



## Local Government Performance Assessment

Abim District

(Vote Code: 573)

<b>Assessment</b>	<b>Scores</b>
Accountability Requirements	17%
Crosscutting Performance Measures	31%
Educational Performance Measures	40%
Health Performance Measures	70%
Water Performance Measures	31%

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"> <li>• 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"> <li>o If LG submitted before or by due date, then state 'compliant'</li> <li>o If LG had not submitted or submitted later than the due date, state 'non-compliant'</li> </ul> </li> <li>• From the Uganda budget website: <a href="http://www.budget.go.ug">www.budget.go.ug</a>, check and compare recorded date therein with date of LG submission to confirm.</li> </ul>	<p>Abim District LG submitted the Final Performance Contract on 7th August 2018 as per the submission schedule of MoFPED, which was after the deadline of 1st August 2018.</p> <p>Note: The PFMAA LG Budget guidelines require the submission to be by 30th June. However, this date was changed to 1st August 2018 as per the request from MoFPED.</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"> <li>• From MoFPED's inventory of LG budget submissions, check whether: <ul style="list-style-type: none"> <li>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.</li> </ul> </li> </ul>	<p>Abim District Local Government submitted a Budget for FY 2018/2019; including a Procurement Plan for FY 2018/2019 to MoFPED on 7th August 2018 (and approved on the same date) as per the submission schedule of MoFPED.</p> <p>The submission was done after the deadline of 1st August 2018.</p> <p>Note: The PFMAA LG Budget guidelines require the submission to be by 30th June. However, this date was changed to 1st August 2018 as per the request from MoFPED.</p>	<p>No</p>
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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"> <li>• If LG submitted report to MoFPED in time, then it is compliant</li> <li>• If LG submitted late or did not submit, then it is not compliant</li> </ul>	<p>Abim DLG had NOT submitted the Annual Budget Performance Report for the FY 2017/2018.</p>	<p>No</p>
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<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"> <li>• 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).</li> <li>• If LG submitted late or did not submit at all, then it is not compliant.</li> </ul>	<p>Abim DLG had NOT submitted all the four Quarterly Budget Performance Reports for FY 2017/2018 to MoFPED as per the Submission Schedule of MoFPED. However, the Planner / Abim DLG availed printouts of three quarterly performance reports that indicated dates of submission to MoFPED as 9th August 2018 (i.e. for Q1) and 13th September 2018 (i.e. for Q2 and Q3). At the time of assessment, the quarter four report had not been submitted to MoFPED.</p> <p>The reports for all quarters were NOT submitted by the end of the FY as required by the PFMA Act, 2015 – Section 21 (3).</p>	<p>No</p>
<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 lines with applicable laws.</p>	<p>From MoFPED's Inventory/record of LG submissions of statements entitled "Actions to Address Internal Auditor General's findings",</p> <p>Check:</p> <ul style="list-style-type: none"> <li>• If LG submitted a 'Response' (and provide details), then it is compliant</li> <li>• If LG did not submit a 'response', then it is non-compliant</li> <li>• If there is a response for all –LG is compliant</li> <li>• If there are partial or not all issues responded to – LG is not compliant.</li> </ul>	<p>(A) No evidence that the LG had provided information to the PS/ST on the status of implementation of Internal Auditor General's findings for FY 2016/2017 contrary to PFMA 11 2g hence not possible to establish number of queries raised and cleared.</p> <p>(B) The Accounting Officer submitted information to PS/ST on 24th /4/2018 Ref. CR/ABM/103/5 regarding the status of implementation of the Office of the Auditor General's findings for FY 2016/2017.</p> <p>The number of queries raised there of were 4 all of which were cleared by the Accounting Officer.</p>	<p>No</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.</p>		<p>Abim DLG obtained Unqualified Audit Opinion for FY 2017/18</p>	<p>Yes</p>

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"> <li>• A functional Physical Planning Committee in place that considers new investments on time: score 1.</li> </ul>	<ul style="list-style-type: none"> <li>• The CAO / Abim DLG nominated members to the District Physical Planning Committee (as per letter Ref: CR/ABM/154 dated 10th February 2015). However, the committee was non-functional – no meetings were ever held in FY 2017/2018 up to the time of assessment.</li> <li>• A registration book in which submitted plans for new investments should have been recorded was not availed at the time of assessment.</li> </ul> <p>Therefore, it was not possible to ascertain whether the committee considers new investments in time or not.</p>	0
<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"> <li>• Evidence that district/ MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD score 1.</li> </ul>	<p>The district had not submitted any sets of minutes of Physical Planning Committee to the MoLHUD, given that the DPPC was not functional at the time of assessment.</p>	0

