



THE REPUBLIC OF UGANDA

KYENJOJO

DISTRICT LOCAL GOVERNMENT

**Local Government Performance Improvement
Plan**

2019/20

JUNE 2020

A handwritten signature in blue ink, consisting of a series of loops and a long horizontal stroke.

SIGNATORY PAGE

- I confirm that this plan has been developed jointly in accordance with process described in chapter 1,
- I commit to support the implementation of agreed actions



Chief Administrative Officer
Kyenjojo District Local Gov't

CAO/Town Clerk

Place /date



Chairperson/Mayor

Place /date


DISTRICT CHAIRPERSON
KYENJOJO DISTRICT LOCAL GOV'T







Team Leader of the National Resource Pool / official GoU title

Place /date

Support teams composed of National Resource Pool (NRP) members with representatives from the crosscutting specialized Ministries that have the professional capacity to offer support to core functions of the LG as well representatives from the Ministries of Health and Ministry of Education and Sports have subsequently been deployed by MOLG to assist identified LGs.

1.2 Process for Development of the PIP

This Performance Improvement plan was developed over the period from 22nd to 24th January, 2019 as a collaborative effort between Kyenjojo District Local Government and the members of the National Resource Pool (NRP). The team comprised of the following NRP members:

1.  Eramu Puseal 
2. Nuwagaba Benson N.B
3. JUMA MOSES 
4. Edidah Busungye 

The development of this Performance Improvement Plan is based in the following:

- Analysis of the final and complete version of the Local Government Performance Assessment Report;
- Discussions with staff and political leadership of the local government for identification of underlying causes of underperformance in the Local Government;
- Joint development proposals of actions to undertaken by: the LG; with support from the NRP team; and by other agencies;
- Review by the TPC and executive of draft proposals; and
- Subsequent amendments and signing of the agreed Performance Improvement Plan.



CHAPTER TWO: ACTIONS TO BE UNDERTAKEN BYDLGMC

Issue	Proposed Activity (What)	Modality (How)	Responsible (Who)	When	Output
Accountability Requirements					
There was no evidence provided by the LG on submissions of actions on the Internal Auditor General's and Auditor General's findings for the FY 2017/2018 to the PS/ST.	Quarterly submission of reports will be done as follows; 1st was done and submitted. Q2, and Q3 will be completed and submitted in the 4th Quarter due to Covid 19 effects. Q4 reports will be submitted by July.	Consolidated response from management to be submitted by June, 2020.	CAO	End of June	Final Report Prepared and submitted.
Crosscutting Performance Measures					
No evidence of minutes of the Physical Planning Committee submitted to MoLHUD	Physical Committee has been put in place, meetings are held and will continuously be held and minutes	Quarterly submission of the physical planning committee minutes to	CAO, Physical planner	Quarterly	Quarterly submission of minutes to MoLHUD & Zonal office

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Absence of a Physical Development plan, made the approved infrastructure investments not be consistent with an absent yard Devt stick(physical plan)	submitted to MoLHUD	MOLHUD and Fort portal regional office	CAO, Physical planner	Continuous process	Develop physical development plan for the District
No evidence that the LG has filled all HoDs positions substantively: i.e Works department and Trade Industry and Local Economic	The District has recruited 5 physical planners and engineers to assist in development planning in Town Councils. The CAO has written to the MLHUD and MOLG for support in planning for the District. Follow up Actions to improve on this area will be done.	Source for funding from Central Government & partners to develop a physical plan	CAO, PHRO	By September 2020	Fill all HODs positions substantively
	The District failed to attract the District Engineer. The District Commercial Officer is a new position on the District structure. However, the District will	Advertise and recruit	CAO, PHRO		

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Development dept	advertise in July for the same position.				
No evidence that HoDs had been appraised as per guidelines issued by MoPS during the previous FY: The fig HoDs were not appraised	Appraisals of all heads of Departments will be done within the first two weeks of July, 2020 and the appraisal forms be put on file.	Appraisals will be conducted.	2020 CAO/ PHRO/ HODs	July, 2020	All HODs appraised
No evidence that 100% of the staff recruited during the previous FY had accessed the salary payroll not later than two months after appointment:	All staff recruited to access payroll within a period of two months.	Following the normal procedure of the payroll processing	CAO/PHRO	Within 2 months after recruitment.	All new staff access payroll.
No evidence that 100% of the staff that retired during the previous FY accessed the pension payroll not later than two months after retirement	All retired staff to access pension payroll within a period of two months.	Following the normal procedure of the payroll processing	CAO/PHRO	Within 2 months after retirement	All retired staff access pension payroll.

