



Local Government Performance Assessment

Sheema Municipal Council

(Vote Code: 796)

Assessment	Scores
Accountability Requirements	17%
Crosscutting Performance Measures	78%
Educational Performance Measures	77%
Health Performance Measures	77%
Water Performance Measures	0%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Annual performance contract			
<p>LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.</p>	<ul style="list-style-type: none"> • 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>The LG submitted on line the Annual Performance Contract dated 13th /08/2018 at 10.46am according to the information/data on the PBS at the LG planning unit. The delayed submission was attributed to the late training of the municipal planner on the use of the PBS.</p>	No
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>The LG submitted a Budget for the FY 2018/19 that did not include a procurement plan. The budget had been generated on 13th /08/2018 according to the information on the PBS at the LG planning unit. And the procurement plan generated on the 30th /8/2018. The LG attributed this to the challenges on the PBS and its being new to the LG.</p>	No
Reporting: submission of annual and quarterly budget performance reports			

<p>LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)</p>	<p>From MoFPED's official record/inventory of LG submission of annual performance report submitted to MoFPED, check the date MoFPED received the annual performance report:</p> <ul style="list-style-type: none"> • 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>The LG submitted the Annual Performance Report for the previous FY 2017/2018 on 20th /08/2018 according to the PBS record at the planning unit. This delay was attributed to the system challenges on the PBS.</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>The LG had Submissions of the all quarterly budget performance reports during FY 2017/2018 in hardcopy as seen from information at the LG Planning unit: the delays in submission of the quarterly report were attributed to PBS being new and that officers were not trained in time besides the network challenges.</p> <table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">Quarter</th> <th style="text-align: left;">Date of submission</th> <th style="text-align: left;">Reference</th> </tr> </thead> <tbody> <tr> <td>Quarter 01</td> <td>16th /12/2017</td> <td>PBS LG planning unit.</td> </tr> <tr> <td>Quarter 02</td> <td>22nd /2/2018</td> <td>PBS LG planning unit.</td> </tr> <tr> <td>Quarter 03</td> <td>29th /5/2018</td> <td>PBS LG planning unit.</td> </tr> <tr> <td>Quarter 04</td> <td>20th /8/2018</td> <td>PBS LG planning unit.</td> </tr> </tbody> </table>	Quarter	Date of submission	Reference	Quarter 01	16th /12/2017	PBS LG planning unit.	Quarter 02	22nd /2/2018	PBS LG planning unit.	Quarter 03	29th /5/2018	PBS LG planning unit.	Quarter 04	20th /8/2018	PBS LG planning unit.	<p>No</p>
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<p>Audit</p>																		

<p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General and the Auditor General's findings for the previous financial year by end of February (PFMA s. 11 2g). This statement includes actions against all findings where the Internal Auditor and the Auditor General recommended the Accounting Officer to take action in line 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>On 23rd February 2018 a submission was made to the PS/ST on the implementation status of 2 Auditor General recommendations.</p> <p>On 11th April 2018, another report (Ref.SMC/CR/252/4/1), dated 9th April 2018, on the implementation status of internal audit recommendations for FY 2016/17 was written by the Town Clerk to the PS/ST. It had responses on 5 recommendations FY 2016/17.</p> <p>Though the report on AG recommendations was received within the deadline, the internal audit recommendations were received beyond the mandatory February end deadline.</p>	No
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.</p>		<p>The MC had an unqualified audit opinion for its FY 2017/18 financial report.</p>	Yes

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a district/ municipality has:</p> <ul style="list-style-type: none"> • A functional Physical Planning Committee in place that considers new investments on time: score 1. 	<p>There was evidence of a functional physical planning committee. The committee had 9 members appointed on assignment of duties under ref SMC/CR/153/1 on the 11th /7/2016 with the physical planner as secretary and Town clerk as chairperson.</p> <p>There was a plan register and some plans had been approved within 30 days of submission.</p> <p>There was evidence that the physical planning committee considered new investments as per the Min 064/03/UPPC/SMC/18 of 27th /3/2018, Min 050/06/UPPC/SMC/18 of 12/6/2018, Min 040/12/UPPC/SMC/17 of 18/12/2017 and Min 034/09/UPPC/SMC/17</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 was evidence of submission of 4 copies of minutes of the Physical Planning Committee to MoLHUD as per the letter of the Town clerk dated 28/8/2018 and received on 3rd/9/2018 at MoLHUD</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"> • All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0 	<p>The LG did not have a physical development plan. However the LG had embarked on developing a structural plan which had been deposited at the Municipality, divisions and Ministry notice boards. An advert was also placed on the new vision daily paper dated 16th/3/2018.</p>	<p>0</p>
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> • Action area plan prepared for the previous FY: score 1 or else 0 	<p>There was no evidence that the LG had a detailed plan or action area plans. However the LG was in process of developing a detailed plan which had been deposited as above.</p>	<p>0</p>

<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2. 	<p>There was evidence that priorities in the AWP for the FY 2018/19 were based on outcomes of the budget conference as below;</p> <ul style="list-style-type: none"> - Construction of 2 staff house on pg 60 (AWP) - Construction of 1 maternity ward on pg 60(AWP) - Construction of 2 in 1 classrooms at Ngomanungi P/S, Rweigaaga P/S, Nyakashamya P/S and Kamabare P/S on Pg 67(AWP) , pg 5 of the attachment on the budget conference report. - Construction of 5 stance VIP latrine at Mutojo int P/S, Kihunda P/S, Busesire P/S on pg 68(AWP) , pg 5 of the attachment on the budget conference report. - Construction of 1 staff house at Ishekye P/S in the AWP, pg 4 of the attachment on the budget conference report. - Beautification of municipal headquarter at pg 91(AWP) , pg 4 of the attachment on budget conference report. - Completion of Admin block phase 111 at pg 82(AWP) , pg 6 on the attachments on budget conference report. - Supply of demo kits pg 4&5 of budget conference report. 	
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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>There was evidence that the investments in the Annual Work Plan for the current FY 2018/2019 were derived from the approved Five-Year Development Plan pg 79, pg89, pg81, pg180, pg177, pg 112 of the MDP</p> <p>It was noted that sector guidelines for health and education had been received late by the LG.</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 in the AWP had been developed and submitted to the TPC by the planner.</p> <p>However all investment in MDP had general profiles as per LG Planning guidelines</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>There was evidence of a signed copy of the statistical abstract by Town clerk dated 28th /2/2018 with disaggregated data on pg 34,pg 40 which had been approved by TPC under min 8/TPC/CMC/2018 dated 27/2/2018.</p> <p>Notably this was the second statistical abstract the municipality had developed.</p>	<p>1</p>

<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • 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 Infrastructure projects implemented by the LG in the previous FY 2017/2018 were derived from the Annual Work Plan and Budget approved by the LG Council on pg 69, pg 78 of the annual performance report and pg 84, pg83, pg 88 of the annual work plan.</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 annual performance report there was evidence that investment projects were completed as per work plan by the end of the FY; on pg 69, pg 78</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>There was evidence the investments in the FY 2017/18 had been completed within (- /+) 15% of the budget.</p> <p>From the annual performance report and annual budget a review found that all investment were completed below the budget estimates;</p> <ul style="list-style-type: none"> - Construction of municipal office block phase 11 had a – variance of 1 % - Construction of Staff house at Ishekye had been completed at the actual budget estimate. 	<p>2</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 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 of a Budget for O&M in FY 2017/2018 annual budget and annual performance report</p> <p>Although the LG compiled an assets register it was not fully costed and it did not have all infrastructural assets of the LG beside the CFO had not prepared a maintenance plan.</p> <p>From the record in the annual performance there was no evidence of execution of O & M on infrastructural assets in the FY 2017/18.</p>	<p>0</p>
<p>Human Resource Management</p>			
<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG has filled all HoDs positions substantively: score 3 	<ul style="list-style-type: none"> • All heads of department positions are not substantively filled. • Reference to the approved structure REF ARC 135/306/01 DATED 18TH OCTOBER 2017 	<p>0</p>
<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2 	<ul style="list-style-type: none"> • The heads of department were appraised with reference to their personnel files • Ag principal health inspector appraised on 2/8/2018 • Ag production appraised on 6/8/2018 • Ag community development officer appraised on 6/8/2018 • Ag statutory bodies 6/8/2018 • Assistant town clerk 6/8/2018 	<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 staff submitted for recruitment have been considered: score 2 	<ul style="list-style-type: none"> • Minutes of the meeting of sheema district service commission held on 12th – 24th April in the DSC. • Minutes of the meeting of sheema district service commission held 21st , 22nd and 23rd may 2018 in DSC • Town clerk submission Ref SMC/CR/160/1, 20/06/2018, • Town Clerk submission Ref, SMC/CR/160/1 Date 21/05/2018 • Town Clerk submissions SMC/ 160/1 Dated 20th/ 4/2018 	<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"> • Town Clerk’s submissions SMC/160/1 Dated 19/2/2018 • Minutes of the meeting of the District service commission held 8th and 9th may 2018 in DSC office • Meeting of the meeting of the Sheema District service commission held on 7/4/2017 	<p>1</p>

<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that 100 % of positions submitted for disciplinary actions have been considered: score 1 	<ul style="list-style-type: none"> • Minutes of the meeting of the Sheema District Service Commission 7/4/2017 • Town Clerk submissions of staff for Disciplinary action Ref SMC/ CR/ 157/1 date 21/3/2018 • Recommendation of SDSC Ref SMC 157/1 21ST MARCH 2018 	<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"> • The MC recruited 29 staff in may 2018 and all accessed the pay roll in june 2018 	<p>3</p>
<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • 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>Eight staff retired in the previous financial year and two were not able to access the pensions pay roll</p>	<p>0</p>
<p>Revenue Mobilization</p>			

<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> •• 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>Sheema MC Local revenue performance for FY 2017/18 was Shs 723,360,148. Local revenue performance for FY 2016/17 was Shs 518,945,736.</p> <p>The increase was Shs 204,414,412, which was 39.3%. This was > than 10%.</p> <p>The local revenue income for both years was net and did not contain any one offs such as from sale of LG assets.</p>	4
<p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10 %: then score 2. If more than +/- 10 %: Score 0. 	<p>Local revenue original budget for FY 2017/18 was Shs732,196,000. Local revenue realised for the same year 2017/18 was Shs723,360,148.</p> <p>The difference was Shs8,835,852, which was a 1.2%. This was within the +/-10% range.</p>	2

