed Assets (General) and assets register for Land and Buildings. All asset registers were updated..</p> | <p>4</p> |
| <p>The LG has obtained an unqualified or qualified Audit opinion</p> <p>Maximum 4 points on this performance measure</p> | <p>Quality of Annual financial statement from previous FY:</p> <ul style="list-style-type: none"> • Unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0 | <p>The external audit report for the FY 2017/18 was unqualified.</p> | <p>4</p> |
| <p>Governance, oversight, transparency and accountability</p> | | | |

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| <p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p> | <ul style="list-style-type: none"> Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2 | <p>The district availed a set of council minutes for the FY 2017/18 as follows: 20/12/2017; 15/3/2018; and all the sets of minutes provide proof that Council met and discussed service delivery related issues including; operationalisation of the markets, Monitoring reports, Sanitation issues ,distribution of mosquito nets,and workplans.</p> | <p>2</p> |
| <p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p> | <ul style="list-style-type: none"> Evidence that LG has designated a person to coordinate response to feedback (grievance /complaints) and responded to feedback and complaints: score 1. | <p>Mr Tumwesigye Gideon Ag principal Assistant Secretary was the designated person to handle complaints as per the letter dated 14/7/2017 signed by CAO</p> | <p>1</p> |
| <p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p> | <ul style="list-style-type: none"> The LG has specified a system for recording, investigating and responding to grievances, which should be displayed at LG offices and made publically available: score 1 | <p>While there was an officer appointed to handle grievances in the LG, there was no evidence that the LG had a written system of recording, investigating and responding to grievances. It was neither displayed on the public notice board. The LG was advised to have a written, approved and displayed/communicated system of handling grievances so that the public could be aware of it.</p> | <p>0</p> |

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| <p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p> | <p>Evidence that the LG has published:</p> <ul style="list-style-type: none"> • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2 | <p>The LG Payroll & Pensioner Schedule was not displayed on the public notice board.</p> | <p>0</p> |
| <p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p> | <ul style="list-style-type: none"> • Evidence that the procurement plan and awarded contracts and amounts are published: score 1. | <p>There was no evidence that the procurement plan and awarded contracts and amounts were published. The assessor moved to all noticeboards and could not get any one displayed. The LG did not give any justifiable reason for not displaying the procurement plan and the awarded contracts.</p> | <p>0</p> |
| <p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p> | <ul style="list-style-type: none"> • Evidence that the LG performance assessment results and implications are published e.g. on the budget website for the previous year (from budget requirements): score 1. | <p>There was no evidence that the LG performance assessment results were published. The assessment results were not anywhere on their notice boards or in their offices.</p> | <p>0</p> |

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| <p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1 | <p>The LG explained that they did not receive any circular or policy or guidelines from the national level for communication or explanation for LLGs in the previous FY 2017/18.</p> | <p>1</p> |
| <p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p> | <ul style="list-style-type: none"> • Evidence that LG during the previous FY conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc.) with the public to provide feed-back on status of activity implementation: score 1. | <p>No proof provided for this activity. No report of urban fora or barazas or radio program with the public was available for assessment.</p> | <p>0</p> |
| <p>Social and environmental safeguards</p> | | | |
| <p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p> | <ul style="list-style-type: none"> • Evidence that the LG gender focal person and CDO have provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities score 2. | <p>There was no evidence availed on gender mainstreaming to sector departments. There were no gender mainstreaming guidelines issued by the CDO and no gender mainstreaming reports by the CDO in respect of the support to sectors either in terms of planning/ budgeting, implementation or monitoring, . For example there was no evidence of gender support to the sectors in the annual work-plan, budget or implementation and monitoring reports.</p> | <p>0</p> |

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| <p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p> | <ul style="list-style-type: none"> • Evidence that the gender focal point and CDO have planned for minimum 2 activities for current FY to strengthen women's roles and address vulnerability and social inclusions and that more than 90 % of previous year's budget for gender activities/ vulnerability/ social inclusion has been implemented: score 2. | <p>The LG GFP and CDO had planned for sensitization meetings, monitoring of projects and functional adult literacy (FAL) among others as activities for the current FY 2018/2019 as evidenced in the AWP for the FY 2018/2019 dated (March 2017) which was approved and signed by the CAO.</p> <p>The previous year's budget was 238,793,000shs, however, there was no proof that more than 90% of the budget was implemented.</p> | <p>0</p> |
| <p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p> | <ul style="list-style-type: none"> • Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 1 | <p>For all the five sampled projects (construction of Rukiga district administration block 1st phase, construction of Rukiga Town Council office block, construction of 5 stance VIP latrines at Ntaraga and Kasooni Primary Schools and renovation of Rukiga district offices), the only available proof of environmental screening was for construction of Rukiga district administration block 1st phase dated 2nd March 2018 and construction of 5 stance VIP latrine at Kasooni Primary School dated 18th June 2018 the others did not have any proof of screening or EIA carried out and there was no proof of budget for the mitigation measures availed.</p> | <p>0</p> |

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| <p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1 | <p>No proof of integration of environmental and social management and health and safety plans in the contract bid documents for all the sampled projects was availed.</p> | <p>0</p> |
| <p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p> | <ul style="list-style-type: none"> • Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1 | <p>For all the sampled projects there was no proof of land ownership. For example, no land ownership proof was availed for the following projects; construction of Rukiga district administration block 1st phase, construction of Rukiga Town Council office block, construction of 5 stance VIP latrines at Ntaraga and Kasooni Primary Schools and renovation of Rukiga district offices), the only available proof of environmental screening was for construction of Rukiga district administration block 1st phase dated 2nd March 2018 and construction of 5 stance VIP latrine at Kasooni Primary School dated 18th June 2018</p> | <p>0</p> |