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<p>The 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 %:</p>	<p>Going forward, declaration of extra revenue collected above the approved budget will be done through normal procedures of supplementary budgets.</p>	<p>Following supplementary budget procedures.</p>	<p>CAO/ CFO</p>	<p>When there is extra or additional revenue source</p>	<p>Supplimentary budget approved, Council minute extract in place.</p>
<p>Some procurements made in previous FY did not adhere to the procurement plan) for the previous FY (other projects like classroom blocks at Barahija, Kyentama primary schools and all the latrines in the various primary schools were not in the plan funds were moved to meet the budget shortfall of Mparo seed school with recommendation from</p>	<p>The procurement plan will always be amended through Council, Contracts Committee whenever changes arise.</p>	<p>Submissions to relevant responsible offices will be done.</p>	<p>CAO/ User Departments.</p>	<p>When need arises</p>	<p>Amended procurement approved and in place.</p>

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<p>the Ministry of Education and Sports. No evidence was however provided with respect to the communication from the Ministry, nor Council Minute approving the movement of the said funds.)</p>					
<p>No evidence that all works projects for the current FY clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration:</p>	<p>Incorporate costs site boards.</p>	<p>During preparation of BOQ</p>	<p>District Engineer and PDU</p>	<p>Continuou and when there is a project.</p>	<p>Costed board incorporated in the BOQ site</p>
<p>No evidence of timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of</p>	<p>There will be timely payments going forward.</p>	<p>After satisfactory documents from Engineers, suppliers and Contractors.</p>	<p>CAO, District Engineer.</p>	<p>Continuou s, whenever there is a request for</p>	<p>Timely payment of Suppliers and Contractors.</p>

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over 2 months:				payment.	
There was evidence of a designated person to coordinate the response to feedback but there was no evidence that he responded to any grievance in the previous FY	Feedback reports will be compiled and executed or responded to.	Document feedback, complaint register	Designated person.	Continuou s	Feedback reports, complaint registers available.
There was no evidence of a specified system for recording, investing and responding to grievances	Feedback reports on grievances will be compiled and executed or responded to.	Document feedback, complaint register	Recording system put in place.	Continuou s	All greivances documented.
No evidence that the HLG had communicated and explained guidelines, circulars and policies issued by the national level to LLGs	Improvement will be put on dissemination of Guidelines, Circulars and Policies.	Through Circulars, acknowledgements registers to be put in place and through meetings; Top Management and TPC	CAO, District Information Officer, Regity, and Planner.	On receipt of circulars, guidelines and policies	Circulars, Guidelines and Policies dessiminated.

Issue	Proposed Activity (What)	Modality (How)	Responsible (Who)	When	Output
<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. However, less than 90 % of previous year's budget was utilized for gender activities/vulnerability/social inclusion. 	To endeavour to implement the budget as approved.	As per planned activities.	CAO, DCDO	By end of each FY	Gender budget received spent.
No evidence of environmental screening and ESMP prepared for the piped water scheme at Kanyegaramire. It was also noted that much as the boreholes drilled and installed in 2018/19 were screened, this was done at the end of the financial year when implementation was	Timely screening of all the projects to be done before implementation.	Environment Officer and Gender Officer to get more involved in screening of all projects before implementation.	Environment Officer and Gender Officer, DEO, DHO, DWO Planner, and DE	At the beginning of every project	All projects screened before commencement.

