

6.1 Performance on Health Sector Performance Measures

Performance Area	No.	Performance Measures	Scoring guide	Assessment Procedures	Score	Detailed assessment findings
(A) Human resource planning and management <i>(Maximum 26 points)</i>	1.	LG has substantively recruited primary health workers with a wage bill provision from PHC wage <i>(Maximum 8 points)</i>	Evidence that LG has filled the structure for primary health workers with a wage bill provision from PHC wage for the current FY (2018/19) <ul style="list-style-type: none"> • More than 80% filled: score 8 points, • 60 – 80% - score 4 points • Less than 60% filled: score 0 	<ul style="list-style-type: none"> • From the LG Performance Contract: <ul style="list-style-type: none"> ✓ Check the LG approved structure ✓ Check wage bill provision ✓ Establish the positions filled <p><i>If there is evidence of effort to recruit (e.g. advertisement etc.) but LG has failed to attract provide the score.</i></p>	3	Out of the total 74 established positions, 45 were filled. Thus 61 % of all the approved positions were filled: The staffing gap is 29 of which 25 are support staff (U8 Salary Scale) accounting for 86%, and 4 are the technical staff (U7-U4 salary scale) accounting for 14%.
	2.	The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department <i>(Maximum 6 points)</i>	Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY (2018/19), covering the vacant positions of health workers: score 6 points	<ul style="list-style-type: none"> ▪ From the Performance Contract, review recruitment plan to determine whether the vacant positions of primary health care workers have been included in the current FY (2018/19) 	0	There was no comprehensive recruitment plan submitted by the health department to HR. For the FY 2017/18, it was clear that there was no recruitment. Only replacement was allowed. The Indicative Planning Figure (IPF) for the health Department has not changed for Hoima Municipal Council (HMC) for a long time. All the same the department should have developed a recruitment, indicating the staffing gaps, retirement dates, required skills etc.
	3.	The LG Health department has	Evidence that all health facility in-charges have	<ul style="list-style-type: none"> • From the LG HR department, obtain 	4	All the In-Charges for the six health facilities were appraised. However, appraisal did not fully comply with the

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		<p>conducted performance appraisal for Health Centre I/ Vs and Hospital in-charge and ensured performance appraisals for HC III and II in-charges are conducted. (Maximum 8 points)</p>	<p>been appraised during the previous FY (2017/18):</p> <ul style="list-style-type: none"> ▪ 100%: score 8 points ▪ 70 – 99%: score 4 points ▪ Below 70%: score 0 	<p>and review a sample of in-charge personnel files to determine whether they were appraised during the previous FY (2017/18).</p>		<p>performance plan agreed upon with the staff at the beginning of the financial year.</p> <p>Out of the six In-Charges, only one {Bakyayaya Memorial HC II: Akkora Tophus Nyakuni (Enrolled Midwife)} had all the six performance output areas assessed.</p> <p>Buhanika HC III In-Charge, Kyomuhendo Gerald (Clinical Officer) and Kyakapeya HC II In-Charge, Atuhura Johnson (Enrolled Nurse) were not assessed for the following output areas:</p> <ol style="list-style-type: none"> 1. Quality of services delivered <ul style="list-style-type: none"> • <i>Internal Supervisions once a week</i> • <i>2 monthly CME</i> 2. Annual Work plan development and budgeting 3. Health Promotion <ul style="list-style-type: none"> • <i>Daily Health Education</i> • <i>Two health promotion activities per month</i> <p>DHO Clinic HC II, In-Charge Mbabazi Debora (Nursing Officer) and Kinuukya HC II- In-Charge – Enrolled Nurse were not assessed for the following output areas:</p> <ol style="list-style-type: none"> 1. Quality of services delivered <ul style="list-style-type: none"> • <i>Internal Supervisions once a week</i> • <i>2 monthly CME</i> 2. Health Promotion <ul style="list-style-type: none"> • <i>Daily Health Education</i> • <i>Two health promotion activities per month</i> <p>Karongo HC III, In-Charge, Muhereza Edward Oswald (Clinical Officer), was not assessed on the following:</p> <ol style="list-style-type: none"> 1. <i>Quality of services delivered</i> <ul style="list-style-type: none"> • <i>Internal Supervisions once a week</i> • <i>2 monthly CME</i> 2. <i>Health Promotion</i> <ul style="list-style-type: none"> • <i>Daily Health Education</i> • <i>Two health promotion activities per month</i> • <i>Immunisation</i>

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	4.	The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY (2018/19).	<ul style="list-style-type: none"> Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY (2018/19), and if not provided justification for deviations: score 4 points 	<ul style="list-style-type: none"> From the MHO, obtain and review a sample of health facilities (rural and urban) verify whether the health workers as indicated in the staff lists are actually deployed in the health facilities. 	4	The consideration for deployment is based on patient load. Sometimes more Enrolled Nurses are deployed than the approved staffing to take care of the work load. This was the case with DHO Clinic HC II, where a Nursing officer was deployed to be the In-Charge instead of the Enrolled Nurse or Mild wife.
(B) Monitoring and supervision (Maximum 32 points)	5.	The MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY (2017/18) to health facilities (Maximum 6 points)	<ul style="list-style-type: none"> Evidence that the MHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY (2017/18) to health facilities: score 3 points 	<ul style="list-style-type: none"> From MoH obtain guidelines, policies, circulars issued by the national level in the previous FY (2017/18) to health facilities (MoH to prioritize the documents to be reviewed) From the MHO obtain evidence that s/he communicated guidelines, policies, circulars to health facilities (e.g. through meetings, submission letters, 	3	<p>Policies, guidelines are usually sent to the districts, to distribute. Hoima MC Health office does not have a role in the distribution of policy guidelines. It is done by the District Health Office. The following were among the guidelines found at the sampled health facilities at the time of the visit:</p> <ul style="list-style-type: none"> Uganda Clinical Guidelines 2016 Essential medicines and health supplies list for Uganda, 2016 Practical guidelines for dispensing at lower level, 2014, Disease surveillance and response, MOH, 2017 Immunisation in practice, Uganda National Expanded Programme of Immunisation, reference manual for Pre-and In Service health workers, June 2017. Essential maternal and new born clinical care guidelines, MOH, November 2016 Consolidated guidelines for prevention and treatment of HIV in Uganda, 2016