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| <p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p> | <ul style="list-style-type: none"> • Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1 | <p>For all the sampled projects none had a completed certification form signed by the environmental officer and the CDO. For example, no environmental/social mitigation certification forms were signed by Environmental officer or CDO for the following projects: construction of Rukiga district administration block 1st phase, construction of Rukiga Town Council office block, construction of 5 stance VIP latrines at Ntaraga and Kasooni Primary Schools and renovation of Rukiga district offices), the only available proof of environmental screening was for construction of Rukiga district administration block 1st phase dated 2nd March 2018 and construction of 5 stance VIP latrine at Kasooni Primary School dated 18th June 2018</p> | <p>0</p> |
| <p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the contract payment certificated includes prior environmental and social clearance (new one): Score 1 | <p>No evidence that environmental and social clearance was done for projects before payment certification for the following projects</p> <ul style="list-style-type: none"> • Construction of Rukiga Town Council office block only one certificate was issued on 18th June 2018. • Construction of 5 stance VIP latrine at Ntaraga Primary School only one certificate was issued on 20/06/2018. • Construction of 5 stance VIP latrine at Kasooni Primary School two certificates were issued on 28/03/18 and 04/06/18 respectively. | <p>0</p> |

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| <p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p> | <ul style="list-style-type: none">• Evidence that environmental officer and CDO monthly report, includes a) completed checklists, b) deviations observed with pictures, c) corrective actions taken. Score: 1 | <p>There was no evidence that the environmental officer and CDO report monthly therefore no completed check lists and observed deviations for the sampled projects.</p> | <p>0</p> |
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| Summary of requirements | Definition of compliance | Compliance justification | Score |
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| Human resource planning and management | | | |
| <p>The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p> | <ul style="list-style-type: none"> 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 | <p>According to the budget submitted to the Ministry of Finance for teachers' salaries for the current financial year, all schools had a budget for a head teacher and a minimum of 7 teachers for all schools with 7 classes as well as corresponding minimum for schools with less than 7 classes. Thus meeting the minimum requirement for budgeting. Refer to PBS generated on 21/07/2018:03:00pm</p> | 4 |
| <p>The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p> | <ul style="list-style-type: none"> Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school (or minimum of a teacher per class for schools with less than P.7) for the current FY: score 4 | <p>The PBS showed that deployment in schools adhered to the minimum requirements: the sampled school (Kasoni P.S, Ntaraga P.S, Muhanga Kataburaza P.S, and Nyeikunama P.S) had head teachers and teachers' lists accessed on the walls in staffrooms or head teachers' offices which matched what was accessed at the district .</p> | 4 |

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| <p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100%: score 6 o If 80 - 99%: score 3 o If below 80%: score 0 | <p>There was evidence that structure for primary school teachers had been filled according to the Staff Lists and Wage Performance by Cost Centre generated on 20/09/2018 01:32 which tallied with the list of teachers provided for in the staff lists accessed at the district.</p> | <p>6</p> |
| <p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6 | <p>According to the staff structure approved by Ministry of Public Service on 3rd October 2017, Ref:ARC135/306/01, for Rukiga District, the local government is supposed to have three school inspectors: The Principal Inspector of schools, Senior Inspector of Schools, and Inspector of School. However, only the Principal Inspector of Schools was substantively appointed on April 01, 2016, Min DSC: min no: 19/2016. . The other positions are still vacant.</p> | <p>0</p> |
| <p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p> | <p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> • Primary Teachers: score 2 | <p>No recruitment plan was seen.</p> | <p>0</p> |

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| <p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p> | <p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> • School Inspectors: score 2 | <p>There was no evidence provided to indicate that the department had submitted a recruitment plan to the HRM to fill the vacant positions for school inspectors in the current FY.</p> | <p>0</p> |
| <p>Monitoring and Inspection</p> | | | |
| <p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p> | <p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> • 100% school inspectors: score 3 | <ul style="list-style-type: none"> • There is only one School Inspector (Mr. Ndyabege Christopher) in Rukiga district. According to the personal file, medical form from Mulago Hospital indicated and conformed that this staff was on sick leave for the whole of the YF 17/18. He was therefore not appraised due to being away on sick leave as per medical form dated 27/02/2017 and sick leave approval letter dated 18/04/2017 and signed by Matsiko Mitungwire Abert. | <p>3</p> |

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| <p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p> | <p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> • Primary school head teachers o 90 - 100%: score 3 o 70% and 89%: score 2 o Below 70%: score 0 | <ul style="list-style-type: none"> • There are 71 Primary Schools in Rukiga district. A sample of 10 Primary schools was selected and files of their H/Teachers examined and analysed. Thus personal files of the 10 Head Teachers indicated that 9 out of 10 were appraised as per appraisal reports found inside their files. These included for example, for H/Teacher for Kakatunda P. School (Mr. Elias Kabakyenga) appraised by Eudia Mutabazi on 5.2.18, H/Teacher for Wacheba P School (Nkwasi Josephat) appraised by Byabakama Deu on 5.2.18, Katungu P School (Mwijuka James) appraised by Agaba on 5.2.18 etc. This list of Head Teachers and appraisal reports and agreements shows that 9 out of 10 is a percentage of 90%. | <p>3</p> |
| <p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1 | <p>Only the MDD circular was availed at the DEO's office. The officers who participate in the review said that they assumed the MoES should be sending them the circulars and they had not received them.</p> | <p>0</p> |
| <p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p> | <ul style="list-style-type: none"> • 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 | <p>There was no evidence or meeting minutes where circulars were discussed with head teachers.</p> | <p>0</p> |