<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"> <li>• All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0</li> </ul>	<p>Abim district did not have a physical development plan at the time of assessment. Therefore, it was not possible to ascertain whether all infrastructure investments were consistent with the approved Physical Development Plan, which was non-existent.</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"> <li>• Action area plan prepared for the previous FY: score 1 or else 0</li> </ul>	<p>There were no area action plans / local physical development plans prepared during FY 2017/2018.</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"> <li>• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.</li> </ul>	<p>Abim District held a budget conference on 25th January 2018 (as per invitation letter Ref: CR/ABM/212 dated 18th January 2018 to all stakeholders). However the budget conference report was not availed.</p> <p>Therefore, it was not possible to ascertain whether the priorities in AWP for FY 2018/2019 were based on the outcomes of budget conference.</p>	<p>0</p>
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<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• 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.</li> </ul> <p>Score 1.</p>	<p>The capital investments in the Abim DLG Approved Annual Work Plan and Budget for FY 2018/2019 were derived from the Five-Year Development Plan (2015/2016 – 2019/2020). For example, under education the investments in the District Local Government AWP for FY 2018/2019 (Pages 54); were derived from the DDP – Chapter Four: Development Plan Implementation Strategy - Page 102).</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"> <li>• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2.</li> </ul>	<p>Project profiles were not prepared by the district.</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"> <li>• 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.</li> </ul>	<p>The district last prepared an Annual Statistical Abstract with gender disaggregated data for FY 2016/2017, and had not prepared any other since.</p>	<p>0</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"> <li>• 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</li> </ul>	<p>The infrastructure projects implemented during FY 2017/2018 (as indicated in the Local Government Quarterly Performance Report (Quarter 3) for 2017/2018 were derived from the AWP and Budget for FY 2017/2018 approved by the District Council.</p> <p>For example, Borehole drilling and rehabilitation (Pg.23 of Abim LG Performance Report – Q3) was derived from the AWP and Budget for FY 2017/2018 approved by the District Council (Page 58).</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"> <li>• Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY.</li> </ul> <ul style="list-style-type: none"> <li>o 100%: score 4</li> <li>o 80-99%: score 2</li> <li>o Below 80%: 0</li> </ul>	<p>The contracts register availed at the time of assessment lacked vital information on the completion status of each project by the 30th June 2018.</p> <p>Therefore, it was not possible to establish the completion status of investment projects implemented in FY 2017/2018 as per work plan.</p>	<p>0</p>
<p>The LG has executed the budget for construction of investment projects and O&amp;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"> <li>• Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2</li> </ul>	<p>The contracts register availed at the time of assessment lacked vital information on the actual expenditure on each project by the 30th June 2018.</p> <p>Therefore, it was not possible to ascertain completion of investment projects implemented in FY 2017/2018 WITHIN approved budget -. Max. 15% plus or minus of original budget .</p>	<p>0</p>
<p>The LG has executed the budget for construction of investment projects and O&amp;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"> <li>• Evidence that the LG has budgeted and spent at least 80% of the O&amp;M budget for infrastructure in the previous FY: score 2</li> </ul>	<p>Abim DLG budgeted UGX 89,613,166 on O&amp;M during 2017/2018, and spent UGX 58,091,000 (i.e. GL Account Nos. 228002 &amp; GL Account Name: Maintenance – Vehicles; GL Account Nos. 228003 &amp; GL Account Name: Maintenance – Machinery; GL Account Nos. 228004 &amp; GL Account Name: Maintenance – Other).</p> <p>That was 64.8% of the budget for O&amp;M as per Draft Final Accounts for the Year Ended 30th June 2018.</p>	<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"> <li>• Evidence that the LG has filled all HoDs positions substantively: score 3</li> </ul>	<p>There were 10 HoD at U1 salary scale in the approved establishment / organisation structure. Only two were substantively appointed, the D/CAO and the DEO as per their appointment letters dated 26th June 2017 and 1st March 2008, respectively. The rest were performing duties of HoD as follows:</p> <ol style="list-style-type: none"> <li>1 The duties of the CFO were being performed by an officer whose substantive appointment was Senior Finance Officer U3, as per his appointment letter dated 1st March 2003</li> <li>2 The duties of the District Engineer were being performed by an officer whose substantive appointment Senior Engineer as per the appointment letter dated 1st January 2002</li> <li>3 The duties of the District Natural Resources Officer were being performed by a caretaker officer whose substantive appointment was Community Development Officer U4.</li> <li>4 The duties of the DHO were being performed by an officer whose substantive appointment was Medical Officer Grade 1 salary scale U4 as per the appointment letter dated 1st April 2016 and formally assigned the duties of DHO as per the latter dated 1st December 2016</li> <li>5 The duties of the D/CDO were being performed by an officer whose substantive appointment was CDO U4</li> <li>6 The duties of the District Production Officer were being performed by an officer whose substantive appointment was Principal Entomologist U2, as per the appointment letter CR/ABM/154 and formally assigned the duties of D/NRO as per the latter dated 2nd July 2007</li> <li>7 The Duties of the District Planner were being performed by an Officer whose substantive appointment was Senior Planner U3, per the appointment letter dated 3rd March 2008 and formally assigned the duties of District Planner as per the latter dated 28th June 2012</li> <li>8 The Duties of the District Commercial Officer were being performed by an Officer whose substantive appointment was Commercial Officer U4, as per the appointment letter dated 12th May 2014</li> </ol>	<p>0</p>
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<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2</li> </ul>	<p>There was no evidence that the ten HoD were appraised</p>	<p>0</p>
<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100 % of staff submitted for recruitment have been considered: score 2</li> </ul>	<p>Twenty three vacant positions were submitted to the DSC for recruitment of new employees for the FY 2017/18 on 3rd October 2017, as per the letter CR/ABM/156 as follows;</p> <ul style="list-style-type: none"> <li>? Nursing Officers            3</li> <li>? Pharmacist                    1</li> <li>? Health Educator            1</li> <li>? Enrolled Nurse              1</li> <li>? Education Assistants    17</li> </ul> <p>They were considered during the DSC meeting held from 26th February to 2nd March 2018 minute no, 16/25/2ADSC/26/2/18</p>	<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"> <li>• Evidence that 100 % of positions submitted for confirmation have been considered: score 1</li> </ul>	<p>Thirteen (13) names were submitted to the DSC on 12th February 2018 as per reference letter CR/ABM/of 12th February 2018. They were all considered during the DSC meeting held from 26th February to 2nd March 2018, minute no.CR/ABM/122/5</p>	<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"> <li>• Evidence that 100 % of positions submitted for disciplinary actions have been considered: score 1</li> </ul>	<p>No disciplinary action cases were submitted</p>	<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"> <li>• 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</li> </ul>	<p>The district recruited twenty three (23) new employees during the month of March 2018 as per the minutes of the DSC meeting held from 26th February to 2nd March 2018. They all accessed the pay role during the month of May 2018 within the stipulated timeframe.</p> <p>The recruitment list was crosschecked against the May 2018 IPPS payroll.</p>	<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"> <li>• 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</li> </ul>	<p>There was no evidence that the five (5) employees who retired accessed the retirement payroll within the stipulated timeframe</p>	<p>0</p>