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			<ul style="list-style-type: none"> Evidence that the MHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3 points 	<ul style="list-style-type: none"> From the MHO obtain and review minutes and/or other evidence of meetings with health facility in-charges in the previous FY Check from a sample of 5 health facilities 	0	<ul style="list-style-type: none"> For all the meetings held with In-Charges on 21st July 2017 and 1st October 2017, explanation of policies and guidelines and circulars was never part of the agenda.
	6.	The LG Health Department has effectively provided support supervision to district health services (Maximum 6 points)	<ul style="list-style-type: none"> Evidence that MHT has supervised 100% of HC IVs and district hospitals (including PNFs receiving PHC grant) at least once in a quarter: score 3 points 	<ul style="list-style-type: none"> From the MHO obtain: <ul style="list-style-type: none"> The LG support supervision reports (quarterly) Minutes of MHT meeting. Facility records From the MHO obtain: <ul style="list-style-type: none"> The LG support 	3	Hoima Municipal Council does not have a HC IV
			Evidence that MHT has ensured that HSD has	<ul style="list-style-type: none"> From the MHO obtain: <ul style="list-style-type: none"> The LG support 	3	Support supervision was carried out during 17 th – 20 th July 2017, covering all health facilities, using the facility

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	7.	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 follow up (Maximum 10 points)	<p>supervised lower level health facilities within the previous FY (2017/18):</p> <ul style="list-style-type: none"> ▪ If 100% supervised: score 3 points ▪ 80 - 99% of the health facilities: score 2 points ▪ 60% - 79% of the health facilities: score 1 point ▪ Less than 60% of the health facilities: score 0 	<p>supervision reports (quarterly)</p> <ul style="list-style-type: none"> ▪ Minutes of MHT meetings ▪ Facility records ▪ Review and check a sample of minimum 5 facilities 	0	<p>monitoring tool. The findings are contained in the tool for each health facility. The challenge however, is that the action plans to respond to the identified challenges and gaps were not defined. In addition, the supervision was not benchmarked with the findings of the previous support supervision, to assess the progress made.</p> <p>Also from the facility support supervision book, the MHT carried out supervision as follows:</p> <p>Buhanika HC III: Supervision was carried on 1st Aug 2017, 5th Dec 2017, and 22nd Feb 2018.</p> <p>Kyakapeeya HC II: Carried out on 1st August 2017, 10th Nov 2017, 21st March 2018 and 21st June 20018</p> <p>DHO Clinic HC II: Carried out on 10th Jul 2017.</p> <p>The supervision was in addition to the support supervision carried out by MOH, DHO, Hoima Regional Referral, IDI Hoima, UNICEF and others</p> <p>By the time of the exit meeting there was no evidence of minutes of meetings held to review and discuss the findings of support supervision for 2017/18. However minutes were later sent to the team on 27th Aug 2018. Minutes of the 16th July 2018 meeting held to review, among others, the support supervision report for the 4th Quarter (April- June 2017/18). However the supervision carried out in July 2018, which is outside the period under review. Another supervision report dated 6th April 2018, reported to be for the 3rd quarter January – March 2016, was carried out between 3rd - 6th April 2018.</p> <p>Because the mismatch in the dates the score of 0 has been maintained.</p> <p>There was no evidence to show that recommendations of support supervisions for 2017/2018 were followed up.</p>
			<p>Evidence that all the 4 quarterly reports have been discussed and used to make recommendations (in each quarter) for corrective actions during the previous financial year (2017/18): score 4 points</p>	<p>From the MHO obtain and review:</p> <ul style="list-style-type: none"> • Support supervision and monitoring visit reports ▪ Minutes of quarterly meetings ▪ Minutes of monthly MHT meetings 	0	
			<p>Evidence that the recommendations are followed up and specific</p>	<p>From the sampled health facilities, determine whether</p>	0	

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(C) Governance, transparency, and accountability (Maximum 14 points)	8.	The LG Health department has submitted accurate/consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH (Maximum 10 points)	<ul style="list-style-type: none"> Evidence that the LG has submitted accurate/consistent data regarding list of facilities receiving PHC funding, which are consistent with both HMIS reports and PBS - score 10 points 	<p>From the MoH obtain and review:</p> <ul style="list-style-type: none"> HMIS reports for the current FY (2018/19) The performance contract for the current FY (2018/19) Check whether the lists of health facilities submitted are consistent/similar 	0	<ul style="list-style-type: none"> We were not provided with HMIS reports for the current FY (2018/19) from the MoH to enable us undertake the procedure.
	9.	The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council (Maximum 4 points)	<ul style="list-style-type: none"> Evidence that the committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY (2017/18) - score 2 points 	<p>From the Clerk to Council obtain and review:</p> <ul style="list-style-type: none"> Health sector standing committee meeting minutes – check if the Council has approved the sector implementation plan and discussions by the committee Review the MHO's 	2	<p>The Education and Health Sectoral Committee held 4 meetings, considered the health department report and made recommendations as follows:</p> <p>The meeting of 4th Aug 2017 considered the following issues in the department report :</p> <ul style="list-style-type: none"> Garbage management Health education activities of the DHO's clinic Mobilisation for immunization and outreaches Sanitation at home and the city Meeting with the VHTs Sensitization of food handlers <p>Recommendation made was that all vendors near Shell fuel station are a danger since they are operating near a</p>

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				reports to the committee		<p>fuel and gas depot, and must relocate to Cadam area.</p> <p>In the meeting of 17th Oct 2017, there was no report presented to the committee by the department and thus there was no discussions on health</p> <p>In the meeting of 7th December 2017, the following issues emerged in the department report:</p> <ul style="list-style-type: none"> • Solid waste management – only 20 skips were operational • Maintenance of open spaces • Inspection of premises and home visits • Nuisance and compliant handling unhygienic situations • Keep Hoima clean • Inspection of markets and sensitization of vendors on good hygiene • Inspection of building sites <p>The committee meeting resolved as follows:</p> <ul style="list-style-type: none"> • Tour the whole city • All shops to have dust bins and repainting of buildings • Meat rosters must have uniforms • Rehabilitation of the latrine at Boma ground • Toilets must be emphasized at bars and restaurants • Enforcement of Charcoal vendor’s re-location to Cadam lane. <p>In the meeting of 30th January 2018, the following issues were captured in the department report:</p> <ul style="list-style-type: none"> • Staffing status, of the 74 approved positions 47 are filled • Situation of the Abattoir • Council mortuary functionality • Functionality of the composing plant