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| <p>The LG Education De- partment has effectively inspected all registered primary schools2</p> <p>Maximum 12 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: o 100% - score 12 o 90 to 99% - score 10 o 80 to 89% - score 8 o 70 to 79% - score 6 o 60 to 69% - score 3 o 50 to 59 % score 1 o Below 50% score 0. | <p>The local government of Rukiga has 44 licenced primary schools. Only four (Muhanga Golden, Rwamatunguru, St. Claria and Mother care) had received at least one or two visits in the last three terms.</p> | <p>0</p> |
| <p>LG Education department has discussed the results/ reports of school inspec- tions, used them to make recommendations for corrective actions and fol- lowed recommendations</p> <p>Maximum 10 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4 | <p>The evidence in relation to school inspection was for the four schools, as explained in 7; there were reports and recommendations for each of the schools.</p> | <p>4</p> |

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| <p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2 | <p>There was evidence of submission of school inspection reports to the Directorate of Education Standards (DES) in form of acknowledgement letters dated: 15th February 2018 & 17th July 2018.</p> | <p>2</p> |
| <p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the inspection recommendations are followed- up: score 4. | <p>No evidence was available for following up the recommendations for the schools that had evidence of inspection. The reasons given for failure to do this were that the department still faces challenges of staffing and they do not have sufficient transport means.</p> | <p>0</p> |

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| <p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> o List of schools which are consistent with both EMIS reports and PBS: score 5 | <p>The list of schools in the PBS was 71 primary schools, while the list that provided by the MoES had 81 out of which 12 were private schools. When these private schools are removed, the MoES list remains with 69 government schools. However, this list also misses two government schools: Bucundura and Hamwaro to have both lists tally exactly. On the whole, the two lists are highly similar or consistent.</p> | 5 |
| <p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p> | <p>Evidence that the LG has submitted accurate/consistent data:</p> <ul style="list-style-type: none"> • Enrolment data for all schools which is consistent with EMIS report and PBS: score 5 | <p>There lists submitted in the PBS had 29,385 pupils while that obtained from the Ministry had 25,335. The inconsistency is big, but it should be noted that Rukiga District was created last year and they therefore are in the process of harmonizing their data. There were no EMIS reports because the forms have not been shared by the MoES since 2016.</p> | 0 |
| <p>Governance, oversight, transparency and accountability</p> | | | |
| <p>The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc. during the previous FY: score 2 | <p>The district availed a set of council minutes for the FY 2017/18 as follows: 20/12/2017; 15/3/2018; and all the sets of minutes provide proof that Council met and discussed service delivery related issues including; operationalisation of the markets,Monitoring reports,Sanitation issues ,distribution of mosquito nets,and workplans.</p> | 2 |

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| <p>The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the education sector committee has presented issues that require approval to Council: score 2 | <p>Council Committee responsible for Community,Health and Education met on the following days:7/12/2017; 28/2/2018; 13/12/2017; where issues like opening of new roads,Construction VIP pit latrines in primary schools,Monitoring of all government programmes were presented to council for approval</p> | <p>2</p> |
| <p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p> | <p>Evidence that all primary schools have functional SMCs (estab- lished, meetings held, discussions of budget and resource issues and submission of reports to DEO/ MEO)</p> <ul style="list-style-type: none"> • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80 % schools: score 0 | <p>Five schools were sampled but the head teacher of one of the schools had travelled for a MoES workshop on improving reading in schools. The four that were visited had a reasonable functionality of SMCs, with meeting minutes documented as follows:</p> <p>Kasoni P.S: 7/06/2017, 13/02/2018, 23/08/2018</p> <p>Ntaraga P.S: 02/10/2017, 13/ 02/2018, 09/05/2018</p> <p>Nyeikunama P.S: 04/12/2017, 16/07/2018</p> <p>Muhanga Katabura P.S: 30/11/2017, 12/04/2018, 07/06/2018</p> | <p>5</p> |
| <p>The LG has publicised all schools receiving non- wage recurrent grants</p> <p>Maximum 3 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the LG has publicised all schools receiving non-wage recurrent grants <p>e.g. through posting on public notice boards: score 3</p> | <p>There were lists posted on the wall of the District's entrance and all sampled schools had the record of the funds received displayed on their staff room walls or head teachers' reception walls.</p> | <p>3</p> |
| <p>Procurement and contract management</p> | | | |

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| <p>The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements,</p> <p>to the Procurement Unit that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the sector has submitted procurement input to Procurement Unit that covers all investment items in the approved Sector annual work plan and budget on time by April 30: score 4 | <p>The education sector prepared and submitted their procurement plan to the Procurement Unit although it was received on August 20th 2018.</p> | <p>0</p> |
| <p>Financial management and reporting</p> | | | |
| <p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3. | <p>The LG education department certified and recommended payments to suppliers on time because the 3 sampled contracts (agreements) were paid for within 30 days stipulated in the contracts as in the cases of Habasa Muhire & Sons Ltd with invoice dated 19th/04/2018 and paid on 30thApril 2018, Geses (U) Ltd with invoice dated 16th/03/2018 and paid on 29/03/2018 and another invoice of Geses(U) Ltd dated 16th June 2018 and paid on 27th June 2018.</p> | <p>3</p> |
| <p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by 15th of July for consolidation: score 4 | <p>From the Planner it was established that there was no evidence of the departmental submission of the annual performance report. However, the LG was using online reporting (PBS) and the planner was able to consolidate the quarter 4 by 4/9/2018. Therefore the annual performance report was submitted later than the stipulated date.</p> | <p>0</p> |