<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>Sheema MC local revenue income for FY 2017/18 was a total of Shs 723,360,148 including LST of Shs 51,913,617. The LG's Financial Statements for FY 2017/18 show that during the year a total of Shs85,154,239of local revenue was transferred to LLGs including the 65% share of LST and other sharable incomes.</p> <p>Examples of the amounts transferred to LLGs include:</p> <p>Transfer of Shs9,040,000 LST on 27/11/17 to 4 Divisions i.e. Kashozi, Kagango, Kabwohe and Sheema Central, each Shs 2,260,000.</p> <p>Transfer of Shs5,008,253 transferred to KashoziDivision on 20/06/18.</p> <p>Transfer of Shs 5,008,253 transferred to Kagango Division on 05/07/18.</p> <p>Transfer of Shs 5,008,253 transferred to Sheema Central Division on 05/07/18.</p> <p>Transfer of Shs 5,008,253 transferred to Kabwohe Division on 05/07/18.</p> <p>Transfer of Shs19,410,084 to 4 Divisions on 27/11/18.</p> <p>Transfer of Shs15,847,650 to 4 Divisions on 12/03/18.</p> <p>Transfer of Shs20,823,475 to 4 Divisions on 30/06/18.</p>	<p>2</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>For the year ended FY 2017/18, Sheema MC spent the following amounts on Council out of local revenue:</p> <p>Council allowances Shs13,100,000</p> <p>Allowances for Standing Committees Shs10,469,000</p> <p>Fuel for Municipal Executive CommitteeShs30,960,000</p> <p>Totalling Shs54,529,000.</p> <p>OSR collected in the previous year i.e. FY 2016/17 was Shs518,945,736.</p> <p>The proportion of this expenditure to the previous year OSR was 10.5%, which was well below the20% limit.</p>	<p>2</p>
<p>Procurement and contract management</p>			

<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> There WAS Evidence that Sheema Municipal Council had the position of Procurement Officer substantively filled under DSC Min. No. 74 (i) (7) of 2017, Appointment Letter Dated 16/06/2017 and Referenced SMC/CR/161/1, Acceptance Letter Dated 21/06/2017, Confirmation Min. No. 29/2018 (c) (13). There was NO Evidence that Sheema Municipal Council had the position of Assistant Procurement Officer substantively filled. 	<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>There WAS Evidence that TEC Produced and Submitted Reports to the Contracts Committee for the previous FY (2017/2018 FY) as exemplified by the following projects:</p> <ul style="list-style-type: none"> Completion of a 2 Classroom Block at MITOJO P/S and KABWOHE MIXED P/S and Staff House at ISEKYE P/S under SFG (SHMC/796/WRKS/2017-2018/0008). TEC Min Date: 03/October/2017. Supply and Installation of Culverts under URF (SHMC/796/WRKS/2017-2018/0006). TEC Min Date: 23/October/2017. Construction of Flush Toilet at KAGANGO BOUNDARY and 3 Stance Pit-Latrine at KIZIBA P/S under DDEG and SFG (SHMC/796/WRKS/2017-2018/0001). TEC Min Date: 23/October/2017. Completion, Plumbing and Extension of Electricity and Piped Water at KABWOHE Division Offices under Local Revenue (SHMC/796/WRKS/2017-2018/0002). TEC Min Date: 23/October/2017. Completion of SHEEMA Municipal Council Administration Block Phase II under DDEG and Local Revenue (SHMC/796/WRKS/2017-2018/0004). TEC Min Date: 03/October/2017. Construction of Market Stalls Structure at KAGANGO Market Phase I under DDEG (SHMC/796/WRKS/2017-2018/0010). TEC Min Date: 07/February/2018. Construction of 3 Stance Pit Latrine with Urinal at KIHUNDA P/S and 4 Stance VIP Latrine with Urinal at SHEEMA Municipal Council Headquarters at Nyakashambya under DDEG (SHMC/796/WRKS/2017-2018/0003). TEC Min Date: 23/October/2017. 	<p>1</p>

<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the Contracts Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1 	<p>There WAS Evidence that Sheema Municipal Council Contracts Committee considered recommendations of the TEC and provided justifications for any deviations from those recommendations as exemplified by the following projects:</p> <ul style="list-style-type: none"> - Completion of a 2 Classroom Block at MITOJO P/S and KABWOHE MIXED P/S and Staff House at ISEKYE P/S under SFG (SHMC/796/WRKS/2017-2018/0008). MCC Min Date: 10/October/2017, Meeting Reference: 35/CC/2017-2018. - Supply and Installation of Culverts under URF (SHMC/796/WRKS/2017-2018/0006). MCC Min Date: 25/October/2017, Meeting Reference: 41/CC/2017-2018. - Construction of Flush Toilet at KAGANGO BOUNDARY and 3 Stance Pit-Latrine at KIZIBA P/S under DDEG and SFG (SHMC/796/WRKS/2017-2018/0001). MCC Min Date: 25/October/2017, Meeting Reference: 44/CC/2017-2018. - Completion, Plumbing and Extension of Electricity and Piped Water at KABWOHE Division Offices under Local Revenue (SHMC/796/WRKS/2017-2018/0002). MCC Min Date: 25/October/2017, Meeting Reference: 43/CC/2017-2018. - Completion of SHEEMA Municipal Council Administration Block Phase II under DDEG and Local Revenue (SHMC/796/WRKS/2017-2018/0004). MCC Min Date: 10/October/2017, Meeting Reference: 34/CC/2017-2018. - Construction of Market Stalls Structure at KAGANGO Market Phase I under DDEG (SHMC/796/WRKS/2017-2018/0010). MCC Min Date: 08/February/2018, Meeting Reference: 74/CC/2017-2018. - Construction of 3 Stance Pit Latrine with Urinal at KIHUNDA P/S and 4 Stance VIP Latrine with Urinal at SHEEMA Municipal Council Headquarters at Nyakashambya under DDEG (SHMC/796/WRKS/2017-2018/0003). MCC Min Date: 25/October/2017, Meeting Reference: 45/CC/2017-2018. - Completion of Administration Block Phase III at SHEEMA Municipal Council Headquarters under DDEG (SHMC/796/WRKS/2018-2019/00001). MCC Min Date: 25/June/2018, Meeting Reference: 114/CC/2017-2018. 	<p>1</p>
<p>The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP</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 	<p>(a) There WAS Evidence that the procurement and Disposal Plan for the current year (2018/2019 FY) covered all infrastructure projects in the approved annual work plan and budget as exemplified by the following procurements that were indicated both in the Procurement Plan and in the approved annual work plan and budget for the current FY (2018/2019 FY):</p>	<p>2</p>

and is followed.

Maximum 2 points on this performance measure.

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

- Completion of Administration Block Phase III at SHEEMA Municipal Council Headquarters under DDEG (SHMC/796/WRKS/2018-2019/00001). (Page 38 – Sheema Municipal Council Budget Estimates for FY 2018/2019, Vote 796, Output 048372 Administrative Capital, 312101 Non Residential Buildings AND was also indicated as No.1 on Page 1 of 16 in Sheema Municipal Council Approved Procurement Plan for 2018/2019 FY Dated 07/August/2018, Submission Letter Referenced SMC/CR/105/1 and Signed by Town Clerk, Received by PPDA Regional Office in Mbarara on 09/August/2018 and Received by MoLG, MoFPED, MoH and MoES on 10/August/2018).

- Completion of a 2 Classroom Block at NGOMANUNGI P/S in Kagango Division under SFG (SHMC/796/WRKS/2018-2019/00003). (Pages 29 and 30 – Sheema Municipal Council Budget Estimates for FY 2018/2019, Vote 796, Output 078180 Classroom Construction and Rehabilitation, 312101 Non Residential Buildings AND was also indicated as No.84 on Page 7 of 16 in Sheema Municipal Council Approved Procurement Plan for 2018/2019 FY Dated 07/August/2018, Submission Letter Referenced SMC/CR/105/1 and Signed by Town Clerk, Received by PPDA Regional Office in Mbarara on 09/August/2018 and Received by MoLG, MoFPED, MoH and MoES on 10/August/2018).

- Completion of a 2 Classroom Block at NYAKASHAMBYA P/S under SFG (SHMC/796/WRKS/2018-2019/00005). (Pages 29 and 30 – Sheema Municipal Council Budget Estimates for FY 2018/2019, Vote 796, Output 078180 Classroom Construction and Rehabilitation, 312101 Non Residential Buildings AND was also indicated as No.82 on Page 7 of 16 in Sheema Municipal Council Approved Procurement Plan for 2018/2019 FY Dated 07/August/2018, Submission Letter Referenced SMC/CR/105/1 and Signed by Town Clerk, Received by PPDA Regional Office in Mbarara on 09/August/2018 and Received by MoLG, MoFPED, MoH and MoES on 10/August/2018).

- Completion of a 2 Classroom Block at RWEIGAAGA P/S in Kashozi Division under SFG (SHMC/796/WRKS/2018-2019/00004). (Pages 29 and 30 – Sheema Municipal Council Budget Estimates for FY 2018/2019, Vote 796, Output 078180 Classroom Construction and Rehabilitation, 312101 Non Residential Buildings AND was also indicated as No.83 on Page 7 of 16 in Sheema Municipal Council Approved Procurement Plan for 2018/2019 FY Dated 07/August/2018, Submission Letter Referenced SMC/CR/105/1 and Signed by Town Clerk, Received by PPDA Regional Office in Mbarara on 09/August/2018 and Received by MoLG, MoFPED, MoH and MoES on 10/August/2018).

- Completion of Staff House at ISEKYE P/S under SFG (SHMC/796/WRKS/2018-2019/00006). (Page 30 – Sheema Municipal Council Budget Estimates for FY 2018/2019, Vote 796, Output 078182 Teacher House Construction and Rehabilitation, 312102 Residential Buildings AND was also

indicated as No.79 on Page 7 of 16 in Sheema Municipal Council Approved Procurement Plan for 2018/2019 FY Dated 07/August/2018, Submission Letter Referenced SMC/CR/105/1 and Signed by Town Clerk, Received by PPDA Regional Office in Mbarara on 09/August/2018 and Received by MoLG, MoFPED, MoH and MoES on 10/August/2018).