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			<ul style="list-style-type: none"> Evidence that the health sector committee has presented issues that require approval to Council - score 2 points 	<ul style="list-style-type: none"> From the Clerk to Council obtain and review health sector standing committee meeting minutes – check if the sector committee has presented issues that require approval. 	2	<ul style="list-style-type: none"> Garbage management Examination of food handlers and issuance of medical certificates Inspection of premises Scrutinized building plans <p>The following recommendations were made;</p> <ul style="list-style-type: none"> Earmark property tax funds to garbage collection and town sweeping Prioritization of health in the division budgets Gazetting a public cleaning day Meat rosters operating around Shall fuel stations be shifted to Cadam lane Medical examination of food handlers in school <p>The chairperson Education and Health Committee Presented Reports to Council on the following plenary sittings:</p> <p>Council meeting of 20th February 2018: the Education and Health Committee made the following recommendations to Council:</p> <ol style="list-style-type: none"> By-laws and fines to reduce poor hygiene behaviors Municipality/Should Identify a Public Cleaning day every quarter, to promote cleanliness All Divisions should involve the Principle Medical Officer in their budgeting to guide them on issues of the mortuary and refuse management <p>The Council ruled that all recommendations were administrative and were referred back to the committee.</p> <p>During the Council meeting of 20th December 2017, the Education and Health Committee made the following recommendations to Council:</p> <ol style="list-style-type: none"> Construction of a water borne toilet at Borna ground

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	10.	The Health Unit Management Committees and Hospital Board are operational/ functioning (Maximum 6 points)	Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues): <ul style="list-style-type: none"> If 100% of randomly sampled facilities: score 6 points If 80-99 %: score 4 points If 70-79: %: score 2 point If less than 70%: score 0 	<ul style="list-style-type: none"> Check files of HUMCs and minutes of HUMCs (Check list for all and sample 5 to review) Study files from 5 randomly sampled health facilities to confirm whether they have HUMCs and review whether they have held 4 mandatory meetings 	0	<p>ii. All children enrolling in Nursery schools should carry their immunization cards as a requirement.</p> <p>The Council meeting of 20th December 2017 passed all recommendations of the Education and Health committee Council meeting of 24th or 30th October 2017, the report of the Education and Health Committee to the council on did not have any recommendation on the health sector</p> <p>Council meeting of 23rd August 2017, the committee made the following recommendation to council:</p> <ul style="list-style-type: none"> Relocation of charcoal stove vendors away from Shell fuel station Intensification of town cleaning <p>The MLG health facilities have functional Health Unit Management Committees (HUMCs) that held meetings on discussions of budget and resource issues as indicated below:</p> <p>Karongo HC III:</p> <ul style="list-style-type: none"> Met on 25th June 2018. The health facility report was presented indicating that the facility had received drugs from NMS, on staffing of the facility, health camp, and Safe Male Circumcision- SMC), facility hygiene and sanitation, and value for money for immunization outreaches. Minutes were however not yet signed for the 9th August 2018 meeting that considered the facility report – which reported on staffing status, and funds received for the last quarter (2.45m), presentation of annual work plan for 2017/18), late coming of staff. The 2017-18 work plan and budget was approved, The meeting of 6th November 2017 considered facility report (on staffing of the maternity wing, stores mgt.

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	11.	The LG has	<ul style="list-style-type: none"> ▪ Evidence that the LG has 	<ul style="list-style-type: none"> ▪ Check the LG 	0	<ul style="list-style-type: none"> • The facility HUMC also met on 19th March 2018. During the meeting, the facility report was presented, giving the coverage of services delivered (OPD, ANC, HCT, Immunization) absenteeism at the midwifery section etc. DHO Clinic HC II: <ul style="list-style-type: none"> • Met on 25th October 2017 and the facility report was presented and considered. • Met on 21st March 2018 and considered a report from the In-Charge. • Met on 23rd May 2018, and considered a report from the facility. All minutes are hand written and are in the DHO HC II HUMC Minutes Book Buhanika HC III <ul style="list-style-type: none"> • Met three times on 23rd Aug 2017, 24th Nov 2017, and 23rd Mar 2018. All minutes are hand written and are in the Buhanika HC III HUMC Minutes Book. <u>Kyakapeya HC II:</u> <ul style="list-style-type: none"> • Met on 10th July 2017, <u>Kinuukya HC:</u> <ul style="list-style-type: none"> • HUMC met on: 9th Jan 2017 10th July 2017. <p>Overall performance is about 45%.</p> <ul style="list-style-type: none"> ▪ List of health facilities receiving PHC non-wage

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(D) Procurement and contract management (Maximum 8 points)	12	The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget (Maximum 4 points)	publicised all health facilities receiving PHC non-wage recurrent grants (Maximum 4 points)	publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards - score 4 points	<ul style="list-style-type: none"> Notice Boards and LG budget website to establish if the Health department publicised all health facilities receiving non-wage recurrent grants Check a sample of health facilities 	<ul style="list-style-type: none"> From the Municipal Health Officer (MHO) obtain and review submissions to DPU; From PDU crosscheck submission from DHO 	<ul style="list-style-type: none"> Hoima LG Health Department Procurement Plan 2018/2019 was prepared by Principal Health Officer Mugano Felix, approved by Head of Department and submitted to Head of the Procurement and Disposal Unit (PDU) on 17th April 2018 which was before due date of 30th April 2018. The investment item, Upgrade of Kititkya Health Centre was captured in the Procurement Plan for FY 2018/2019 at an estimated cost of Ushs. 500,000,000. As at the time of the assessment, no LG PP Form 1 was raised for the upgrade of Kititkya Health Centre as there was no funding available by then.
	13	The LG Health department has certified and initiated payment for supplies on	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, 2018 for the current FY (2018/19) - score 2 points	<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 (2018/19) - score 2 points 	<ul style="list-style-type: none"> From the CFO obtain a sample of contracts, review and determine whether payment requests were 	<ul style="list-style-type: none"> 0 	<ul style="list-style-type: none"> recurrent grants was not displayed at the HMC notice board. At the DHO Clinic HC II, the PHC funds were displayed inside the In-Charge's clinical office. The In-Charge explained that only funds withdrawn from the bank were displayed and not what has been disbursed to the bank account. Since the MLG notice board had no list of facilities receiving PHC non-wage recurrent grants, the score is zero.
		The LG Health department has certified and initiated payment for supplies on	Evidence that the MHO (as per contract) certified and recommended suppliers timely for payment-	<ul style="list-style-type: none"> From the CFO obtain a sample of contracts, review and determine whether payment requests were 	<ul style="list-style-type: none"> 4 	<ul style="list-style-type: none"> We reviewed the certification and payments in respect of supplies to verify whether the health department certified and initiated payment for supplies on time. The payment requests made by Hoima Service Station for the supply of fuel was recommended for payment on time. 	