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| <p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 o If all queries are not responded to score 0 | <p>Education department had 2 audit queries in the 2nd quarter audit reports on purchases and stores which were not taken on charge and un-updated vote books, abstracts and ledgers. The DEO responded to all of them in a letter dated 25th January 2018 and was received by the IA office on 6th Aug 2018. .</p> | <p>2</p> |
| <p>Social and environmental safeguards</p> | | | |
| <p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills, etc.: Score 2 | <p>No guidelines were available, and no record of dissemination was accessed.</p> | <p>0</p> |

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| <p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2 | <p>There was no evidence provided</p> | <p>0</p> |
| <p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the School Management Committee meets the guideline on gender composition: score 1 | <p>The Guidelines on gender composition for the SMCs says the committee should have at least 2 females on the team. All the schools adhered to this guideline: with Kasoni P.S: 3 females, Ntaraga 3 females, Nyeikunama P.S: 4females and Muhanga Katabura P.S: 3 females</p> | <p>1</p> |
| <p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p> | <ul style="list-style-type: none"> • 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: | <p>No evidence was produced</p> | <p>0</p> |

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| <p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that all school infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: Score 1 | <p>No evidence was produced</p> | <p>0</p> |
| <p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p> | <ul style="list-style-type: none"> • The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 1 | <p>No evidence was produced</p> | <p>0</p> |

| Summary of requirements | Definition of compliance | Compliance justification | Score |
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| Human resource planning and management | | | |
| <p>LG has substantively recruited primary health care workers with a wage bill provision from PHC wage</p> <p>Maximum 8 points for this performance measure</p> | <p>Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY</p> <ul style="list-style-type: none"> • More than 80% filled: score 8 • 60 – 80% - score 4 • Less than 60% filled: score 0 | <ul style="list-style-type: none"> • Review of the performance contract (generated on 26/07/2018 02:58) and approved structure revealed that there are 217 established position of primary health workers filled. • Review of wage IPFs (generated on 19/07/2018) revealed that there are 217 positions of health worker with a wage bill provision for the year 2018/19 • Hence 100% of the structure for primary health workers with a wage bill provision from PHC wage for the current FY has been filled | 8 |
| <p>The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department</p> <p>Maximum 6 points for this performance measure</p> | <p>Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of primary health care workers: score 6</p> | <ul style="list-style-type: none"> • There was no staff recruitment plan covering the vacant positions of primary health care workers for the year 2018/19 submitted to the HRM. Hence no submission letter was available • The explanation given by the district was that the wage IPF received for the year 2018/19 did not cover health workers to be recruited in 2018/19 | 0 |

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| <p>The LG Health department has conducted performance appraisal for Health Centre IVs and Hospital In-charge and ensured performance appraisals for HC III and II in-charges are conducted</p> <p>Maximum 8 points for this performance measure</p> | <p>Evidence that the all health facilities in-charges have been appraised during the previous FY:</p> <ul style="list-style-type: none"> o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0 | <ul style="list-style-type: none"> • There are two Health Centres 4 in Rukiga district with in-charges as follows: <ul style="list-style-type: none"> i). Mparo HC4 - in-charge of this HC4 is Atuheirwe Fiona. ii). Kamwezi HC4 with its in-charge called Dr. Deus Besigye. <p>Appraisal reports found in their personal files indicates that both HC4 in-charges were appraised on 15/7/18 by Dr Ahabwe Davis. Therefore, both HC4 In-charges of Rukiga district were appraised during FY 2017/18, which is 100%.</p> | 8 |
| <p>The Local Government Health department has deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the LG Health department has deployed health workers in line with the lists submitted with the budget for the current FY, and if not provided justification for deviations: score 4 | <p>The number of midwives and enrolled nurses deployed at Noozi HC II (1 enrolled nurse), Kitojo HC II (2 enrolled nurses), Kitanga HC II (2 enrolled nurses) & Kashambya HC III (2 enrolled midwives & 2 enrolled nurses) as counted on the health worker`s list on deployment are consistent with the staff Lists submitted with the budget of 2018/19 (Generated on 21/07/2018 03:00)</p> | 4 |
| Monitoring and Supervision | | | |
| <p>The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the DHO/ MHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3 | <p>There was no evidence (a communication letter) to indicate that the MHO communicated ALL of the following guidelines issued by the national level in the FY 2017/18:</p> <ol style="list-style-type: none"> 1. Ministry of Health Guidelines for Local Government Planning Process Health Sector Supplement – 2017 2. Ministry of Health, Sector Grant and Budget Guidelines to Local Governments FY 2018/19 3. Ministry of Health, Policy Strategies for Improving Health Service Delivery 2016-2021 | 0 |