(b) There WAS Evidence that the LG made procurements in previous FY (2017/2018 FY) as per plan (adherence to the procurement plan) for the previous FY (2017/2018 FY) as exemplified by the following procurements that occurred in the Procurement Plan, in the Annual Work Plan and Budget and in Referenced Procurement Files for the previous FY (2017/2018 FY):

- Completion of a 2 Classroom Block at MITOJO P/S and KABWOHE MIXED P/S and Staff House at ISEKYE P/S under SFG (SHMC/796/WRKS/2017-2018/0008). (Page 23 – Sheema Municipal Council Approved Budget Estimates for FY 2017/2018, Vote 796, 224002 AND was also indicated as No.8 on Page 1 of 8 in Sheema Municipal Council Adjusted Procurement Plan for 2017/2018 FY Dated 16/May/2018, Submission Letter Referenced SMC/CR/105/1 and Signed by Town Clerk, Received by PPDA Regional Office in Mbarara on 18/May/2018, Revised Procurement Plan for Goods, Works and Services).

- Supply and Installation of Culverts under URF (SHMC/796/WRKS/2017-2018/0006). (Page 26 – Sheema Municipal Council Approved Budget Estimates for FY 2017/2018, Vote 796, Program 07 Works Maintenance (LLC) AND was also indicated as No.79 on Page 6 of 8 in Sheema Municipal Council Adjusted Procurement Plan for 2017/2018 FY Dated 16/May/2018, Submission Letter Referenced SMC/CR/105/1 and Signed by Town Clerk, Received by PPDA Regional Office in Mbarara on 18/May/2018, Revised Procurement Plan for Goods, Works and Services).

- Construction of Flush Toilet at KAGANGO BOUNDARY and 3 Stance Pit-Latrines at KIZIBA P/S under DDEG and SFG (SHMC/796/WRKS/2017-2018/0001). (Page 24 – Sheema Municipal Council Approved Budget Estimates for FY 2017/2018, Vote 796, AND was also indicated as No.76 on Page 5 of 8 in Sheema Municipal Council Adjusted Procurement Plan for 2017/2018 FY Dated 16/May/2018, Submission Letter Referenced SMC/CR/105/1 and Signed by Town Clerk, Received by PPDA Regional Office in Mbarara on 18/May/2018, Revised Procurement Plan for Goods, Works and Services).

- Completion of SHEEMA Municipal Council Administration Block Phase II under DDEG and Local Revenue (SHMC/796/WRKS/2017-2018/0004). (Page 27 – Sheema Municipal Council Approved Budget Estimates for FY 2017/2018, Vote 796, 312202 Administrative Capital AND was also indicated as No.20 on Page 2 of 8 in Sheema Municipal

Council Adjusted Procurement Plan for 2017/2018 FY Dated 16/May/2018, Submission Letter Referenced SMC/CR/105/1 and Signed by Town Clerk, Received by PPDA Regional Office in Mbarara on 18/May/2018, Revised Procurement Plan for Goods, Works and Services).

- Construction of 3 Stance Pit Latrine with Urinal at KIHUNDA P/S and 4 Stance VIP Latrine with Urinal at SHEEMA Municipal Council Headquarters at Nyakashambya under DDEG (SHMC/796/WRKS/2017-2018/0003). (Page 27 – Sheema Municipal Council Approved Budget Estimates for FY 2017/2018, Vote 796, 312202 Administrative Capital AND was also indicated as No.19 on Page 2 of 8 in Sheema Municipal Council Adjusted Procurement Plan for 2017/2018 FY Dated 16/May/2018, Submission Letter Referenced SMC/CR/105/1 and Signed by Town Clerk, Received by PPDA Regional Office in Mbarara on 18/May/2018, Revised Procurement Plan for Goods, Works and Services).

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

Maximum 6 points on this performance measure.

• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/ infrastructure by August 30: score 2

For current FY (2018/2019), there WAS Evidence that the LG prepared 80% of the bid documents for all investment/infrastructure by August 30. ACTUAL Bid Preparation Dates were NOT available. The Assessor made a calculation based on the respective Dates of Approval and the respective Dates of Issue of Individual Bid Documents and found that 100% of Bid Documents for 2018/2019 FY were Approved and Issued BEFORE August 30, 2018. The Calculation made by the Assessor was based on the following Projects and the respective Dates on which the Projects Bid Documents were approved by Sheema Municipal Council Contracts Committee and the respective Dates on which the Projects Bid Documents were issued by PDU:

- Completion of Administration Block Phase III at SHEEMA Municipal Council Headquarters under DDEG (SHMC/796/WRKS/2018-2019/00001). Date of Approval of Bid Document by Sheema Municipal Council Contracts Committee: 01/June/2018. Date of Issue of Bid Document by PDU: 04/June/2018.
- Completion of a 2 Classroom Block at NGOMANUNGI P/S in Kagango Division under SFG (SHMC/796/WRKS/2018-2019/00003). Date of Approval of Bid Document by Sheema Municipal Council Contracts Committee: 14/August/2018. Date of Issue of Bid Document by PDU: 27/August/2018.
- Completion of a 2 Classroom Block at NYAKASHAMBYA P/S under SFG (SHMC/796/WRKS/2018-2019/00005). Date of Approval of Bid Document by Sheema Municipal Council Contracts Committee: 14/August/2018. Date of Issue of Bid Document by PDU: 27/August/2018.
- Completion of a 2 Classroom Block at RWEIGAAGA P/S in Kashozi Division under SFG (SHMC/796/WRKS/2018-2019/00004). Date of Approval of Bid Document by Sheema Municipal Council Contracts Committee: 14/August/2018. Date of Issue of Bid Document by PDU: 27/August/2018.
- Completion of Staff House at ISEKYE P/S under SFG (SHMC/796/WRKS/2018-2019/00006). Date of Approval of Bid Document by Sheema Municipal Council Contracts Committee: 14/August/2018. Date of Issue of Bid Document by PDU: 27/August/2018.

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

Maximum 6 points on this performance measure.

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

For previous FY (2017/2018 FY), there WAS Evidence that the LG had an Updated Contracts Register and had Completed Procurement Activity Files for all procurements as exemplified by the following:

- An Updated Contracts Register was seen by the Assessor at Sheema Municipal Council PDU with a Starting/Opening Procurement Entry S/No. 6 Titled 'Construction of 3 Stance Pit Latrine with Urinal at KIHUNDA P/S and 4 Stance VIP Latrine with Urinal at SHEEMA Municipal Council Headquarters at Nyakashambya under DDEG Referenced 'SHMC/796/WRKS/2017-2018/0003', Selective Bidding, Contractor: DISC Enterprises, Contract Date: 21/November/2017, Contract Price: 27,126,500 UGX, Amount Committed: 27,126,500 UGX, Amount Due: 12,119,445 UGX AND an Ending/Closing Procurement Entry S/No. 01 Titled 'Completion of SHEEMA Municipal Council Administration Block Phase II under DDEG and Local Revenue' Referenced 'SHMC/796/WRKS/2017-2018/0004', Open Domestic Bidding, Contractor: BEKA Technical Services Limited, Contract Date: 30/October/2017, Contract Variation Date: 20/February/2018, Amount Committed: 82,840,400 UGX, Amount Committed after Variation: 95,069,695 UGX, Amount Due: 18,232,996 UGX.

- Referenced and Completed Procurement Activity Files for all procurements were seen by the Assessor at the PDU.

<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>For previous FY (2017/2018 FY), there WAS Evidence that the LG adhered to Procurement Thresholds as exemplified by the following procurements:</p> <ul style="list-style-type: none"> - Completion of a 2 Classroom Block at MITOJO P/S and KABWOHE MIXED P/S and Staff House at ISEKYE P/S under SFG (SHMC/796/WRKS/2017-2018/0008). Contract Amount: 66, 638, 250 UGX. Verified Procurement Method: Open Domestic Bidding. Date of Advertisement: 04/September/2017, New Vision Newspaper. - Supply and Installation of Culverts under URF (SHMC/796/WRKS/2017-2018/0006). Contract Amount: 26, 373, 000 UGX. Verified Procurement Method: Selective Bidding. Letter of Invitation to Bid Dated 28/September/2017, Signed and Stamped by Procurement Officer. - Construction of Flush Toilet at KAGANGO BOUNDARY and 3 Stance Pit-Latrine at KIZIBA P/S under DDEG and SFG (SHMC/796/WRKS/2017-2018/0001). Contract Amount: 47,898,191 UGX. Verified Procurement Method: Selective Bidding. Letter of Invitation to Bid Dated 28/September/2017, Signed and Stamped by Procurement Officer. - Completion, Plumbing and Extension of Electricity and Piped Water at KABWOHE Division Offices under Local Revenue (SHMC/796/WRKS/2017-2018/0002). Contract Amount: 40,362,295 UGX. Verified Procurement Method: Selective Bidding. Letter of Invitation to Bid Dated 28/September/2017, Signed and Stamped by Procurement Officer. - Completion of SHEEMA Municipal Council Administration Block Phase II under DDEG and Local Revenue (SHMC/796/WRKS/2017-2018/0004). Contract Amount: 82, 840, 400 UGX. Verified Procurement Method: Open Domestic Bidding. Date of Advertisement: 04/September/2017, New Vision Newspaper. - Construction of Market Stalls Structure at KAGANGO Market Phase I under DDEG (SHMC/796/WRKS/2017-2018/0010). Contract Amount: 16,363,349 UGX. Verified Procurement Method: Selective Bidding. Letter of Invitation to Bid Dated 22/January/2018, and Signed by Procurement Officer. - Construction of 3 Stance Pit Latrine with Urinal at KIHUNDA P/S and 4 Stance VIP Latrine with Urinal at SHEEMA Municipal Council Headquarters at Nyakashambya under DDEG (SHMC/796/WRKS/2017-2018/0003). Contract Amount: 27,126,500 UGX. Verified Procurement Method: Selective Bidding. Letter of Invitation to Bid Dated 28/September/2017, Signed and Stamped by Procurement Officer. 	<p>2</p>
<p>The LG has</p>	<ul style="list-style-type: none"> • Evidence that all 	<p>There WAS Evidence that all works projects implemented in</p>	<p>2</p>