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		time (Maximum 4 points)	score 4 points	certified and recommended on time		<p>There was no need for certification in this instance as the supply is pre-paid for and the Hoima Municipal Council drivers draw down the account which is replenished as and when the account is depleted. We reviewed the purchase orders below;</p> <p>LPO 00932</p> <ul style="list-style-type: none"> As per the Local Purchase Order (LPO) no. 00932 issued by Hoima Municipal Council to Hoima Service Station on 19th March 2018 for the supply of 892 litres of diesel. The LPO was initiated and funds approved simultaneously in the Integrated Financial Management System (IFMIS) by user department, Felix Mugano, Principal Health Officer and Vote Controller for the sum USHS. 3,122,000. The request for payment submitted by Hoima Service Station on 23rd March 2018, Invoice no. 1353 was recommended for payment on the same date by the Principal Health Officer. <p>LPO 00991</p> <ul style="list-style-type: none"> As per the LPO no. 00991 issued by Hoima Municipal Council to Hoima Service Station on 28th May 2018 for the supply of 875.625 litres of petrol. The LPO was initiated and funds approved simultaneously in the Integrated Financial Management System (IFMIS) by user department, Felix Mugano, Principal Health Officer and Vote Controller for the sum USHS. 3,502,500. The request for payment submitted by Hoima Service Station on 28th May 2018, Invoice no. 1381 was recommended for payment on the same date by the Principal Health Officer.

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(E) Financial management and reporting <i>(Maximum 8 points)</i>	14	The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit <i>(Maximum 4 points)</i>	<ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY – 2017/18 (including all four quarterly reports) to the Planner by mid-July for consolidation - score 4 points 	<ul style="list-style-type: none"> From the Planning Unit, obtain and review performance report files From the MHO check annual and quarterly reports for the previous FY (2017/18) 	0	<ul style="list-style-type: none"> For the FY 2017/18, the Planning unit was using PBS. The departmental head for health had access to PBS and input their departmental figures after which the Planner would receive an email notification from the PBS system though there was no evidence of submission. However, we noted that the two quarterly performance reports (quarter 1 and 2) included input from the health department and Hoima MLG annual performance report for the FY 2017/18 was not submitted to MoFPED before the deadline of 30th August 2018.
	15	LG Health department has acted on Internal Audit recommendations (if any)	Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year	<ul style="list-style-type: none"> From the Internal Auditor obtain copies of sector audit reports from the internal audit and Management 	2	<p>We reviewed the quarterly internal audit reports for the FY 2017/18 and noted that the department responded to all the queries raised by the internal audit as summarized below hence the score four;</p> <p>Quarters Issues Responses</p>

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		(Maximum 4 points)	<ul style="list-style-type: none"> ▪ If sector has no audit query - score 4 points ▪ If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year (2017/18) - score 2 points ▪ If all queries are not responded to - score 0 	responses for the previous FY (2017/18)		<p>1 Unaccounted for funds worth USHS. 5,650,106</p> <p>Accounted for USHS. 1,416,556 for Buhaniika HC III. DHO HC II accounted for USHS. 680,802. Kihukya HC II accounted for USHS. 680,802 Kyakapeya HC II accounted for USHS. 590,029. Bacayaya HC III accounted For USHS. 869,757. Karongo HC III accounted USHS. 1,414,398</p> <p>Fully accounted</p> <p>2 No issues raised</p> <p>N/A</p> <p>3 Inadequately accounted for funds USHS. 2,694,000</p> <p>Accounted for USHS. 1,300,000 for Buhaniika HC III. Kihukya HC II accounted for USHS. 680,802 Kyakapeya HC II accounted for USHS. 590,029. Karongo HC III accounted for USHS. 1,414,398. DHO HC accounted for USHS. 680,802, Bacayaya HC accounted for 869,757 Fully accounted</p> <p>4 Unaccounted for PHC grant for Q4 FY</p> <p>Accounted for USHS. 1,414,398 for Buhaniika HC III. DHO HC accounted for USHS. 680,802, Bacayaya</p>

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(F) Social and environment safeguards (Maximum 12 points)	16	Compliance with gender composition of Health Unit Management Committee (HUMC) and promotion of gender sensitive sanitation in health facilities. (Maximum 4 points)	<ul style="list-style-type: none"> Evidence that HUMC meet the gender composition as per guidelines (i.e. minimum 30% women) - score 2 points 	<ul style="list-style-type: none"> From the sampled health facilities, find out whether the number and gender of committee members is as per required composition 	2	<p>Committees for selected health facilities met the gender composition as per guidelines (i.e. minimum 30% women).</p> <ul style="list-style-type: none"> Karongo HC III – Committee is in place composed of 8 members with 4 women and 4 men meeting required minimum 30% women Composition. Kyakapeya HC II - Committee is in place composed of 5 members with 2 women and 3 men meeting required minimum 30% women Composition. DHO HC II - Committee is in place composed of 5 members with 3 women and 2 men meeting required minimum 30% women Composition. <p>From the sampled health facilities (Karongo HC II, DHO HC II and Kyakapeya HC II), there was no evidence showing that the LG issued guidelines on how to manage sanitation in health facilities.</p> <p>There were no guidelines on sanitation displayed at the sampled health facilities and at the municipal health department offices at the time of assessment.</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 points 	<ul style="list-style-type: none"> From the sampled health facilities, find out whether the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women 	0	

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	17	LG Health department has ensured that guidelines on environmental management are disseminated and complied with. (Maximum 4 points)	<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 points The environmental officer and community development officer have visited the sites to check whether the mitigation plans are complied with: score 2 points 	<ul style="list-style-type: none"> From the Environmental officer obtain and review filled screening forms to ascertain whether screening was done and whether risks mitigation plans were developed. From the Environmental officer and CDO obtain and review Site visit reports to establish whether they checked compliance to the risk mitigation plans 	2	<ul style="list-style-type: none"> Screening form for the construction of a 5-Store Lined Latrine at the DHO's Health Center II were seen on file dated 11th October 2017. The mitigation measures for identified risks were included in the ESMIP also dated 11th October 2017. The monitoring report dated 3rd March 2018 was also seen on file signed by the MEO and the CDO.
	18	The LG Health department has issued guidelines on medical waste management (Maximum 4 points)	<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 points. 	<ul style="list-style-type: none"> From the sampled health facilities, find out whether the LG has issued guidelines on medical waste management 	0	<ul style="list-style-type: none"> From the sampled health facilities (Karonogo HC II, DHO HC II and Kyakapeya HC II), there was no evidence showing that the LG Health department has issued guidelines on medical waste management. No medical waste management guidelines were displayed at various locations around the facilities. At the sampled health facilities, there were no medical waste management guidelines including sanitation charts, posters, etc) displayed at the facility and the municipal health office.
Total					38	