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| <p>The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p> | <ul style="list-style-type: none"> Evidence that the DHO/ MHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3 | <p>There were no meeting minutes provided to indicate that the DHO held meetings with health facility in-charges during the FY 2017/18 and among others explaining the guidelines, policies, circulars issued by the national level</p> | <p>0</p> |
| <p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p> | <p>Evidence that DHT/MHT has supervised 100% of HC IVs and district hospitals (including PNFPs receiving PHC grant) at least once in a quarter: score 3</p> | <p>DHT Integrated support supervision reports FY 2017/18) were presented (Q1 report dated 30/09/2017, Q2 report dated 30/01/2018, Q3 report dated 03/04/2018 & Q4 report dated 30/06/2018. All reports indicated that 100% of HC IVs were supervised by the DHT during FY 2017/18.</p> | <p>3</p> |
| <p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p> | <p>Evidence that DHT/MHT has ensured that HSD has supervised lower level health facilities within the previous FY:</p> <ul style="list-style-type: none"> If 100% supervised: score 3 80 - 99% of the health facilities: score 2 60% - 79% of the health facilities: score 1 Less than 60% of the health facilities: score 0 | <p>The DHT provided evidence (copies of support supervision reports by Rukiga South and Rukiga North HSDs) that indicated that less than 60% of lower level health facilities were supervised during the FY 2017/18</p> <p>Rukiga North HSD – (What was presented as a Q1 report was actually an activity report dated 23/10/2017 with no mention of HFs supervised, No Q2 report was presented. Q3 report dated 10/04/2018 did not indicate the number or names of HFs supervised & Q4 report dated 11/07/2018 indicated that only 6 HFs of 18 HFs were supervised during that quarter).</p> <p>Rukiga South HSD (What was presented as a Q2 report was actually an activity report dated 05/01/2018 with no mention of HFs supervised, Q1 report was presented but had no mention of the HFs supervised. Q3 report dated 5/04/2018 indicated that 12 of 15 HFs were supervised & Q4 report dated 30/06/2018 indicated that all 15 HFs were supervised during that quarter).</p> | <p>0</p> |

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| <p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p> | <ul style="list-style-type: none"> Evidence that all the 4 quarterly reports have been discussed and used to make recommendations (in each quarter) for corrective actions during the previous FY: score 4 | <p>The HSDs did not provided the 4 mandatory quarterly integrated support supervision reports for the FY 2017/18. DHT meeting held on the 06/07/2017, 25/07/2017, 28/08/2017, 15/09/2017, 23/10/2017, the extended DHT on the 30/11/2017, 12/01/2018, 11/05/2018 and the extended DHT of the 01/06/2018 did not have record of any discussion of supervision reports of neither the DHT nor HSD integrated support supervision reports to make to make recommendations (in each quarter)</p> | <p>0</p> |
| <p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p> | <ul style="list-style-type: none"> Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6 | <p>DHT meetings did not did not have record of discussion of neither the DHT nor HSD integrated support supervision reports. Hence no recommendations to be followed upon.</p> | <p>0</p> |
| <p>The LG Health department has submitted accurate/consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p> | <ul style="list-style-type: none"> Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10 | <p>The lists of health facilities receiving PHC funding (in PBS) is consistent with the list received from MoH (health facilities reporting 2018/19). All 26 health facilities in PBS are also on the HMIS list from MOH.</p> | <p>10</p> |

Governance, oversight, transparency and accountability

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| <p>The LG committee responsible for health met, discussed service delivery issues and presented is- sues that require approval to Council</p> <p>Maximum 4 for this performance measure</p> | <ul style="list-style-type: none"> Evidence that the LG committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2 | <p>Council Committee responsible for health met on 7/12/2017 where upgrading of Mparo HIV to District hospital, approval of health unit management committee issues were discussed</p> | <p>2</p> |
| <p>The LG committee responsible for health met, discussed service delivery issues and presented is- sues that require approval to Council</p> <p>Maximum 4 for this performance measure</p> | <ul style="list-style-type: none"> Evidence that the health sector committee has presented issues that require approval to Council: score 2 | <p>From the minutes dated 28/2/2018; there were issue like monitoring reports, Upgrading of health facilities that were forwarded to council for approval.</p> | <p>2</p> |

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| <p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 6 points</p> | <p>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> • If 100% of randomly sampled facilities: score 6 • If 80-99 %: score 4 • If 70-79: %: score 2 • If less than 70%: score 0 | <p>HUMCs were not fully functional as not all sampled HFs held the four mandatory HUMC meetings and meetings minutes presented. Noozi HC II presented all 4 mandatory HUMC meeting minutes dated 13/09/2017, 10/12/2017, 20/03/2018 & 23/06/2018. Kitojo HC II presented all 4 mandatory HUMC meeting minutes dated 30/09/2017, 15/12/2017, 24/02/2018 & 09/06/2018. Kitanga HC II – no HUMC meeting minutes presented as the Incharge was not at station yet they were locked away in his office AND Kashambya HC III presented only 3 HUMC meeting minutes because they had held only 3 HUMC meetings during FY 2017/18. On the 15/07/2017, 21/12/2017 & 31/05/2018</p> | <p>0</p> |
| <p>The LG has publicised all health facilities receiving PHC non-wage recurrent grants</p> <p>Maximum 4 for this performance measure</p> | <ul style="list-style-type: none"> • 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 | <p>There was posting on the public notice board at the DHOs office of a list of all health facilities receiving PHC non-wage recurrent grants. The amount received by each Health facility was also indicated.</p> | <p>4</p> |
| <p>Procurement and contract management</p> | | | |

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| <p>The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p> | <ul style="list-style-type: none"> Evidence that the sector has submitted input to procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2 | <p>The DHO provided a procurement plan prepared by the MHO and received by the Head of PDU on the 23th April 2018</p> | <p>2</p> |
| <p>The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p> | <ul style="list-style-type: none"> Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2. | <p>There was a copy of form PP1 (Subject of procurement – Fuel for PHC non-wage quarter one activities) was submitted by MHO to the PDU. It confirmed by PMO on the 13th August 2017 and was signed for confirmation of funding by the CAO on the same day.</p> | <p>2</p> |
| <p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 4 for this performance measure</p> | <ul style="list-style-type: none"> Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4. | <p>The DHO certified and recommended payments to suppliers on time because the sampled 3 contracts certified and recommended suppliers within 30 days as per the contracts. For example the three supply contracts for Agaba Services Ltd with invoice dated 3rd March 2018 was paid on 13th March 2018, Total Uganda with invoice dated 22nd January 2018 was paid on 26th January 2018 and the invoice of Geses (U) Ltd dated 15th February 2018 was paid on 29th February 2018.</p> | <p>4</p> |
| <p>Financial management and reporting</p> | | | |