<p>certified and provided detailed project information on all investments</p>	<p>works projects implemented in the previous FY were appropriately certified – interim and completion certificates</p>	<p>the previous FY (2017/2018 FY) were appropriately certified – interim and completion certificates for all projects based on technical supervision as exemplified by the following projects:</p>
<p>Maximum 4 points on this performance measure</p>	<p>for all projects based on technical supervision: score 2</p>	<ul style="list-style-type: none"> - Completion of a 2 Classroom Block at MITOJO P/S and KABWOHE MIXED P/S and Staff House at ISEKYE P/S under SFG (SHMC/796/WRKS/2017-2018/0008). Interim Certificate No. 2 Dated 18/December/2017, Signed by Engineering Assistant (MoES), Project Supervisor, Municipal Engineer, Town Clerk. - Supply and Installation of Culverts under URF (SHMC/796/WRKS/2017-2018/0006). Interim Certificate No. 007 Dated 20/December/2017, Prepared by Municipal Engineer, Approved by Town Clerk on 22/December/2017. - Supply and Installation of Culverts under URF (SHMC/796/WRKS/2017-2018/0006). Interim Certificate No. 002 Dated 16/January/2018, Prepared by Municipal Engineer, Approved by Town Clerk on 25/January/2018. - Construction of Flush Toilet at KAGANGO BOUNDARY and 3 Stance Pit-Latrine at KIZIBA P/S under DDEG and SFG (SHMC/796/WRKS/2017-2018/0001). Interim Certificate No. 002 Dated 22/February/2018, Prepared by Municipal Engineer, Approved by Accounting Officer (Senior Assistant Town Clerk) for Kabwohe Division. - Construction of Flush Toilet at KAGANGO BOUNDARY and 3 Stance Pit-Latrine at KIZIBA P/S under DDEG and SFG (SHMC/796/WRKS/2017-2018/0001). Interim Certificate No. 0002 Dated 16/March/2018, Signed by Municipal Engineer, Environmental Officer, Accounting Officer (Town Clerk). - Completion, Plumbing and Extension of Electricity and Piped Water at KABWOHE Division Offices under Local Revenue (SHMC/796/WRKS/2017-2018/0002). Interim Certificate No. 001 Dated 20/February/2018, Signed by Municipal Engineer, Senior Assistant Town Clerk. - Completion of SHEEMA Municipal Council Administration Block Phase II under DDEG and Local Revenue (SHMC/796/WRKS/2017-2018/0004). Interim Certificate No. 001 Dated 23/November/2017, Signed by Municipal Engineer, Environmental Focal Person, Town Clerk. - Completion of SHEEMA Municipal Council Administration Block Phase II under DDEG and Local Revenue (SHMC/796/WRKS/2017-2018/0004). Interim Certificate No. 002 Dated 20/December/2017, Signed by Municipal Engineer, Environmental Officer, Town Clerk. - Completion of SHEEMA Municipal Council Administration Block Phase II under DDEG and Local Revenue (SHMC/796/WRKS/2017-2018/0004). Certificate No. 04/17-18/CAB Dated 20/February/2018, Signed by Municipal Engineer, Signed by Town Clerk on 06/March/2018. - Construction of Market Stalls Structure at KAGANGO Market

		<p>Phase I under DDEG (SHMC/796/WRKS/2017-2018/0010). Final Certificate Dated 25/May/2018, Signed by Assistant Engineering Officer, Municipal Engineer, Accounting Officer (Senior Assistant Town Clerk) Kagango Division.</p> <p>- Construction of 3 Stance Pit Latrine with Urinal at KIHUNDA P/S and 4 Stance VIP Latrine with Urinal at SHEEMA Municipal Council Headquarters at Nyakashambya under DDEG (SHMC/796/WRKS/2017-2018/0003). Certificate No. 001 Dated 15/January/2018, Signed by Municipal Engineer, Senior Assistant Town Clerk.</p> <p>- Construction of 3 Stance Pit Latrine with Urinal at KIHUNDA P/S and 4 Stance VIP Latrine with Urinal at SHEEMA Municipal Council Headquarters at Nyakashambya under DDEG (SHMC/796/WRKS/2017-2018/0003). Certificate No. 001 Dated 06/March/2018, Signed on 09/March/2018 by Municipal Engineer, Environment Focal Person and Accounting Officer.</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 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>There was NO Evidence that ALL works projects for the current FY (2018/2019 FY) were clearly labeled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration as only ONE Works Project for the current FY (2018/2019 FY) had commenced construction by the time the Assessor visited the LG. The SINGLE Works Project for the current FY (2018/2019 FY) that had commenced construction by the time the Assessor visited the LG and that was clearly labeled with a site board is indicated below:</p> <p>- Completion of Administration Block Phase III at SHEEMA Municipal Council Headquarters under DDEG (SHMC/796/WRKS/2018-2019/00001).</p>	0
Financial management			
<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4 	<p>Sheema MC runs 15 bank accounts. As on date of this assessment on 20thSeptember 2018, all the bank accounts were up-to-date reconciled for the whole year ended FY 2017/18, up to 31stAugust 2018.</p>	4

<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • 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>Sheema MC payments reviewed show that the MC pays its suppliers within the mandatory 2 months limit. Examples include:</p> <p>Payment of Shs846,940 to Sun Beach Resort for supply of meals. Invoicing 01/02/18 and payment 14/02/18 (13 days).</p> <p>Payment of Shs1,489,900 to Agaba Printers and Stationers Ltd for supply of printed stationery. Invoicing 08/02/18 and payment 19/02/18 (11 days).</p> <p>Payment of Shs2,497,731 to Sun Beach Resort for supply of meals for Budget Conference. Invoicing 19/12/17 and payment 20/12/17 (1 day)</p> <p>Payment of Shs535,000 to Total (U) Ltd for supply of fuel. Invoicing 12/12/17 and payment 18/12/17 (6 days).</p> <p>Payment of Shs126,900 to Ba-Kakongi Centre Ltd for supply of printed assets registers. Invoicing 13/08/17 and payment 20/10/17 (2 months7 days). Note: The payment took a little longer because the vendor first printed without conforming to the format required by the Accounting manual.</p> <p>Payment of Shs500,000 to Total (U) Ltd for supply of fuel. Invoicing 20/11/17 and payment 21/11/17 (1 day).</p> <p>Payment of Shs800,000 to Shell (U) Ltd for supply of fuel. Invoicing 02/08/17 and payment 04/08/17 (2 days).</p> <p>Payment of Shs2,650,800 to Jemu Consult (U) Ltd for printing magazine for CAO's achievements for FY 2016/17. Invoicing 08/07/17 and payment 13/07/17 (5 days).</p> <p>Payment of Shs1,767,200 to Kyalimanya Resort Hotel Ltd for workshop refreshments. Invoicing 04/07/17 and payment 05/07/17 (1 day).</p> <p>Payment of Shs4,230,000 to Agaba Printers and Stationers Ltd for supply of laptops for the Education department. Invoicing 13/06/18 and payment 29/06/18 (16 days).</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. 	<ul style="list-style-type: none"> • Sheema MC has a substantively appointed Senior Internal Auditor in the names of Kemeeri Jenifer, per his appointment letter Ref. SMC/CR/161/1, dated 09/05/17, written by the Town Clerk (Based on DSC Minute No. 55/DSC/2017(i)). 	<p>1</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. 	<ul style="list-style-type: none"> • The LG produced all the internal audit reports for the 4 quarters of FY 2017/18. Quarter 1 report is dated 30/10/17, quarter 2 dated 30/01/18, quarter 3 dated 30/04/18 and quarter 4 dated 30/07/18. 	<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</p> <p>internal audit findings for the previous financial year i.e. follow up on audit queries from all quarterly audit reports: score 2.</p>	<p>Sheema MC internal audit reports contain a table tracking follow-up of action on previous internal audit recommendations.</p> <p>Internal audit reports were submitted to the Town Clerk, Mayor, LGPAC, AG Office Mbarara, Finance Secretary, MoFPED IAG Office, RDC and Principal Finance Officer. The reports were submitted on the following dates: Quarter 1 report on 30/10/17, quarter 2 on 30/01/18, quarter 3 on 30/04/18 and quarter 4 on 30/07/18.</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>	<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>Acknowledgment stamps show that internal audit reports were submitted to the Town Clerk, Mayor, LGPAC, Auditor General Office Mbarara, Finance Secretary, MoFPED IAG Office, RDC and Principal Finance Officer. The reports were submitted on the following dates: Quarter 1 report on 30/10/17, quarter 2 on 30/01/18, quarter 3 on 30/04/18 and quarter 4 on 30/07/18.</p> <p>For much of FY 2017/18, the LGPAC was not constituted and so did not discuss or follow-up on the reports. The reports were therefore not forwarded to Council.</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>The district has an assets register that is formatted as required by the accounting manual. The register is in manual (book) form and contains information on motor vehicles, land, buildings, furniture and equipment.</p> <p>Most government donated assets are lacking values and some land and buildings have not been valued or titled. But overall, effort has been made to have an updated register.</p> <p>As of the date of this assessment on 21stSeptember, the register had been updated to reflect the most recent acquisitions and disposals and depreciation.</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 MC had an unqualified audit opinion for its FY 2017/18 financial statements</p>	<p>4</p>
<p>Governance, oversight, transparency and accountability</p>			