6.2 Performance on Education Sector Performance Measures

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings																		
(A) Human resource planning and management <i>(Maximum 30 points)</i>	1.	The Municipal LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school) <i>(Maximum 8 points)</i>	<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 (2018/19) - score 4 points 	<ul style="list-style-type: none"> From the Municipal LG Performance Contract: (i) review the list of schools; and (ii) the staff lists and validate that: <ul style="list-style-type: none"> The Municipal LG has budgeted for at least a Head Teacher and a minimum of 7 teachers per school. 	4	<ul style="list-style-type: none"> Teacher's list was obtained and reviewed. The 5 sampled schools were visited and teachers deployed were verified. The 5 sampled schools were visited and teachers deployed were verified. All the sampled schools had more than the minimum number of teachers required. 																		
			<ul style="list-style-type: none"> Evidence that the Municipal 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 (2018/19) - score 4 points 	<ul style="list-style-type: none"> From the MEO obtain and review <ul style="list-style-type: none"> Teachers' lists to determine whether Municipal LG has deployed a Head Teacher and minimum of 7 teachers (or minimum of a teacher per class for schools with less than P.7) per school for the current FY (2018/19). From the sampled schools (urban and rural), verify whether the teachers as 																				
<table border="1"> <thead> <tr> <th>Name of school</th> <th>Deployed teachers</th> <th>Staff list</th> </tr> </thead> <tbody> <tr> <td>St Aloysius p/s</td> <td>11</td> <td>13</td> </tr> <tr> <td>Businsi P/S</td> <td>11</td> <td>11</td> </tr> <tr> <td>Mpalija P/S</td> <td>8</td> <td>8</td> </tr> <tr> <td>St. Bernadette Primary School</td> <td>26</td> <td>26</td> </tr> <tr> <td>Hoiima Mixed</td> <td>8</td> <td>9</td> </tr> </tbody> </table>							Name of school	Deployed teachers	Staff list	St Aloysius p/s	11	13	Businsi P/S	11	11	Mpalija P/S	8	8	St. Bernadette Primary School	26	26	Hoiima Mixed	8	9
Name of school	Deployed teachers	Staff list																						
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Hoiima Mixed	8	9																						

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
				indicated in the staff lists are actually deployed in the schools.		Note: the current staff structure requires a teacher: pupil ratio of 1:53. We note that St. Bernadette has a ratio of 1:59—implying that more teachers are required. In addition, we noted that 2 Municipal LG education department staff, Kyomuhendo Carolynne the Education officer(EO) and Alinde Haruna the sports officer(SO) are still on the payroll of St. Aloysius P/S, and Bulera Demonstration Primary School respectively, as though they were engaging in active teaching. This reduces the number of active and salaried teachers at the schools.
	2.	Municipal LG has substantively recruited all primary school teachers where there is a wage bill provision (Maximum 6 points)	<ul style="list-style-type: none"> Evidence that the Municipal LG has filled the structure for primary teachers with a wage bill provision <ul style="list-style-type: none"> If 100% - score 6 points If 80 - 99% - score 3 points If below 80% - score 0 	<p>From the Municipal LG Performance Contract:</p> <ul style="list-style-type: none"> Check the MLGs approved structure Check wage bill provision Positions filled. <p><i>If there is evidence of effort to recruit (e.g. advertisement etc.) but MLG has failed to attract, provide score.</i></p>	6	<ul style="list-style-type: none"> The wage bill provision was 2,366,017 for 340 teachers. The staff list had 340 teachers, and so the Municipal LG filled 100% the structure for primary teachers with a wage bill provision.
	3.	MLG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision. (Maximum 6 points)	<ul style="list-style-type: none"> Evidence that the Municipal LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision - score 6 points 	<p>From the Municipal LG Performance Contract:</p> <ul style="list-style-type: none"> Check the Municipal LG approved structure Positions filled. 	0	<ul style="list-style-type: none"> We obtained and reviewed the staff structure. The approved structure provides an inspector of school, and a senior inspector of schools. There was only an inspector of schools and no senior inspector. Since the formation of the municipality, there has been one inspector of schools instead of 2. As a result, inspection activities were carried out by the MEO, EO and SO.

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
	4.	The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY (2018/19). (Maximum 4 points)	Evidence that the Municipal LG Education department has submitted a recruitment plan to HRM for the current FY (2018/19) to fill positions of: <ul style="list-style-type: none"> ▪ Primary Teachers - score 2 points ▪ School Inspectors - score 2 points 	From the Municipal LG Performance Contract: <ul style="list-style-type: none"> ▪ Review the recruitment plan to determine whether the vacant positions of teachers and inspectors have been included. 	2	<ul style="list-style-type: none"> ▪ The recruitment plan in the performance contract was reviewed. There was no need for recruitment of the Primary teachers, as the wage bill was already exhausted with the 340 teachers. ▪ The vacant position of the inspector of schools was included.
	5.	The Municipal 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 (2017/18). (Maximum 6 points)	Evidence that the Municipal LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY (2017/18) <ul style="list-style-type: none"> ▪ 100% school inspectors - score 3 points ▪ Primary school head teachers <ul style="list-style-type: none"> ✓ 90 - 100% - score 3 points ✓ 70% and 89% - score 2 points ✓ Below 70% - score 0 	From the Municipal HR department obtain and review: <ul style="list-style-type: none"> ▪ Personnel files for school inspectors and a sample of head teachers to determine whether they were appraised during the previous FY (2017/18). 	0	<ul style="list-style-type: none"> ▪ We obtained and reviewed personnel files for the head teachers of the 5 sampled schools. None of the sampled head teachers had been appraised for 2017 calendar year. Inquiries with the MEO revealed that appraisals were ongoing. ▪ The inspector of schools was not appraised for 2017/2018.
(B) Monitoring	6.	The Municipal LG Education	<ul style="list-style-type: none"> ▪ Evidence that the Municipal LG Education 	<ul style="list-style-type: none"> ▪ From MOES obtain guidelines, policies, 	1	<ul style="list-style-type: none"> ▪ We reviewed letters from the principal Education officer to the head teachers with key extracts from the