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| <p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p> | <ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4 | <p>There was no evidence of departmental submission of the annual performance report and other quarterly reports to planning unit. However, the LG was using online reporting and the planner was able to consolidate the quarter 4 by 4/9/2018</p> | <p>0</p> |
| <p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p> | <p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</p> <ul style="list-style-type: none"> If sector has no audit query: Score 4 If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: Score 2 points If all queries are not responded to Score 0 | <ul style="list-style-type: none"> The LG health department had 4 internal audit findings in the 1st quarter internal audit report relating to procurement requisitions, un-updated vote books, abstracts and ledgers, Kamwezi Health Centre IV and Mparo Health Centre 4 and 2nd quarter relating to Human Resource Absenteeism and poor stores management in financial year 2017/18 from internal audit. <p>The audit findings for the 2 quarters were responded to by the District Health Officer (Dr. Ahabwe Davis) in his letters dated 30th November 2017 and 12th March 2018 respectively.</p> | <p>2</p> |
| <p>Social and environmental safeguards</p> | | | |

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| <p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p> | <ul style="list-style-type: none"> Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines (i.e. minimum 30 % women: score 2 | <p>All Health Unit Management Committees (HUMCs) at the sampled health facilities met the gender composition as per guidelines (i.e. minimum of 30% females on the HUMC).</p> <p>Mparo HC IV (4 female & 4 male)</p> <p>Kyereno HC II (2 female & 3 male)</p> <p>Kyogo HC III (3 female & 3 male)</p> <p>Kashambya HC III (3 female & 4 male)</p> <p>Kamwezi HC II (2 female & 3 male)</p> | <p>2</p> |
| <p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p> | <ul style="list-style-type: none"> Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2. | <p>There was no evidence LGs had issued guidelines on how to manage sanitation in health facilities (No communication letter from the LG was provided). None of the visited HFs had guidelines on how to manage sanitation in health facilities. Toilets at Noozi HC II and Kitojo HC II were not separated (labeled for Male and Female)</p> | <p>0</p> |
| <p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p> | <ul style="list-style-type: none"> 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 | <p>There was no provision for PHC development for the district during the FY 2017/18, so the health department did not implement any health facility infrastructure projects that year - hence no evidence to indicated that health facility infrastructure projects are screened before approval for construction using the checklist for screening of projects and that risk mitigation plans are developed.</p> | <p>2</p> |

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| <p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p> | <ul style="list-style-type: none"> The environmental officer and community development officer have visited the sites to check whether the mitigation plans are complied with: Score 2 | <p>No site visit reports by the district EO or CDO were available as no health facility infrastructure projects during FY 2017/18 were implemented by the health department</p> | <p>2</p> |
| <p>The LG Health department has issued guidelines on medical waste management</p> <p>Maximum 4 points</p> | <ul style="list-style-type: none"> 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. | <p>All health facilities visited (Noozi HC II, Kitojo HC II, Kitanga HC II, Kashambya HC III and Mparo HC IV) had a chart on medical waste management guidelines pinned in either the Labor ward, laboratory or treatment room.</p> | <p>4</p> |

| Summary of requirements | Definition of compliance | Compliance justification | Score |
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| Planning, budgeting and execution | | | |
| <p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the district Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: <ul style="list-style-type: none"> o If 100 % of the budget allocation for the current FY is allocated to S/Cs below average coverage: score 10 o If 80-99%: Score 7 o If 60-79: Score 4 o If below 60 %: Score 0 | <p>Data obtained from MIS reports at the Ministry of Water and Environment and the District Water Office revealed that the average safe water coverage for Rukiga District for FY 2017/18 was 82%.</p> <p>The Sub-counties with safe water coverage below the District average were:</p> <p>Kamwezi (76%)</p> <p>Kashambya (78%)</p> <p>The review of the Annual Work plans and PBS for FY 2018/19 revealed that out of the total Sector Development Grant of UGX 160,721,666/=, the total budget allocation to Sub-counties below the District average was UGX 107,487,847/= representing 67% of the total Sector Development Grant and was allocated as follows:-</p> <p>Kamwezi S/C: UGX 0</p> <p>Kashambya S/C: UGX 107,487,847/=</p> | 4 |

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| <p>The district Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p> | <ul style="list-style-type: none"> • Evidence that the district Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY. o If 100 % of the water projects are implemented in the targeted S/Cs: Score 15 o If 80-99%: Score 10 o If 60-79: Score 5 o If below 60 %: Score 0 | <p>The review annual progress report for FY 2017/18 prepared by the District Water Office revealed that the following projects were implemented:</p> <ul style="list-style-type: none"> • Protection of 23 No. water springs. • Construction of one 2-stance lined VIP public latrine. • Design of Kabisha Gravity Flow Scheme <p>Out of the above projects, the following were implemented in the Sub-counties with safe water coverage below the District average:</p> <ul style="list-style-type: none"> • Protection of 13 No. water springs in Kashambya Sub-county • Design of Kabisha Gravity Flow Scheme in Kashambya Sub-county <p>In capital terms, about 66% of the water projects were implemented in the Sub-counties with safe water coverage below the District average.</p> | |
| Monitoring and Supervision | | | |