<p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • 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>There was evidence that the LG Council met 4 times and discussed service delivery related issues as referenced in the:</p> <ul style="list-style-type: none"> - Report of the chairperson Education and health committee to the speaker dated 29/3/2018 and discussed by the council on 29/3/2018 under Min 14/COU/SMC/2018 - Committee report to council dated 30th/5/2018 and discussed by council under Min 21/COU/SMC/2018 - Committee report to council dated 25th/1/2018 and discussed by council on 25/1/2018 under Min 07/SMC/2018 - There was evidence that MEC submitted a monitoring report to council on Land belonging to council under min 14/COU/2017 DATED 26/10/2017 - There was evidence that the council was informed of the results of the LG PA on the 24/8/2018 during the first council sitting and swearing in ceremony however the implications of the assessment were not discussed. - The LG PAC reports had not been discussed at the time of assessment. However PAC minutes were received by the Municipal security registry and stamp dated 18/9/2018 instead of a report. 	<p>0</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>There was Evidence that Ms Ngabirano Shallon the HRO was assigned duties on the 22/8/2016 by the Town Clerk to manage Complaints/ grievances under ref SMC/CR/153/1. At the time of assessment several complaints had been received and some responded to.</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>There was evidence the LG had had specified systems in place. And, that a complaints box had been placed at main Administration office. There was evidence of a notice display directing the public to who complaint and grievance should be directed.</p> <p>There was evidence that complaints were being addressed as referenced by report to the Town Clerk dated 30/1/2018 on the situation of squatters in the LG, Reports to Town Clerk dated 17/9/2018 and 31/3/2018 on feedback to complaints.</p> <p>The LG had also used talk shows to give feed back to the community on achievements and implementation of activities on TV West Mbarara as per report dated 17/7/2017 ref SMC/CR/213/4.</p>	<p>1</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<p>Evidence that the LG has published:</p> <ul style="list-style-type: none"> • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2 	<p>There was evidence of display of Salaries and pensioner payroll at the notice board for the months of June, July and august 2018 with 822 staff and 24 pensioners in august.</p>	<p>2</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> • Evidence that the procurement plan and awarded contracts and amounts are published: score 1. 	<p>There was evidence of Displays of best evaluated bidders notice dated 25/6/2018 and removed on 4/7/2018, display on 25/10/2017 and removed on 8/11/2017 at the general notice board;</p> <p>The procurement plan had also been displayed.</p>	<p>1</p>

<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> • 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 performance assessment results and implications were displayed on the notice board and its implications communicated.</p>	<p>0</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 the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1 	<p>There was evidence of communication DDEG guidelines to LLGs in TPC dated 4/8/2017 under min 36/TPC/SMC/2017 and guidelines on gender mainstreaming under the same minutes</p> <p>Circulars on dressing code had been communicated under Min 39/TPC/SMC/2017 OF 22/8/2017</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>There was evidence that barazas had been held to provide a feed back on implementation as referenced;</p> <ul style="list-style-type: none"> - Baraza report dated 4/7/ 2018 for a baraza held on 29/6/2018 - Baraza reports addressed to the Town Clerk dated 26/6/2018, 25/6/2018, 28/6/2018 and 6/7/2018. 	<p>1</p>
<p>Social and environmental safeguards</p>			

The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles

Maximum 4 points on this performance measure.

• Evidence that the LG gender focal person and CDO have provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities score 2.

There WAS Evidence that the LG gender focal person provided guidance and support to sector departments to mainstream gender into their activities as exemplified by the following:

- The Assessor saw Sheema Municipal Council Presentation to Technical Planning Committee Sitting on 04/August/2017 on Guidelines for Addressing Gender and Equity Issues in the Budget Process, Signed by Acting PCDO/Gender Focal Person.

- The Assessor saw Sheema Municipal Council Communication to all Sector Heads and Budget Desk Members Dated 02/August/2017 on Inclusion of Gender Issues in Work Plans, Budgets and other day-to-day Sector Business, Signed by Acting PCDO.

- The Assessor saw Sheema Municipal Council Delivery Sheet for Circulars on Inclusion of Gender Issues in Work Plans, Budgets and other day-to-day Sector Business Dated 02/August/2017 and Signed by Recipient Sector and Sub Sector Heads namely: Principal Commercial Officer, Municipal Physical Planner, Statistician, Municipal Education Officer, Assistant Engineering Officer, Health Inspector, Community Development Officer, Procurement Officer, and Senior Assistant Town Clerk – Kabwohe Division.

- The Assessor saw Sheema Municipal Council Distribution List of Items from Community Based Services Department to Divisions Signed by Recipient Divisional Level Community Development Officers.

- The Assessor saw Sheema Municipal Council Presentation on Gender Issues, Gender Mainstreaming, and Government Programmes at a Baraza Function that was held on 29/June/2018, Signed by CDO.

- The Assessor saw Sheema Municipal Council Annual Report for the Follow up of Gender and Gender Mainstreaming Issues under Community Based Services Sector for FY 2017/2018 Dated 28/June/2018, Signed by Acting PCDO.

- The Assessor saw Sheema Municipal Council Community Based Services Department Work Plan for FY 2017/2018 within the LG Approved Integrated Annual Work Plan for FY 2017/2018 that contained activities intended to provide guidance and support to sector departments to mainstream gender into their activities (Section 09, Pages 98 – 107).

<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>- There WAS Evidence that gender focal point had planned activities for current FY (2018/2019 FY) to strengthen women's roles. The Assessor saw Sheema Municipal Council Annual Work Plan for FY 2018/2019 that contained Section 09: CBS Work Plan for FY 2018/2019 on Pages 135 – 155 with the following planned outputs and activities: Output: Gender and Culture Promoted, Activity: Train Heads of Departments and CDOs in Gender Mainstreaming (Page 144 of LG Work Plan), also indicated in Sheema Municipal Council Budget Estimates for FY 2018/2019, Page 21 of LG Budget Estimates, Gender Mainstreaming (500,000 UGX – Social Development Fund); Output: PWDs Sensitized on Group Dynamics, Activity: PWDs Trained on Group Dynamics (Page 141 of LG Work Plan), also indicated in Sheema Municipal Council Budget Estimates for FY 2018/2019, Page 21 of LG Budget Estimates, PWDs Training (600,000 UGX – Social Development Fund). The Assessor saw Sheema Municipal Council Submission of Uganda Women Entrepreneurship Program (UWEP) Work Plan for FY 2018/2019 with a Budget of 109,840,662 UGX Dated 16/August/2018 and Received by MoGLSD on 07/September/2018. The Assessor saw Sheema Municipal Council Submission of Youth Livelihoods Program (YLP) Work Plan for FY 2018/2019 with a Budget of 156,245,794 UGX Dated 27/August/2018.</p> <p>- There WAS Evidence that more than 90% of previous year's budget for gender activities was implemented since Allocations that were made for Gender Activities for FY 2017/2018 were utilized at 97.4% Level according to computation based on validated Expenditure Vouchers that were retrieved from the Accounts Department by the Gender Focal Point Person.</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 screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 1 	<p>There WAS Evidence that environmental screening or EIA where appropriate, was carried out for activities, projects and plans as exemplified by the following:</p> <ul style="list-style-type: none"> - The Assessor saw Sheema Municipal Council Environmental Audit Report for Construction of 3 Stance VIP Latrine at KIZIBA P/S Dated 13/April/2018 and Signed by Environmental Focal Person. - The Assessor saw Sheema Municipal Council Environmental Audit Report for Mechanized Maintenance of Roads in all 4 Divisions Dated 14/June/2018 and Signed by Environmental Focal Person. - The Assessor saw Sheema Municipal Council Environmental Audit Report for Construction of KAGANGO Shelter Slab Dated 15/May/2018 and Signed by Environmental Focal Person. 	<p>1</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>There WAS Evidence that the LG integrated environmental and social management plans in the contract bid documents as exemplified by the following:</p> <ul style="list-style-type: none"> - Construction of Flush Toilet at KAGANGO BOUNDARY and 3 Stance Pit-Latrine at KIZIBA P/S under DDEG and SFG (SHMC/796/WRKS/2017-2018/0001). Environmental Mitigation Measures Budget 50,000 UGX was found in Bill of Quantities Dated 11/August/2017; Environmental Mitigation Measures Budget 30,000 UGX was found in Bill of Quantities Dated 18/December/2017. - Construction of 3 Stance Pit Latrine with Urinal at KIHUNDA P/S and 4 Stance VIP Latrine with Urinal at SHEEMA Municipal Council Headquarters at Nyakashambya under DDEG (SHMC/796/WRKS/2017-2018/0003). Environmental Mitigation Measures Budget 90,000 UGX was found in Bill of Quantities Dated 14/October/2017; Environmental Mitigation Measures Budget 100,000 UGX was found in Bill of Quantities Dated 09/March/2018. - Completion of a 2 Classroom Block at NYAKASHAMBYA P/S under SFG (SHMC/796/WRKS/2018-2019/00005). Environmental Mitigation Measures Budget 70,000 UGX was found in Bill of Quantities Dated 14/August/2018. - Completion of a 2 Classroom Block at RWEIGAAGA P/S in Kashozi Division under SFG (SHMC/796/WRKS/2018-2019/00004). Environmental Mitigation Measures Budget 221,283 UGX was found in Bill of Quantities Dated 28/May/2018. - Completion of Staff House at ISEKYE P/S under SFG (SHMC/796/WRKS/2018-2019/00006). Environmental Mitigation Measures Budget 100,000 UGX was found in Bill of Quantities Dated 14/August/2018. 	
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LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition

Maximum 6 points on this performance measure

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

There WAS Evidence that all projects were implemented on land where the LG had proof of ownership by way of a land title or agreement with land owners as exemplified by the following:

- The Assessor saw Sheema Municipal Council Headquarters Land Title with the following details: LW (SHEE) 300, Certificate of Title, Freehold Register, Volume MBR 325, Folio 19, Block (Road) 5, Plot 418 and 419 at Nyakashambya.

- The Assessor saw Sheema Municipal Council Kabwohe Division Headquarters Land Title with the following details: District Ankole; County Sheema; Block 2; Plot 328; Office of Titles Mbarara; Certificate of Title; Uganda Land Register; Land at Kigimbi, Nyakashambya, Kagango, Sheema; Area 0.82 Ha; Instrument No MBR 17934.

- The Assessor saw Sheema Municipal Council Kitojo Health III Land Title with the following details: LW (SHE) 500, Certificate of Title, Freehold Register, Volume MBR 463, Folio 7, Block (Road) 16, Plot 30 and 31 at Rushoroza – Katojo Ward.

- The Assessor saw Sheema Municipal Council Playground at Town Center Land Title with the following details: LW (SHE) 339, Certificate of Title, Freehold Register, Volume MBR 368, Folio 11, Block (Road) 5, Plot 570 at Rutooma, 2.1720 Ha.

- The Assessor saw Sheema Municipal Council Seed Secondary School Land Title with the following details: LW (SHE) 353, Certificate of Title, Freehold Register, Volume MBR 368, Folio 10, Block (Road) 4, Plot 140 at Ngoma – Kiziba Area, 1.3290 Ha.