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
and inspection (Maximum 35 points)		Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY (2017/18) to schools (Maximum 3 points)	department has communicated all guidelines, policies, circulars issued by the national level in the previous FY (2017/18) to schools - score 1 point	circulars issued by the national level in the previous FY (2017/18) to schools <ul style="list-style-type: none"> From the MEO obtain evidence that s/he communicated guidelines, policies, circulars to schools. From the sampled schools, check whether the guidelines, policies, circulars were received. 	0	<ul style="list-style-type: none"> Minutes of only one meeting held on 29th September 2017 were availed for review. Policy on corporal punishments and licencing of schools were discussed in the remarks from the Inspector during the meeting with head teacher on 29th September 2017. This however is not sufficient evidence that the Municipal LG Education department held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level, and so the score is zero.
				From the MEO obtain and review minutes and/or other evidence of the meetings with Head Teachers	0	
	7.	The Municipal LG Education Department has effectively inspected all registered schools	<ul style="list-style-type: none"> Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: ✓ 100% - score 12 	<ul style="list-style-type: none"> From the MEO, obtain and review school inspection reports and inventory of schools inspected in the previous FY 	0	<ul style="list-style-type: none"> Inspection reports for Q2 and Q3 for FY 2017/18 were obtained and reviewed. Q1 and Q4 inspection reports were not availed for review. The reports did not have details of schools inspected and dates of inspection. Each report indicated total number of schools inspected, with no further

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
		(Maximum 12 points)	<ul style="list-style-type: none"> ✓ 90 to 99% - score 10 ✓ 80 to 89% - score 8 ✓ 70 to 79% - score 6 ✓ 60 to 69% - score 3 ✓ 50 to 59 % - score 1 ✓ Below 50% - score 0 	<ul style="list-style-type: none"> From sampled school verify the number of times they were inspected during the previous FY (2017/18) 		<p>justification of the number in the report.</p> <p>In addition, the report findings were generalised and specific findings for each school inspected were not attached to the report.</p> <ul style="list-style-type: none"> The sampled schools that were visited did not have feedback reports as evidence of inspection. <p>Therefore we could not verify the number of times of inspection for any of the sampled schools.</p>
	8.	Municipal LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations (Maximum 10 points)	<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 (2017/18) - score 4 points 	<ul style="list-style-type: none"> From the MEO obtain and review minutes of departmental meetings to determine whether school inspection reports were discussed and used to make recommendations for corrective actions during the previous FY (2017/18). 	0	<ul style="list-style-type: none"> Minutes of the education departmental staff meeting held on 29th January 2018 and 12th July 2017 were obtained and reviewed. No other minutes were available. In minute Min. 1/STAFF/2017 of the meeting held on 12th July 2017, the inspection report (findings) were discussed. However, no recommendations for corrective action were made. Inspection reports were not discussed in the meeting held on 29th January 2018.
			<ul style="list-style-type: none"> Evidence that the Municipal LG Education department has submitted school inspection reports to the DES in the Ministry of Education and Sports (MoES) - score 2 points 	<ul style="list-style-type: none"> From the DES obtain and review a list of LGs that have submitted school inspection reports From the MEO check whether the MEO has letter of acknowledgement from DES 	0	<ul style="list-style-type: none"> From the DES, we obtained and reviewed a list of LGs that had submitted school inspection reports. It was noted that the MLG had not submitted inspection reports to the DES. From the MEO, there was no acknowledgement of receipt from the DES, and so we could not verify submission of inspection reports to the DES.

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
			<ul style="list-style-type: none"> Evidence that the inspection recommendations are followed-up - score 4 points 	<ul style="list-style-type: none"> From the sampled schools, determine whether the education department provided recommendations from the inspection reports and followed-up. 	0	<ul style="list-style-type: none"> The inspection reports did not give a detailed account of the schools inspected and the dates of inspection, and they were generalised (with such words as – some schools, many schools, few, all), and so we could not ascertain whether any of the sampled schools were inspected. In addition, there was no evidence that recommendations from inspection reports were made by the education department. Therefore, there was no evidence to suggest that inspection recommendations were followed-up.
	9.	The Municipal LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES (Maximum 10 points)	<ul style="list-style-type: none"> Evidence that the Municipal LG has submitted accurate/consistent data: <ul style="list-style-type: none"> ✓ List of schools which are consistent with both EMIS reports and Programme Budgeting System (PBS) - score 5 points Evidence that the Municipal LG has submitted accurate/consistent data: <ul style="list-style-type: none"> ✓ Enrolment data for all schools which is consistent with EMIS report and PBS - score 5 points 	<ul style="list-style-type: none"> From MoES obtain and review EMIS reports for the current FY (2018/19) Obtain and review the performance contract for the current FY (2018/19) Check whether the list of schools submitted are consistent/similar. 	0	<ul style="list-style-type: none"> From the MoES, the EMIS reports were not availed for review. We obtained and reviewed the performance contract for 2018/19. The list of schools (which should have been submitted with the performance contract) was not availed for review. <p>Based on the above, we were unable to ascertain the level of consistency of information submitted in PBS and the EMIS reports, and so the score is zero.</p> <p>Note: From the planner, we obtained a list of schools (a different format from the performance contract), which had 33 government aided schools.</p> <ul style="list-style-type: none"> From the MoES, the EMIS reports were not availed for review. We obtained and reviewed the performance contract for 2018/19. The enrolment data of schools (an attachment to the performance contract) was not availed for review. Based on the above, we were unable to ascertain the level of consistency of information submitted in PBS and the EMIS reports, and so the score is zero.