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winding up.					
No evidence that the Local Government integrated Environmental and Social Management Plans in Bid documents	Incorporate Environmental and Social Management Plans in the Bid documents.	Through BOQs	DE	At the beginning of FY	All BOQs incorporate environment and Social safeguards.
No land ownership documentation provided for Kanyegaramire piped water scheme, and Nyankwanzi Health Centrell.	District to secure consent from the communities, families, foundation bodies (e.g churches) that donated the land.	Consent letters or copies of titles and agreements to be secured before project execution.	CAO, District Chairperson, Physical Planner, Surveyor and DE	Before projects take off.	Consent letters, titles and agreements in place.
For all the sampled projects, environmental clearance certificates were provided. All the certificates were in place however not stamped nor dated. Also there were social clearance certificates	Stamping all documents to be done.	Avail stamped and dated reports.	Environment Officer and CDO	Whenever a report is procuded	Stamped and dated reports in place.

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provided by the CDO.					
There was no evidence that payment to contractors included prior environmental and social clearance. The payment certificates sampled did not have clearance signatures from the Environmental Officer and CDO. Also the payment vouchers did not have Environmental and Social clearance certificates attached.	Clearance signatures will be executed from responsible officers (EO & CDO). Certificates shall be attached.	Project reports prepared by responsible officers.	EO and CDO	On every project payment.	Clearance signatures and Certificates attached.
No evidence of environmental and social monitoring for Kihumuro Primary School, drilling and installation of boreholes and Kanyegamire piped water scheme.	The Officers shall be preparing environmental and social monitoring reports.	After field visits to the projects.	EO & CDO	Whenever project activity monitoring is done	Environmental and Social monitoring reports done.

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Educational Performance					
No Evidence that the LG had 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)	Harmonise the payroll with the departmental staff list in the PBS. Deployment of substantive head teacher in every school	The payroll shall tally with the lists in the PBS system. Recruitment of substantive head teachers.	PHRO and DEO DSC, CAO, PHRO, DEO	Every month Whenever there is a gap	Harmonised staff lists and payroll. Substantive Head teachers recruited and deployed.
The DLG Education department filled 1,136 teachers out of 1,688 district ceiling. Overall, the LG filled the position of teachers up to 67.2%, below the minimum scoring range of 80-99%.	Adverts of 11 teachers have been placed and recruitment expected in Q1 FY 2020/2021. Continuous lobbying for wage enhancement will be done by district.	External Adverts has been placed on 19th of June, 2020. Written justifications will be submitted to MoPS and MoFPED.	CAO, DEO, PHRO	1st quarter, FY 2020/21	Teachers recruited and deployed.
No evidence that the LG Education department ensured that all head teachers were appraised and had appraised all	The DCAO to follow up head teachers' appraisals with the sub county chiefs.	DCAO to write to all sub county chiefs to appraise head teachers.	DCAO, DEO, PHRO	By December	Head teachers appraised.

Issue	Proposed Activity (What)	Modality (How)	Responsible (Who)	When	Output
<p>school inspectors during the previous FY(The sampled teachers were not appraised in year2018.</p>					
<p>No evidence that all licenced or registered schools had been inspected at least once per term and reports produced:(Overall, the department inspected a total of 383 schools out of 906, which translates to 42% coverage.)</p>	<p>All school will inspected at least once every term</p>	<p>The DIS will provide a report per term.</p>	<p>DIS and area Inspectors</p>	<p>Termly</p>	<p>Inspection reports produced.</p>
<p>No evidence that the department discussed the school inspection reports as part of the school inspection process.</p>	<p>Departmental Meeting to discuss inspection reports and file minutes.</p>	<p>Departmental meetings to be held and minutes recorded.</p>	<p>DEO, DIS</p>	<p>Termly</p>	<p>Inspection Reports and Minutes in place</p>