- The Assessor saw Sheema Municipal Council Central Division Headquarters Land Title with the following details: MBR 108, Folio 4, Block (Road) 5, Plot 353 at Kibingo – Nyakashambya, 1.1620 Ha.

- The Assessor saw Sheema Municipal Council Kabwohe Health Center IV Land Title with the following details: MBR 508, Folio 11, Block (Road) 5, Plot 629 at Rutooma Cell.

<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>There was NO Evidence that all completed projects had Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer.</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>There was NO Evidence that Contract Payment Certificates included prior environmental and social clearance.</p>	<p>0</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • 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 Environmental Officer and CDO Monthly Report included a) completed checklists b) deviations observed with pictures c) corrective actions taken.</p>	<p>0</p>
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Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>The LG education 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>The LG budgeted for a Head teacher and a minimum of 7 teachers for FY 2018/19 to the tune of 3,406,478,776/= for the 444 teachers in 48 public schools as per Performance contract SMC/CR/213/1 dated 13/08/2018.</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 LG has deployed a Head teacher and a minimum of 7 teachers per school for the current FY as per list of schools and staff lists. In visited schools, at Rweigaaga P.S there was 1 Head teacher and 7 teachers for the 255 pupils (Abel Mweigye and Wilson Mutungi have recently retired early (vide ADM 162/321/01 Vol:13 dated 12/6/2018) and replacements sought as per letter dated 25/6/2018.). In Nyakashambya P.S, there was a Head teacher and 7 teachers for the 321 pupils. Kyabandara P.S had a Head teacher and 9 teachers for the 297 pupils while Rwabutura P.S had a Head teacher and 9 teachers for the 629 pupils.</p>	4

<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> • 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>The LG has filled the structure for primary teachers with a wage provision by 433 teachers out of the 444 teachers representing 97% of the structure</p>	<p>3</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>The LG has substantively filled the position of school inspectors as per staff structure of 1. The Inspector is Mwebembezi Johnie Kishate</p>	<p>6</p>
<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> • Primary Teachers: score 2 	<p>The LG has submitted a recruitment plan to HRM for the current FY to fill positions of the following; 9 Head teachers, and 9 Deputy Head teachers as per letter SMC/CR/305/1 dated 20/5/2018.</p>	<p>2</p>

<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> • School Inspectors: score 2 	<p>There was no need to submit a recruitment plan for inspectors since the structure had already been filled.</p>	<p>2</p>
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Monitoring and Inspection

<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> • 100% school inspectors: score 3 	<ul style="list-style-type: none"> • The MC has one inspector of schools, and was appraised on 2/08/2018 FILE REF. SMC/CR/3005 	<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"> • The primary school head teachers were appraised. The municipality has 46 primary schools and a sample of 20 head teachers were taken and were all appraised. <p>Some include</p> <ul style="list-style-type: none"> • SMC/CR/083 ON 5/7/2018 • SMC/CR/305 ON 24/2/2018 • SMC/CR/360 ON 19/2/2018 • SMC/CR/309 ON 22/2/2018 • SMC/CR/106 ON 22/2/2018 • SMC/CR/150 ON 17/2/2018 • SMC/CR/239 ON 0/2/2018 • SMC/CR/1310 ON 2/2/2018 	<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>The LG has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools. The Performing Arts (MDD) circular was communicated on 17/4/2018. School calendar for 2018 was circulated via letter SMC/CR/222/1 dated 8/2/2018. 41 Head teachers had signed for these circulars as well as the guideline on Stop Malaria campaign in the despatch book kept by the MEO.</p>	<p>1</p>

<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • 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>The LG held a meeting for Head teachers on 13/9/2017 under Min 03/Headteachers/2018 and among others explained and sensitized teachers on the guidelines, policies, circulars issued by the national level. 41 Head teachers were in attendance.</p>	<p>2</p>
<p>The LG Education Department has effectively inspected all registered primary schools</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> 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>Not all private and public schools have been visited at least once per term and reports produced. 217 inspections were made in previous FY for the 89 schools which required 267 inspections. This represents 81% of the required inspections. In visited schools Rweigaaga was inspected on 3/10/2017, 2/2/2018, and 1/8/2018.. Kyabandara was inspected on 17/7/2017, 3/11/2017, 6/4/2018, and 27/6/2018. Nyakashambya was inspected on 3/10/2017, 13/3/2018, and 21/6/2018.. Rwabutura had been inspected on 27/8/2017, 3/5/2018, 18/8/2018, 19/9/2017, and 11/10/2017. No reports were available for the last two inspections although the inspectors had signed the visitors' book.</p>	<p>8</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 Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4 	<p>There is evidence that the Education Department had discussed school inspection reports and used reports to make recommendations for corrective action as reflected in Departmental meetings held on 23/8/2018 Min 06/EDUC/2018.and 17/7/2017 Min 07/EDUC/2017 where errant teachers and summoning of Head teachers for mentorship and training were discussed.</p>	<p>4</p>
<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • 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>Acknowledgement letters from DES were available at the Department as evidence of submission of inspection reports to DES and they were dated 17/7/2018 for Q3, 4/9/2017 for Q1, and 10/1/2018 for Q2</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>There is evidence that Inspection recommendations are followed up from Head teachers met at visited schools as follows;</p> <p>Rweigaaga P.S – School gardens improvement, display of charts in classrooms, daily attendance register adherence, and scheming.</p> <p>Kyabandara P.S – Labelling of toilets, creation of a hand-washing facility, and sensitisation of parents on their roles and responsibilities.</p> <p>Nyakashambya P.S –Purchase of portraits for Foundation body (Bishop), sensitisation of parents to support the learning process, and ensuring a functional rewards and sanctions committee.</p> <p>Rwabutura P.S – Improving schemes of work, vegetable growing, improving feeding of children, and daily lesson planning</p>	<p>4</p>
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • 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 LG has not submitted accurate / consistent data pertaining to list of schools in the district. The LG has 89 schools (48 public and 41 private) while EMIS data indicates a total of 63 schools. This discrepancy is a result of MoES using 2017 data as per 3/5/2017 letter by the MEO which did not include private schools</p>	<p>0</p>

<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<p>Evidence that the LG has submitted accurate/consistent data:</p> <ul style="list-style-type: none"> • Enrolment data for all schools which is consistent with EMIS report and PBS: score 5 	<p>The LG had not submitted accurate/consistent enrolment data. The LG has a total of 16,094 pupils while EMIS data indicates a total of 15,969</p>	<p>0</p>
<p>Governance, oversight, transparency and accountability</p>			
<p>The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • 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 MEO presented to the Education sector committee her report on 14/9/2017 under Min 14/EH/2017 and discussed issues pertaining to approved curricula being implemented, learners assessment, as well as challenges of transport and staff quarters. On 17/5/2018 the MEO under Min 9/EH/2018 presented report that covered received UPE funds, school inspections, and completed projects.</p>	<p>2</p>
<p>The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the education sector committee has presented issues that require approval to Council: score 2 	<p>There is evidence that in the Education sector committee meeting of 17/5/2018 under Min 11/EH/2018, the Department sought approval of the following:-</p> <p>Completion of staff house at Ishekye Unit for the handicapped, and the construction of 2 classroom blocks at each of the following schools; Ngomanungi, Nyakashambya, and Rweigaaga..</p> <p>The Departments Work Plan and budget were approved on 17/5/2018 under Min 11/EH/2018.</p>	<p>2</p>

<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO/ MEO)</p> <ul style="list-style-type: none"> • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80 % schools: score 0 	<p>There was evidence of functional SMCs and the following 5 schools on file had held SMC meetings and submitted their SMC minutes to the MEO's office as indicated below;</p> <p>Kamugungu P.S had submitted minutes of meeting held on 30/5/2018</p> <p>Rweigaaga P.S had submitted minutes of meeting held 2/3/2018</p> <p>Rwamujojo P.S had submitted minutes of meeting held on 16/3/2018</p> <p>Kyabandara P.S had submitted minutes of meeting held on 20/10/2017</p> <p>Kibingo had submitted minutes of meeting held on 6/8/2018.</p> <p>In visited schools, SMC meetings had been held as follows:-</p> <p>Rweigaaga P.S had held meetings on 6/8/2018, 13/7/2018, 27/4/2018, and 5/12/2017.</p> <p>In Kyabandara P.S the meetings were held on 28/8/2018, 22/6/2018, and 11/9/2017. No meeting was held for Term 1.</p> <p>Nyakashambya P.S had held meetings 6/9/2018, 21/6/2018, and 20/4/2018</p> <p>Rwabutura P.S held SMC meetings on 3/8/2018, 19/4/2018, 26/9/2017.</p>
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<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>The LG has publicised all schools receiving non-wage recurrent grants through posting on the main LG notice board.</p> <p>In visited schools, Rweigaaga P.S had the non-wage recurrent grants for Term 1 2018 of 900,000/= displayed in the general office as well in the Head teachers office. In Kyabandara P.S the non-wage recurrent grants were displayed in the Head teachers office and outside the Deputy Head teachers office. 1,118,318/= had been received or Term 2. In Nyakashambya P.S the non-wage recurrent grants were displayed in the Head teacher’s office and on an external notice board. 818,104/= had been received for Term 2. In Rwabutura, the non-wage recurrent grant was displayed at the general office. 1,320,000/= had been received for Q2.</p>	<p>3</p>
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Procurement and contract management

<p>The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements,</p> <p>to the Procurement Unit that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> 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 sector had submitted procurement input to Procurement Unit covering all investment items in the approved Sector annual work plan and budget on 28/3/2017 including 2 Classroom blocks at Kabwohe Mixed and Mutojo Integrated, as well as Ishekye staff house.</p>	<p>4</p>
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Financial management and reporting