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings															
(C) Governance, oversight, transparency and accountability (Maximum 12 points)	10.	The Municipal LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council (Maximum 4 points)	<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 (2017/18) - score 2 points 	<ul style="list-style-type: none"> From the Clerk to Council obtain and review education sector standing committee meeting minutes – check if the Council has approved the sector implementation plan and discussions by the standing committee MEO's reports to the committee 	2	<p>Note: From the MEO, we obtained a schedule of enrolment data (a different format from the performance contract), and the number of pupils enrolled in the 33 government aided schools was 12,517.</p> <p>We established evidence that the committee for Education and Health Committee met and discussed service delivery issues presented by the MEO. Minutes of the meetings held on the following dates were obtained and reviewed;</p> <table border="1"> <thead> <tr> <th>Date of meeting</th> <th>Minute no.</th> <th>Key highlight</th> </tr> </thead> <tbody> <tr> <td>30th January 2018</td> <td>Min35/E&H</td> <td>Permission to procure departmental vehicle, Poor PLE performance</td> </tr> <tr> <td>7th December 2017</td> <td>Min32/E&H</td> <td>Preparation of Budget framework paper, termly receipt of inspection funds affecting planned quarterly activities.</td> </tr> <tr> <td>17th Oct 2017</td> <td>Min27/2017</td> <td>Review of Education work plan, Licencing of schools</td> </tr> <tr> <td>4th August 2017</td> <td>Min20/2017</td> <td>Update on school projects, Closure of non-compliant private schools.</td> </tr> </tbody> </table> <p>However, we noted that some issues raised in the MEO's report to the committee were not reacted to, and no recommendations made.</p>	Date of meeting	Minute no.	Key highlight	30 th January 2018	Min35/E&H	Permission to procure departmental vehicle, Poor PLE performance	7 th December 2017	Min32/E&H	Preparation of Budget framework paper, termly receipt of inspection funds affecting planned quarterly activities.	17 th Oct 2017	Min27/2017	Review of Education work plan, Licencing of schools	4 th August 2017	Min20/2017	Update on school projects, Closure of non-compliant private schools.
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Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings																						
	11.	Primary schools in a Municipal LG have functional SMCs (Maximum 5 points)	Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to MEO) <ul style="list-style-type: none"> 100% schools: score 5 80 to 99% schools: score 3 Below 80 % schools: score 0 	<ul style="list-style-type: none"> From the Clerk to Council obtain and review minutes to check if education issues have been presented to the Council. Check files from MEO if head teachers have submitted reports to SMCs and minutes of SMCs (check the entire list and sample 5 reports) Study files from 5 randomly sampled primary schools to confirm whether they have SMCs and review whether they have held 3 mandatory meetings 	2	<p>The sector committee of Education and Health presented issues that required approval to Council. Minutes of the Council meetings held on the following dates were obtained and reviewed:</p> <table border="1"> <thead> <tr> <th>Date</th> <th>Minute no.</th> <th>Key highlights</th> </tr> </thead> <tbody> <tr> <td>26th April 2018</td> <td>Min. 104/HMC</td> <td>Approval of budget</td> </tr> <tr> <td>29th March 2018</td> <td>Min.98/HMC</td> <td>Laying of the budget</td> </tr> <tr> <td>30th October 2017</td> <td>Min76/HMC</td> <td>Approval of work plan, Budgeting for utility funds, Licensing of private schools</td> </tr> </tbody> </table>	Date	Minute no.	Key highlights	26 th April 2018	Min. 104/HMC	Approval of budget	29 th March 2018	Min.98/HMC	Laying of the budget	30 th October 2017	Min76/HMC	Approval of work plan, Budgeting for utility funds, Licensing of private schools										
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					5	<p>SMC minutes of the 5 sampled schools were reviewed. All the 5 sampled schools had 3 mandatory meetings where they discussed budget and resource allocation among others.</p> <table border="1"> <thead> <tr> <th>Primary School</th> <th>Date of meeting</th> <th>School Term</th> </tr> </thead> <tbody> <tr> <td rowspan="3">St Aloysius</td> <td>5th Nov 2017</td> <td>2017 Term 3</td> </tr> <tr> <td>29th Apr 2018</td> <td>2018 Term 1</td> </tr> <tr> <td>1st July 2018</td> <td>2018 Term 2</td> </tr> <tr> <td rowspan="3">Busiisi</td> <td>21st Aug 2017</td> <td>2017 Term 2</td> </tr> <tr> <td>12th April 2018</td> <td>2018 Term 1</td> </tr> <tr> <td>28th June 2018</td> <td>2018 Term 2</td> </tr> <tr> <td rowspan="2">Mpaiaja</td> <td>19th Oct 2017</td> <td>2017 Term 3</td> </tr> <tr> <td>26th Mar 2018</td> <td>2018 Term 1</td> </tr> </tbody> </table>	Primary School	Date of meeting	School Term	St Aloysius	5 th Nov 2017	2017 Term 3	29 th Apr 2018	2018 Term 1	1 st July 2018	2018 Term 2	Busiisi	21 st Aug 2017	2017 Term 2	12 th April 2018	2018 Term 1	28 th June 2018	2018 Term 2	Mpaiaja	19 th Oct 2017	2017 Term 3	26 th Mar 2018	2018 Term 1
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Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
(D) Procurement and contract management (Maximum 7 points)	12.	The Municipal LG has publicised all schools receiving non-wage recurrent grants (Maximum 3 points)	Evidence that the Municipal LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards - score 3 points	<ul style="list-style-type: none"> Check the Municipal notice boards to establish if the Education department publicised all schools receiving non-wage recurrent grants for public viewing Check a sample of schools for postings of non-wage recurrent grants 	0	<ul style="list-style-type: none"> The Municipal LG public notice boards did not have a list of all schools receiving non-wage recurrent grants. Nonetheless, all 5 sampled schools, the UPE schools had been tracked on a chart in the head teacher's office.
	13	The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements, to Procurement Unit that cover all	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, 2018 - score 4 points	<ul style="list-style-type: none"> From the Municipal Education Officer (MEO) obtain and review submission to Procurement Unit; From DPU crosscheck submission from MEO 	0	<ul style="list-style-type: none"> Hoima LG Education Department Procurement Plan 2018/2019 was prepared by Inspector of Schools Principal, Charles Kimiri, approved by Head of Department and submitted to Head of the Procurement and Disposal Unit (PDU) on 2 July 2017 which was after the due date of 30th April 2018.

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
		items in the approved Sector annual work plan and budget (Maximum 4 points)				
	14	The LG Education department has certified and initiated payment for supplies on time (Maximum 3 points)	<ul style="list-style-type: none"> Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points 	<ul style="list-style-type: none"> From the CFO obtain a sample of contracts, review and determine whether payment requests were certified and recommended on time 	3	<p>We reviewed the certification and payments in respect of works/supplies to verify whether the department timely (as per contract) certified and recommended suppliers for payment.</p> <p>Supply and payment in respect of MAC East Africa - sale of motor vehicle ISUZU Double Cabin;</p> <ul style="list-style-type: none"> Recommended for payment on time. There was no need for certification in this instance. As per the contract signed between Hoima Municipal Council and MAC East Africa on 19th June 2018, the purchase of the motor vehicle pick up double cabin Isuzu for the Education department is USHS. 152,000,000 which was to be paid in 4 instalments. The initial deposit of USHS. 81,644,460 was to be done upon presentation of delivery note and invoice to Hoima Municipal Council while the remaining balance was to be paid in three equal instalments on a quarterly basis from date of delivery. The supply of the Isuzu Double Cabin Registration plate LG0013-118 was made on 25th July 2018 and request for payment made on same date. The payment request for USHS. 152,000,000 was recommended for payment on 26th July 2018 by Town Clerk. The other procurements for FY 2017/2018 for Education department which were implemented under