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| <p>The district Water department carries out monthly monitoring of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p> | <p>Evidence that the district Water department has monitored each of WSS facilities at least annually.</p> <ul style="list-style-type: none"> • If more than 95% of the WSS facilities monitored: score 15 • 80% - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60% - 69% monitored: score 5 • 50% - 59%: score 3 • Less than 50% of WSS facilities monitored: score 0 | <p>The review of the annual progress report revealed that the District Water Office protected 23 No. water springs in the Sub-counties of Kashambya and Rwamucucu, constructed 2-stance VIP public latrine at Rukiga Local Government Offices and designed the Kabisha Gravity Flow Scheme. The availed inspection reports clearly indicated that all the new projects were regularly supervised and monitored. Data from the District Water Office indicated that there were functional 188 No. protected springs, 2 No. shallow well 42 No. deep boreholes, 48 Rain Harvesting Tanks and 367 Public Tap-stands. Monitoring reports on the files indicated that about 67 water supply points were monitored and supervised every Quarter during the FY 2017/18 by the District Water Office supported by Extension Staff located at the respective Sub-counties. It is therefore estimated that about 268 out of 647 functional water supply points were monitored and supervised which represented about 41%.</p> | <p>0</p> |
| <p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p> | <ul style="list-style-type: none"> • 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 | <p>The District Water Office submitted FORM 1 (Data Collection Form for Point Water Sources) and FORM 4 (Source Functionality, Management and Gender) to the Ministry of Water and Environment for capture in the MIS on 13th April 2018 and 14th August 2018 respectively, The list of the water facilities reported in the PBS were consistent with MIS records at the Ministry of Water and Environment and included:</p> <ul style="list-style-type: none"> • Protection of 23 No. water springs. • Construction of one 2-stance lined VIP public latrine. • Design of one piped water supply | <p>5</p> |

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| <p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p> | <ul style="list-style-type: none"> List of water facility which are consistent in both sector MIS reports and PBS: score 5 | <p>List of water facilities indicated in the Ministry of Water and Environment MIS reports were consistent with those in PBS as follows:</p> <ul style="list-style-type: none"> Protection of 23 No. water springs. Construction of one 2-stance lined VIP public latrine. Design of one piped water supply scheme. | <p>5</p> |
| <p>Procurement and contract management</p> | | | |
| <p>The district Water department has submitted input for district's procurement plan, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p> | <p>Evidence that the sector has submitted input for the district procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4</p> | <p>The sector submitted in put for the District Procurement Plan to PDU that cover all investment items in the approved Sector annual work plan and budget on 24th April 2018.</p> | <p>4</p> |
| <p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p> | <ul style="list-style-type: none"> If 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 | <p>There was evidence in form of signed letters that Contract Managers were appointed by the District Administration to manage WSS contracts for the protection of 23 No. protected water springs in Rwamucucu and Kashambya Sub-counties and construction a 2-Stance VIP public toilet at Rukiga District Local Government Headquarters. However, Contract Management Plans were not available. Review of the sampled WSS projects revealed that although site visits were conducted but these were not done on monthly basis..</p> | <p>0</p> |

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| <p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p> | <ul style="list-style-type: none"> If water and sanitation facilities constructed as per design(s): score 2 | <p>All designs for water supply and sanitation facilities were approved by the District Engineer and were availed to the Assessor for review. The Assessor inspected the 2- Stance VIP public latrine at Rukiga District Local Government Headquarters, Nyakagera protected water spring in Nyarumbi Parish, Rwamucucu Sub-county, Nyamuganya protected water spring in Kitanga Parish, Kashambya Sub-county, Rugarambiro protected water spring in Kitunga Parish, Kashambya Sub-county and Kyangera protected spring in Kitunga Parish, Kashambya Sub-county. All of the water supply and sanitation facilities were constructed as per engineering designs and specifications and were found functioning satisfactorily.</p> | <p>2</p> |
| <p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p> | <ul style="list-style-type: none"> If contractor handed over all completed WSS facilities: score 2 | <p>Certificate of Substantial Completion of Works and Hand-over reports were not available on files</p> | <p>0</p> |
| <p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p> | <ul style="list-style-type: none"> If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2 | <p>Sampled Interim Payment Certificates showed that the District Water Officer had duly certified the Interim Payment Certificates. E.g. Under Procurement Reference No. RUKI 620/WRKS/2017 – 2018/00014 for the protection of 23 Water Springs in Kashambya and Rwamucucu Sub-counties Payment Certificate No.1 was duly certified by the District Water Officer on 28th June 2018. Under Procurement Reference No. RUKI 620/WRKS/2017 – 2018/00007 for the construction of a 2- Stance VIP Latrine at Rukiga District Local Government Headquarters, Payment Certificate No.1 was duly certified by the District Water Officer on 29th January 2018.</p> | <p>2</p> |

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| <p>The district Water department has certified and initiated payment for works and supplies on time</p> <p>Maximum 3 for this performance measure</p> | <ul style="list-style-type: none"> Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points | <ul style="list-style-type: none"> The LG Water department certified and recommended payments to suppliers on time as provided for the contracts A sample of 4 payment vouchers and contracts showed that all payments were certified and paid within a maximum of 30 days provided for in the contract as indicated below: <ol style="list-style-type: none"> Payment Voucher No 7/17 for Agaba Services Ltd was invoiced on 20/11/2017 and paid on 29/11/2017 Payment Voucher No 42/6 for Kabale Joiners & Contractors Ltd was invoiced on 28/6/2018 and paid on the same day. Payment Voucher No 35/6 for Ramuju Service Garage was invoiced on 18/6/2018 and paid 28/6/2018 Payment Voucher 30/6 for Zeph Construction Co Ltd was invoiced on 26/6/2018 and paid on 26/06/2018 | <p>3</p> |
| <p>Financial management and reporting</p> | | | |
| <p>The district Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 5 for this performance measure</p> | <ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5 | <p>The District Water Office did not provide evidence that the annual performance report for FY 2017/18 (including four quarterly reports) had been submitted to the Planner by mid-July 2018 for consolidation.</p> | <p>0</p> |