<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3. 	<p>Sheema MC FY 2017/18 Education Department payments reviewed show that the district endeavoured to timely certify and recommend suppliers for payment. Examples of payments reviewed include:</p> <p>Payment of Shs 2,525,723 to Samoca Agencies Ltd for completion of a classroom block at Mutojo Integrated P/S. Requisition 28/06/18, certification 26/06/18 and payment on 29/06/18 (1 day).</p> <p>Payment of Shs 1,587,624 to Mutura Works Enterprises for construction of a VIP latrine at Kiziba P/S. Requisition 20/03/18, certification 11/04/18 and payment on 21/04/18 (10 days).</p> <p>Payment of Shs 1,186,120 retention to Rhino Investment Ltd for completion of a two classroom block at Migina P/S. Requisition 28/02/18, certification 02/03/18 and payment on 05/03/18 (7 days).</p> <p>Payment of Shs1,602,664 to Vijocoi (U) Ltd for completion of a two classroom block at Kibingo P/S. Requisition 21/02/18, certification 10/01/18 and payment on 10/03/18 (19 days).</p> <p>Payment of Shs1,218,912 retention to Kamoja Enterprises for construction of a staff house at Ishekye P/S. Requisition 04/01/18, certification 10/01/18 and payment on 19/02/18 (1 month 9 days).</p> <p>Payment of Shs22,186,699 to Semoca Agencies Ltd for completion of a 2 classroom block at KabwoheMoslem P/S. Requisition 11/12/17, certification 18/11/17 and payment on 19/12/17 (8 days).</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>The annual performance report for the previous FY was submitted to the Planner for consolidation on 9/7/2018.</p>	<p>4</p>

<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • 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>Sheema MC Education department had internal audit queries in FY 2017/18. Though effort was made to respond the queries, there were some which remained by the close of the year.</p> <p>For example Quarter 2 reported on lack of a PTA cashbook, partial lesson notes by some teachers and irregular teacher attendance at Kyabandara P/S.</p> <p>The same quarter reported on Karera Seed School lacking an audit report, failing to submit URA monthly returns and having a query on Shs 24,436,528 unaccounted for funds.</p> <p>Other schools with audit queries were Kibingo Girls Secondary School and Nganwa High School.</p>	<p>0</p>
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Social and environmental safeguards

<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> • 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>The LG Education department had disseminated guidelines on gender in a meeting for Head teachers held on 13/6/2018. A report to that effect was submitted to the Town Clerk on 15/6/2018. 44 Head teachers attended the meeting.</p>	<p>2</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>The LG Education department in collaboration with gender department have issued and explained guidelines on sanitation in a meeting for Head teachers held on 13/6/2018. A report to that effect was submitted to the Town Clerk on 15/6/2018. 44 Head teachers attended the meeting.</p>	<p>2</p>
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the School Management Committee meets the guideline on gender composition: score 1 	<p>The SMCs meet the guideline on gender composition. In visited schools the following females were on the SMCs representing the Foundation body as follows:-</p> <p>Rweigaaga P.S – Monic Ebyarimpa, and Annet Muganzi</p> <p>Kyabandara P.S – Juliet Nagaba, and Esther Naturinda</p> <p>Nyakashambya P.S – Abbey Nuwamanya, Scovia Ndamanyire, and Jeninah Muhereza</p> <p>Rwabutura P.S – Privah Natumanya, and Miria Muhanguzi</p> <p>In visited schools, Rweigaaga there is tree planting. At Kyabandara, there is an environment club, and tree planting has been undertaken. In Nyakashambya, there is tree planting, a banana plantation, an environment club, and waste disposal, while at Rwabutura there is also tree planting, a banana plantation, an environment club, and waste disposal.</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>The LG Education department in collaboration with Environment department has issued guidelines on environment management in Head teachers meeting held on 13/6/2018. 44 Head teachers attended the meeting.</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 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>School infrastructure projects have been screened before approval for construction as per SMC/CR/210 for:-</p> <p>VIP latrine at Kiziba on 10/04/2017 and Kihunda on 10/04/2017</p> <p>2 classroom blocks at Mutojo Integrated, Kabwohe Mixed on 10/4/2017</p> <p>Ishekye staff house 10/4/2017</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"> • The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 1 	<p>The Environment Officer and Community Development Officer have visited the sites to check whether mitigation plans are complied with as reflected in Monitoring report of 13/12/2017 for visit conducted on 12/12/2017 for Kabwohe Mixed, Mutojo, and Ishekye.</p>	<p>1</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>LG has substantively recruited primary health care workers with a wage bill provision from PHC wage</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY</p> <ul style="list-style-type: none"> • More than 80% filled: score 8 • 60 – 80% - score 4 • Less than 60% filled: score 0 	<ul style="list-style-type: none"> • The LG had filled positions 69 out of the 76 staff (91%) provided for in the PHC Wage Bill for 2018/2019. • Examined are the following Sources of information; Health department staff establishment list report as at the 21st August 2018, the approved structure from Ministry of Public Service (MOPS) and the revised wage bill estimates circular (Ref. HRM 155/222/02, Annex 1B page 4 of 4) from PSST/MOFPED (authored by Kenneth Mugambe) dated 20th March 2018 amounting to UGX.1, 014,626,020 provided for the 69 staff positions filled and any additional. 	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"> •The department submitted a comprehensive Recruitment Plan to CAO submitted on the 22nd June 2018 ref SMC/EH/161/1 for 7 positions (1 MHO, 2 Enrolled Nurses, 1 Porter & 1 Askaris) with a wage UGX.81,963, 552 authored by Dr. Devis Asimwe the Acting MHO. • This was the 2018/2019 recruitment plan that could be taken care of by the wage provisioning of 2018/2019. • The other vacant positions would be provided for in the other two years recruitment plan included in the medium term recruitment plan. 	6

The LG Health department has conducted performance appraisal for Health Centre IVs and Hospital In-charge and ensured performance appraisals for HC III and II in-charges are conducted

Maximum 8 points for this performance measure

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

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

• The MC has nine health facilities and the health facilities in charges were appraised.

- DR.DAVIS ASSIMWE , KABWOHE HC IV
- DAVID ATWINE, KANEKYE COMMUNITY MEDICAL CENTRE HC II
- KIKUMU JULIET, KARERA HCII
- DR. ALEX RUBAREMWA KC&C
- KYOMPAIRE FRANCESCA KIHUNDA HCII
- TUMUHAME WINNIE, KYABANDARA HCII,
- NABIRYE REBECCA RUSHOZI HCII
- BIRUNGI DANIEL RWAMUJONJO HCII,
- AYEBAZIBWE NICHOLAS KIZIBA HCII,
- MUSIMENTA DOREEN MIGINA HC II
- SR MONICA MISHANGA HC III
- All were appraised on 5/7/2018

<p>The Local Government Health department has deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> The department deployed staff as per the list submitted and this was consistent with the staff found at the health units visited. Evidenced from the staff posting list as of 31st August 2018 and verification of the staffing at the health facilities of: <ul style="list-style-type: none"> KABWOHE HCIV, KIHUNDA HCIII, KARERA HCII, KYABANDARA HCII & MUSHANGA HCIII visited on the 21st September 2018. The posting were as follows: <p>KABWOHE HCIV 42</p> <p>KIHUNDA HCIII 10</p> <p>KARERA HCII 1</p> <p>KYABANDARA HCII 3</p> <p>MUSHANGA HCIII 22</p> The posting list at the MHO's office corresponded to the staff at the Health Centres visited as per the daily monthly wage/attendance registers and duty Rosters and head counts for those present on duty. 	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 	<ul style="list-style-type: none"> The MHO never communicated and distributed any of the three guidelines from the MOH (The Ministry of Health Guidelines for Local Government Planning process-health sector supplement-2017; Ministry of Health, sector Grant and Budget Guidelines to Local Government FY 2018/19 & Ministry of Health, Policy Strategies for improving health Service Delivery 2016-2021) on allegations that they had not received two of them except the Sector Grant and Budget Guidelines for Local Government from the Ministry. This has been observed in the other LGs so far visited. No copy of these guidelines was found in all the five (5) health units visited. 	0

<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 	<ul style="list-style-type: none"> Evidence examined showed that the DHO held three meetings with in-charges on the 26/8/2017; 8/12/2017, 27/4/2018 & 29/6/2018 and among the issues discussed were: Quality Improvement Projects in place; Surge strategy, recognition of best performers, staff appraisals, & PHC funds utilisation and accountability. There was no evidence that the guidelines, policies & circulars were explained to the Health Unit In-Charges especially this particular three circulars & policies. (The Ministry of Health Guidelines for Local Government Planning process-health Sector Supplement-2017; Ministry of Health, sector Grant and Budget Guidelines to Local Government FY 2018/19 & Ministry of Health , Policy Strategies for improving health Service Delivery 2016/2021). However, the MHT circulated the following guidelines; Rift Valley Fever info on the 1/8/2018, Alert on EBOLA outbreak in the neighbouring DRC on the 6/8/2018, report on accountability of vaccines on the 27/7/2018, switching from TT vaccines to Tetanus Diphtheria 27/7/2018, clarifications on stock outs of Septrin 1/6/2018 & Surge initiative to increase enrolment for ARV medication on the 1/6/2018. 	<p>0</p>
<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT/MHT has supervised 100% of HC IVs and district hospitals (including PNFPs receiving PHC grant) at least once in a quarter: score 3</p>	<ul style="list-style-type: none"> The MHT supervised the only HCIV (KABWOHE HCIV). Evidence was the support supervision reports the MHT carried out support supervision of KABWOHE HCIV dated the 6/6/2018, 4/4/2018, 3/1/2018 & 5/10/2017 The supervision reports which include the HCIV supervised authored by Dr. ASIIMWE & AKANKWASA JOHNSON 	<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 	<ul style="list-style-type: none"> • The KABWOHE HCIV carried out support supervision of only KYABANDARA HCII done Dr. Byarugaba Emmanuel on the 4th May 2018. 	<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 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 	<ul style="list-style-type: none"> • The quarterly reports were discussed in the MHT meetings(14/7/2017 & 23/8/2017) and meetings with health In-charges (29/6/2018, 27/4/2018, 8/12/2017 & 26/8/2017) inform of way forwards and recommendations in the minutes of the meetings. 	<p>4</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 	<ul style="list-style-type: none"> The evidence was in the MHT meetings of the 14/7/2017 under minute 3/7/2017 where the DHI communicated the Health Care Management Policy developed & strengthening Support Supervision & 23/8/2017 under minute 9/8 2017 sanitation was to ne improved in Health Units & the In-Charges required to analyse data before sending to the DHO or the District Bio Statistician where the HMIS is manned from. 	6
<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 	<ul style="list-style-type: none"> The LG (health department) provided information regarding the list of Health facilities receiving PHC funding consistent with the MOH (health facilities reporting)/DIS2. A list of 9 Health Facilities (seven Government units (1HCIV, 6 HCIIIs) & 2 PNFP Health units (1 HCIII & 1 HCII) receiving PHC funding as per the list availed by the DHO’s office. The two PNFP HCIIIs are MUSHANGA HCIII & KIHUNDA HCII). 	10
<p>Governance, oversight, transparency and accountability</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 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 	<ul style="list-style-type: none"> The Committee on Social Services met four times in the financial year (14/9/2017; 21/12/2017; 22/3/2018 & 17/5/2018 and discussed matters on; sanitation lanes in the Municipality, drug inadequacy, lack of a centralised abattoir, progress reports, un surveyed land in health facilities, support supervision and particularly on the 4th quarter discussed the absence of the LGPAC as a challenge under minute 09/EH/2018 7(6). Though no discussion was made on the Performance assessment results, LGPAC reports were discussed. 	2