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings											
(E) Financial management and Reporting <i>(Maximum 8 points)</i>	15	The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit <i>(Maximum 4 points)</i>	<ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY – 2017/18 (with availability of all four quarterly reports) to the Planner by 15th July for consolidation: score 4 points 	<ul style="list-style-type: none"> From the Planning Unit, obtain and review performance report files From the MEO check annual and quarterly reports for the previous FY (2017/18) 	0	<ul style="list-style-type: none"> For the FY 2017/18, the Planning unit was using PBS. The departmental head for education had access to PBS and input their departmental figures after which the Planner would receive an email notification from the PBS system though there was no evidence of submission. However, we noted that the two quarterly performance reports (quarter 1 and 2) included input from the education department and Hoima MLG annual performance report for the FY 2017/18 was not submitted to MoFPED before the deadline of 30th August 2018. 											
	16	LG Education has acted on Internal Audit recommendations (if any) <i>(Maximum 4 points)</i>	<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 (2017/18) ✓ If sector has no audit query - score 4 points ✓ If 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"> From the Internal Auditor obtain copies of sector audit reports from the internal audit and Management responses for the previous FY (2017/18) 	0	<p>We reviewed the quarterly internal audit reports for the FY 2017/18 and noted that the department has not yet responded to the queries raised by the internal audit hence the score zero as indicated in the table below:</p> <table border="1"> <thead> <tr> <th>Quarter</th> <th>Issues</th> <th>Responses</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Allowances not acknowledged for and no activity reports for school projects, PPV 05115 worth USHS. 980,000</td> <td>Awaiting a response</td> </tr> <tr> <td></td> <td>No inspection report for Q1 FY 2017/18 from Kinimi Charles PPV 05035 worth USHS. 1,342,000</td> <td>Awaiting a response</td> </tr> <tr> <td></td> <td>No assessment report & acknowledgement for funds PPV 05122 worth USHS. 980,000 from Byakagaba</td> <td>Awaiting a response</td> </tr> </tbody> </table>	Quarter	Issues	Responses	1	Allowances not acknowledged for and no activity reports for school projects, PPV 05115 worth USHS. 980,000	Awaiting a response		No inspection report for Q1 FY 2017/18 from Kinimi Charles PPV 05035 worth USHS. 1,342,000	Awaiting a response		No assessment report & acknowledgement for funds PPV 05122 worth USHS. 980,000 from Byakagaba
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			(2017/18) - score 2 points ✓ If all queries are not responded to - score 0			<table border="1"> <tr> <td>2</td> <td>Deogratius Unaccounted for USE grant for Q1 FY 2017/18 term III 2017 worth USHS. 174,462,686</td> <td>Unaccounted for funds reduced to USHS. 122,915,542</td> </tr> <tr> <td>3</td> <td>No back to station report regarding seeking clearance for acquisition of motor vehicle for the education department.</td> <td>Responded</td> </tr> <tr> <td>4</td> <td>Inadequately accounted for funds worth USHS. 7,5120,000</td> <td>Amount accounted for is USHS. 7,060,000.</td> </tr> <tr> <td></td> <td>Unaccounted for USE funds for Q4 FY 2017/18 worth USHS. 386,387,078</td> <td>Awaiting a response</td> </tr> </table>	2	Deogratius Unaccounted for USE grant for Q1 FY 2017/18 term III 2017 worth USHS. 174,462,686	Unaccounted for funds reduced to USHS. 122,915,542	3	No back to station report regarding seeking clearance for acquisition of motor vehicle for the education department.	Responded	4	Inadequately accounted for funds worth USHS. 7,5120,000	Amount accounted for is USHS. 7,060,000.		Unaccounted for USE funds for Q4 FY 2017/18 worth USHS. 386,387,078	Awaiting a response
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	Unaccounted for USE funds for Q4 FY 2017/18 worth USHS. 386,387,078	Awaiting a response																

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
(F) Social and environment safeguards <i>(Maximum 8 points)</i>	17	LG Education Department has disseminated and promoted adherence to gender guidelines <i>(Maximum 5 points)</i>	<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 points 	<ul style="list-style-type: none"> From the MEO obtain evidence on dissemination of sanitation guidelines and awareness raising on how to manage sanitation for girls and PWDs in primary schools 	0	There was no evidence to show that the MLG has issued guidelines on how to manage sanitation for girls and PWDs in primary schools. At the sampled schools, there were no guidelines seen on file or notice boards and at the office of the MEO.
			<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 points 	<ul style="list-style-type: none"> From the sampled schools, check whether the SMC meets the guideline on gender composition - score 1 point 	1	
						<p>The SMC for the sampled schools were duly composed with at least 2 females, following the guidelines in the Education (pre-primary, primary and Post Primary) Act, 2008</p> <ul style="list-style-type: none"> Busisi Primary School – Committee is composed with 3 women and 9 men meeting required minimum at least 2 females on the SMC committee. Hoima Public Primary schools- Committee is composed with 3 women and 9 men meeting required minimum at least 2 females on the SMC committee.

Performance Area	No	Performance Measures	Scoring guide	Assessment Procedure	Score	Detailed assessment findings
	18	LG Education department has ensured that guidelines on environmental management are disseminated and complied with (Maximum 3 points)	<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 3 points 	<ul style="list-style-type: none"> From MEO obtain and review: <ul style="list-style-type: none"> ✓ Circulars to schools ✓ Minutes of meetings with teachers ✓ Sample of schools inspection reports to schools From the Environmental officer obtain and review: Filled screening forms to ascertain whether screening was done and whether risks mitigation plans were developed. From the Environmental officer and CDO obtain and review: Site visit reports to establish whether they checked compliance to the risk mitigation plans 	0	<ul style="list-style-type: none"> <u>Buhanika Primary School</u>- Committee is composed with 4 women and 8 men meeting required minimum at least 2 females on the SMC committee. <p>There was no evidence that LG Education department has ensured that guidelines on environmental management are disseminated and complied with.</p> <p>No meetings were held in which the guidelines were disseminated.</p> <p>There were no also circulars on file at the environmental officer's office communicating environmental management activities to schools.</p> <p>From the 3 sampled schools (Busiisi, Hoirna Public and Buhanika Primary schools), it was established that the schools are not actively involved in environmental management activities.</p>
Total					32	