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| <p>The District Water Department has acted on Internal Audit recommendation (if any)</p> | <ul style="list-style-type: none"> • Evidence that the sector has provided information to the internal audit on the status of implementation of all audit | <p>The LG Water department did not have any internal audit findings for the FY 2017/18.</p> | <p>5</p> |
| <p>Maximum 5 for this performance measure</p> | <p>findings for the previous financial year</p> <ul style="list-style-type: none"> o If sector has no audit query score 5 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 <p>If queries are not responded to score 0</p> | | |
| <p>Governance, oversight, transparency and accountability</p> | | | |

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| <p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p> | <ul style="list-style-type: none"> Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3 | <p>Standing Committee for Works & Technical services where water sector belongs met on 27/2/2018 under min RDCC/16/05/2018 (2) discussed issues like mutyogo – Butumbi Road to be replaced with Rwenyangobe road, Monitoring and supervision for 3rd quarter.</p> | <p>3</p> |
| <p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p> | <ul style="list-style-type: none"> Evidence that the water sector committee has presented issues that require approval to Council: score 3 | <p>From the assessment of minutes from the meetings held on 27/2/2018 under min RDCC/16/05/2018(2): there is proof of issues presented that include implementation plans for gravity water schemes, monitoring strategies, community participation issues were forwarded to council for approval</p> | <p>3</p> |

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| <p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p> | <ul style="list-style-type: none"> The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2. | <p>The was evidence that the AWP, budget and the Water Development grant releases and expenditures were clearly displayed on the District notice boards as per the PPDA Act. There was no evidence that the above were discussed at advocacy meetings.</p> | <p>0</p> |
| <p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p> | <ul style="list-style-type: none"> All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2 | <p>The water supply projects which were sampled on 14th and 15th September 2018 were Nyakagera protected water spring in Nyarumbi Parish, Rwamucucu Sub-county, Nyamuganya protected water spring in Kitanga Parish, Kashambya Sub-county, Rugarambiro protected water spring in Kitunga Parish, Kashambya Sub-county, Kyangera protected spring in Kitunga Parish, Kashambya Sub-county and the 2-Stance VIP public latrine at Rukiga District Local Government Headquarters. The above projects were not labeled to indicate the name of the project, date of construction, the contractor and source of funding.</p> | <p>0</p> |
| <p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p> | <ul style="list-style-type: none"> Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2 | <p>Information on tenders and contract awards (indicating contractor name /contract and contract sum) were displayed on the District Notice Boards.</p> | <p>2</p> |

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| <p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p> | <ul style="list-style-type: none"> If communities apply for water/ public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1 | <p>Application letters from communities for water supply facilities together with the minutes of the meetings held by communities were not on files. Therefore, there is no evidence that communities had applied for water/public sanitation facilities and contributed funds.</p> | <p>0</p> |
| <p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p> | <ul style="list-style-type: none"> Water and Sanitation Committees that are functioning evidenced by either: i) collection of O&M funds, ii(carrying out preventive maintenance and minor repairs, iii) facility fenced/protected, or iv) they an M&E plan for the previous FY: score 2 <p>Note: One of parameters above is sufficient for the score.</p> | <p>The sampled water supply facilities were fenced, properly maintained and functioning satisfactorily. Quarterly reports from Extension staff on functionality of Water User Committees and software activities implemented were available on files.</p> <p>O & M funds were being raised in form of user fees. Communities being served by protected springs and boreholes pay user fee of UGX 500/= per household per month. Whereas for gravity flow schemes, communities pay user fee of UGX 1,000/= per household. The respective Water and Sanitation Committees were responsible for the collection and safe custody of the user fees with the support supervision from the Sub-counties and District Water Office. Each Water and Sanitation Committee kept a book where records of funds received and spent are maintained.</p> | <p>2</p> |
| <p>Social and environmental safeguards</p> | | | |
| <p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p> | <ul style="list-style-type: none"> 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 | <p>There was no evidence that the projects implemented had been subjected to environmental screening.</p> | <p>0</p> |

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| <p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p> | <ul style="list-style-type: none"> Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1 | <p>Since the projects were not subjected to environmental screening, environmental concerns could not be ascertained.</p> | <p>0</p> |
| <p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p> | <ul style="list-style-type: none"> Evidence that construction and supervision contracts have clause on environmental protection: score 1 | <p>Sampled construction and supervision contracts did not have any clauses on environmental protection.</p> | <p>0</p> |
| <p>The district Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p> | <ul style="list-style-type: none"> If at least 50% WSCs are women and at least one occupying a key position (chairperson, secretary or Treasurer) as per the sector critical requirements: score 3 | <p>Review of information contained in FORM 4 (Source Functionality, Management & Gender) and the Annual Progress Reports revealed that at least 50% WSCs are women and at least one occupied a key position (chairperson, secretary or treasurer) as per the sector critical requirements.</p> | <p>3</p> |

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| <p>Gender and special needs-sensitive sanitation facilities in public places/</p> <p>RGCs provided by the Water Department.</p> <p>Maximum 3 points for this performance measure</p> | <ul style="list-style-type: none"> • If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3 | <p>The three public sanitation facilities at Rukiga District Local Government Headquarters, Rushebeya Market in Rwamucucu Sub-county and Bukinda Market in Muhanga Town Council were not marked to give direction as to which stances were for men, women and PWDs.</p> | <p>0</p> |
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