<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the health sector committee has presented issues that require approval to Council: score 2 	<ul style="list-style-type: none"> The Committee on Social Services after meetings presented reports to Council for approval. This was evidenced with submission reports dated the 17/5/2018(opening of sanitary lanes, upgrading of KABWOHE to HCIV, Health Assistant to appear before the committee), 22/3/2018(approval of KABWOHE HCIV HUMC members, recruitment of more Askaris, house to house visits), 21/12/2017 & 14/9/2017 by the same chairperson of the Committee of the district which was the interim/caretaker committee of the Municipality(TINDAMANYIRE TITUS TUSIIME) 	<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 	<ul style="list-style-type: none"> • All the health facilities visited (KABWOHE HCIV, KIHUNDA HCIII, KARERA HCII, KYABANDARA HCII, & MUSHANGA HCIII have HUMCs in place. • KARERA HCII HUMC met on the 12/7/2017 (drugs accountability & handover criteria); 4/11/2017(fencing of the unit, municipality to handle renovation & passing of the budget for the qtr amounting to UGX.450,000),13/10/2017 (challenges of the unit & information that of the budget for the FY, immunization takes 60% & transfer of the porter) , 29/3/2018(budget for qtr for PHC funding increased & VHT complaints of non payments of allowances; • KABWOHE HCIV HUMC met on the 22/12/2017, 23/8/2017, 12/6/2018 & 30/3/2018 discussed issues on need for more porters, need for transparency in accountability of Government funding, need for in-charge to ensure close supervision, mobilisation for immunisation, availability of lab services, supplementary budget request of 7M additional funding from Mariestopes. • KIHUNDA HCII HUMC met on the following dates; 26/9/2017 & 26/5/2018 and discussed (PHC fundings discussions, KYAGAGU outreaches, poor hygiene, financial reports,PHC accountabilities for 2nd & 3rd quarters). • KYABANDARA HCII HUMC met on the following dates; 29/9/2017(Disease outbreaks in the community & budgeting under minute 3/2017 and planning need to be communicated to members-minute 7/2017); 12/4/2018 under minute 8/2018 discussed state of finances involving 3rd quarter accountability, 4th quarter budget proposal and work plan. 	<p>6</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 	<ul style="list-style-type: none"> • The department did publicise the PHC funding to the 9 health units on the notice boards at the district headquarters examined, there was evidence that the lists of units receiving PHC funding were displayed. 	<p>4</p>
<p>Procurement and contract management</p>			

<p>The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> The department did not submit the procurement needs for the current FY 2018/2019 in time. Evidenced from the procurement submissions by AKANKWASA JOHNSON on the 6/8/2018 for Fuel, stationery, furniture for KITOJO HCII, motor cycle & vehicle & construction of Maternity Ward at KITOJO HCIII PP1 forms for fuel of drainage excavation in KABWOHE by AKANKWASA JOHNSON(the Principal Health Inspector) on the 27/8/2018 amounting to UGX.4,568,000. 	0
<p>The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2. 	<p>The LG health department did submit procurement requests for 2017/2018 in time to the PDU.</p> <p>Evidence was the PP1 forms submitted and signed on the 20/7/2017 for stationery amounting UGX. 207,000; protective wear for Garbage gangs amounting to UGX.1,410,000 & sanitary tools and consumables amounting to UGX. 548,000. This was within the deadline of the 30th September 2017.</p>	2
<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>In the Financial Year 2017/2018, there were no capital projects for the health departments, the department did not have any certified payments in FY 2017/18</p>	4
Financial management and reporting			

<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> 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 the department submitted the annual performance report for the previous FY 2017/2018 to the planner for consolidation by mid July. The departments at the LG used the on line PBS for reporting and the planner concurrently consolidated the reports.</p> <p>Submission of quarterly reports by Planner during FY 2017/2018:</p> <table border="1"> <thead> <tr> <th>Quarter</th> <th>Date of submission</th> <th>Reference</th> </tr> </thead> <tbody> <tr> <td>Quarter 1</td> <td>16/12/2017</td> <td>PBS LG planning data</td> </tr> <tr> <td>Quarter 2</td> <td>22/2/2018</td> <td>PBS LG planning data</td> </tr> <tr> <td>Quarter 3</td> <td>29/5/2018</td> <td>PBS LG Planning data</td> </tr> <tr> <td>Quarter 4</td> <td>20th /8/2018</td> <td>PBS LG Planning data</td> </tr> </tbody> </table>	Quarter	Date of submission	Reference	Quarter 1	16/12/2017	PBS LG planning data	Quarter 2	22/2/2018	PBS LG planning data	Quarter 3	29/5/2018	PBS LG Planning data	Quarter 4	20th /8/2018	PBS LG Planning data	<p>0</p>
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<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 	<p>Sheema MC Health Department had internal audit queries in FY 2017/18. Though effort was made to respond the queries, there are some which remained by the close of the year.</p> <p>For example Quarter 3 report had audit queries on some health centres such as Kyabandara HC-II, Kihunda HC-III and Kiziba HC-II. Issues included neglect of duty, teacher absenteeism, understaffing and un-updated PHC cashbooks.</p> <p>Quarter 4 reported on Kabwohe HC-IV. Issues included non-preparation of financial statements, lack of a motor vehicle logbook and irregular staff attendance, among others.</p>	<p>0</p>															
<p>Social and environmental safeguards</p>																		

<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines (i.e. minimum 30 % women: score 2 	<ul style="list-style-type: none"> The compositions of the HUMCs of the five health units visited was (KIHUNDA HCIII (1 female & 4 males), KABWOHE HCIV (2 Females & 2 Males), KARERA HCII (1 females & 2 males), KYABANDARA HCII (1Female & 2 Males) & MUSHANGA HCIII (4 Females & 2 Males). Four of the health units met the required gender composition as per guidelines and only KIHUNDA HCIII did not meet the gender requirements. 	<p>0</p>
<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2. 	<ul style="list-style-type: none"> Not all the health units visited had their sanitation facilities clearly labelled for both males & females and the privacy was as well observed. The ones that had was MUSHANGA HCIII. The other four health unites(KABWOHE HCIV, KARERA HCIII, BYABANDARA HCII & KIHUNDA HCIII did not have their sanitation facilities clearly labelled for men and women as required The LG did not formally issue guidelines on how to manage sanitation in health facilities. 	<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 	<ul style="list-style-type: none"> In the financial year 2017/2018, there were no capital projects for health department. 	<p>2</p>

<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> The environmental officer and community development officer have visited the sites to check whether the mitigation plans are complied with: <p>Score 2</p>	<ul style="list-style-type: none"> Since there were no capital/investment projects under health in the previous year, there was no provision for the District Community development Officer and the District environment officer to carry out site visits. 	<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. 	<ul style="list-style-type: none"> Guidelines on waste management were distributed to health units as evidenced from the copies of the guidelines seen at the health units visited. The Health units visited displayed the Waste Management Instructions at critical areas in the Health Units. 	<p>4</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> • 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 	N/A, the municipal is under NWSC	0
<p>The district Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> • 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. <ul style="list-style-type: none"> o If 100 % of the water projects are implemented in the targeted S/Cs: <p>Score 15</p> o If 80-99%: Score 10 o If 60-79: Score 5 o If below 60 %: Score 0 	N/A, the municipal is under NWSC	0
Monitoring and Supervision			

<p>The district Water department carries out monthly monitoring of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the district Water department has monitored each of WSS facilities at least annually.</p> <ul style="list-style-type: none"> • 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>N/A, the municipal is under NWSC</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>N/A, the municipal is under NWSC</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"> • List of water facility which are consistent in both sector MIS reports and PBS: score 5 	<p>N/A, the municipal is under NWSC</p>	<p>0</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>N/A, the municipal is under NWSC</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 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>N/A, the municipal is under NWSC</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 water and sanitation facilities constructed as per design(s): score 2 	<p>N/A, the municipal is under NWSC</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 contractor handed over all completed WSS facilities: score 2 	<p>N/A, the municipal is under NWSC</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>N/A, the municipal is under NWSC</p>	<p>0</p>
<p>The district Water department has certified and initiated payment for works and supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 	<p>N/A, the municipal is under NWSC</p>	<p>0</p>
<p>Financial management and reporting</p>			
<p>The district Water department has submitted annual reports (including all quarterly reports) in time to the 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>N/A, the municipal is under NWSC</p>	<p>0</p>
<p>The District Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year <ul style="list-style-type: none"> If sector has no audit query score 5 If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0 	<p>N/A, the municipal is under NWSC</p>	<p>0</p>
<p>Governance, oversight, transparency and accountability</p>			

<p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> 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>N/A, the municipal is under NWSC</p>	<p>0</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>N/A, the municipal is under NWSC</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"> 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>N/A, the municipal is under NWSC</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>N/A, the municipal is under NWSC</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>N/A, the municipal is under NWSC</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"> If communities apply for water/ public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1 	<p>N/A, the municipal is under NWSC</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>N/A, the municipal is under NWSC</p>	<p>0</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>N/A, the municipal is under NWSC</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 there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1 	<p>N/A, the municipal is under NWSC</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>N/A, the municipal is under NWSC</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>N/A, the municipal is under NWSC</p>	<p>0</p>
<p>Gender and special needs-sensitive sanitation facilities in public places/ RGCs provided by the Water Department.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3 	<p>N/A, the municipal is under NWSC</p>	<p>0</p>