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<p>There was evidence that the inspection reports for two out of three terms were submitted to DES: On 20/11/2019 for Term II/2019, On 27/8/2019 for Term I /2018. However, there was no acknowledgement receipt for submission of term III/2018 report.</p>	<p>Harmonisation of issue will be required on the calendar versa Financial year.</p>	<p>This is a policy matter that requires following similar cycles of action in planning and execution of duties.</p>	<p>PS/MoLG, PS/MoES</p>	<p>CAO to consult PS on the matter</p>	<p>Harmonised planning cycle.</p>
<p>A sample school list for 4 schools was compared with the PBS/ EMIS report for consistent & accurate. 2 out of 4 were not consistent and inaccurate.</p>	<p>The EMIS nos. coding of 2001 are different from the coding of 2009. This brings the discrepancy and consistence.</p>	<p>No change of action expected.</p>	<p>CAO and DEO</p>	<p>End of financial Year</p>	<p>Proper Coding of schools.</p>
<p>Enrolment data for all schools should be consistent with EMIS report and PBS: (The enrollment data on the school list was only 1</p>	<p>Pupils migrate from school to school cause the inaccuracy and inconsistency in enrolment.</p>	<p>Capture enrolment at the beginning and end of term for record and data</p>	<p>DIS and Area Inspector of schools</p>	<p>Termly</p>	<p>Harmonised enrolment data.</p>

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<p>out of 5 accurate and consistent.</p>		management.			
<p>• Evidence that the sector had submitted procurement input to Procurement Unit that covered all investment items in the approved Sector annual work and budget on time by April 30: (The department submitted a list of procurement input to the Procurement Unit on 15/7/2019, after the 30th April deadline)</p>	<p>Submit the procurement plan timely and as per PPDA guidelines.</p>	<p>The department will prepare and submit procurement plan in time.</p>	DEO	By 30th April	Timely procurement plans submitted.
<p>No evidence that the department submitted the annual performance report for previous FY (performance report for the previous FY (with availability of all four quarterly reports) to the</p>	<p>Timely submission of the annual performance report.</p>	<p>Prepare, submit annual performance reports to the planner and retain record.</p>	DEO	Quarterly	Annual Performance reports submitted.

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Planner by 15th of July for Consolidation)					
No evidence provided by the LG Education Department on the status of implementation of all Internal Audit findings under the Department FY 2018/19.	Submit implementation status of Internal Audit findings for the department.	Prepare copies of responses to Internal Audit	DEO, DIS	Quarterly	Copies of responses to IA available.
No evidence that the Education department in collaboration with gender department issued and explained guidelines on the management of sanitation for girls and PWDs in the primary schools.	Ensure harmonisation and collaboration between Education and CBS in management of girls' sanitation and the PWDs.	Use of senior women and men teachers to explain the guidelines to pupils.	DEO, DIS, HTs, DCDOs and Special Needs Education (SNE)	Termly	Sanitation guidelines in place, executed and PWDs issues acted upon
There was evidence that the SMC gender composition in 3 out of 5 sampled schools did not meet the minimum requirement of 1/3	Efforts are going to be made to implement the gender composition of SMCs	Dessiminate guidelines to all schools.	CAO, DEO	Termly	The Gender requirement of SMCs composition adhered to.

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(33%)					
No evidence that the department issued guidelines on environmental management	Guidelines on Environmental Management to be issued.	Use of Compound Masters to implement environmental management issues.	DEO, HTs and Compound Masters.	Termly	Guidelines on environmental management implemented.
Health Performance					
The District has 16 Health units, review of the 10 Health In-charge's files, revealed that 02 health in-charges were appraised.	To appraise health in-charges	Conduct appraisal Meetings with Health In-Charges	DHO, Sub Chiefs	By July	Appraisal conducted.
No evidence that the DHO held meetings with health facility in-charges to explain the guidelines, policies, circulars issued by the national level.	Guidelines, policies, circulars to issued	Meetings to be held to explain guidelines, policies and circulars	DHO	Quarterly	Guidelines, policies and circulars disseminated and explained.

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No evidence that the DHT supervised Kyenjojo Hospital or Kyarusozı HC IV in the FY 2018/19.	Regular supervision to be conducted	Supervision teams to be conducted and minutes filed.	DHO	Quarterly	Supervision reports compiled.
The PAT received only 3 supervision reports (18/12/2018, 15/02/2019 & 14/06/2019) conducted by Kyenjojo Health Sub District and 1 supervision (20/06/2019) report by DHT none had reports for the 4 quarters.	Supervision reports to be prepared and filed.	Copies of supervision reports to be prepared and shared with Health Sub district in charges.	DHO, HSD in charges	Quarterly	Supervision reports prepared and shared.
No evidence that all the 4 quarterly reports had been discussed and used to make recommendations (in each quarter) for corrective actions during the previous FY:	Quarterly reports will be discussed and used to make recommendation.	Through Meetings	DHO	Quarterly	Minutes and recommendations prepared and on file.

Issue	Proposed Activity (What)	Modality (How)	Responsible (Who)	When	Output
No evidence that recommendations are followed up.	Recommendations to be followed up	Through meeting and support supervisions.	DHO and Bio - staffitian	Quarterly	Follow reports up in place.
The sector had to submit input of 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 (The Health department submitted the procurement plan to PDU on 19/06/2019)	Timely submission of Procurement Plan by the department.	Adhere to guidelines and PPDA	DHO	By 30 th April	Procurement Plans submitted.
There was no evidence that the sector submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY	Timely submission of procurement request form 5	Adhere to PPDA guidelines	DHO	Within the 1 st Quarter	Procurement form 5 filled and submitted in time.
No evidence that the department submitted	Timely Annual submission of performance	Prepare annual reports through	DHO, Planner	By July	Annual performance




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the annual performance report for the previous FY 2018/2019 and all quarterly reports to Planner during FY 2018/2019: (Mid July)	report to the planner.	PBS system and initiate reports and file			reports prepared and filed.
No evidence provided on the status of implementation of all Audit Report findings under the Health Department	Audit recommendations to implemented by the department.	By giving responses and acting upon each audit recommendation.	DHO, Accountant	Quarterly	Audit recommendations addressed.
The HUMC in Kyenjojo District did not meet the gender composition as per guidelines.(i.e.minimum 30% women)	Efforts are going to be made to implement the gender composition of HUMCs	Desseminate guidelines to all HCs.	CAO, DHO	By September	Gender Composition guidelines adhered to.
Water Performance					
No evidence that the districtWater department implemented	Alloacte more water sources to sub counties above 60%.	Planning and Budgeting process to consider water projects. Involve	Planner, DWO	Beginning of FY	Increase of safe water coverage below the

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budgeted water projects in the targeted subcounties with safe water coverage below the district average in the previous FY.(Only 3 out of 9 water facilities were implemented in these sub counties which came to about 33%.)		other stakeholders and partners to help in financing the water projects.			district average.
No evidence that the district had submitted accurate/consistent data for that current FY:	District to submit updated data and make follow ups with the Ministry.	Consistent data and cleaning and follow ups	DWO	Beginning of FY and done quarterly	Accurate verified data submitted
No consistency for water facilities on both MIS reports and PBS	Ensure consistency in the MIS and PBS Reports	Do consistency checks on MIS and PBS system	DWO	Beginning of FY and done quarterly	Accurate data in place.
No evidence that the DWO timely (as per contract) certified and recommended suppliers for payment within the required	Ensure that suppliers request for payments is verified with the actual done timely.	Check the work the contractor is demanding if its due.	DWO	Whenever there is request for payments	Certification and recommendations of payments done

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time.					timely.
No evidence that the department submitted the annual performance report for the previous FY 2018/2019 and all quarterly reports (mid July)	Copies of submitted reports will be available on file.	Compile annual and open files of quarterly reports.	DWO	Every quarter	Annual and Quarterly reports produced.
No evidence that screening forms of the VIP lined latrine Constructed at Mukunyu trading centre and the water piped scheme at Kanyegaramire	Do timely screening and file evidence before implementation of the project.	Produce screening and environmental management plan report.	DWO & SEO	Beginning of every project	Screening and environmental management plan reports in place.
No evidence that monitoring reports showed follow up on the recommended mitigation measures.	Mitigation measures will be followed up and included in the monitoring reports	Monitoring the implementation of the work or project	DWO, SEO	During implementation of every project	Monitoring reports in place.