Revenue Mobilization

<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"> <li>• 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.</li> <li>• If the increase is from 5% -10 %: score 2.</li> <li>• If the increase is less than 5 %: score 0.</li> </ul>	<p>Total of OSR for FY 2016/2017 Shs. 119,244,701 (Excluding disposal of Assets) Source: Final Accounts FY 2016/2017 page No.11</p> <p>Total of OSR for FY 2017/2018 Shs.90,545,050 (Excluding disposal of Assets) Source: Draft Final Accounts FY 2017/2018 page No. 11</p> <p>Decrease Shs. 28,699,651</p> <p>Percentage -24%</p> <p>Workings: <math>28,699,651/119,244,701 \times 100 = -24\%</math></p> <ul style="list-style-type: none"> <li>• The District LG OSR decreased by -24% from Shs 119,244,701 in FY 2016/2017 to Shs.90,545,050 in FY 2017/2018 excluding disposal of Assets. This decrease was attributed to the following factors:</li> <li>• The major source of revenue of 2% development tax chargeable on contractors, which had fetched the District Shs. 52,344,722 and Shs. 57,448,776 in FY 2015/2016 &amp; 2016/2017 respectively was scrapped from the budget in FY 2017/2018 after being queried by the Office of the Auditor General in FY 2016/2017.</li> </ul>	<p>0</p>
<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"> <li>• 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.</li> </ul>	<p>Total Local Revenue Planned/Budgeted for FY 2017/2018 was Shs.207,916,138 (As per original budget for FY 2017/2018) Source: Draft Final Accounts for FY 2017/2018 page No. 7.</p> <p>Total Local Revenue collected during FY 2017/2018 was Shs. 90,545,050. Source: Draft Final Accounts for FY 2017/2018 page No. 7.</p> <p>The budget realisation fell short by 56.5% of what had been planned in the original budget for FY 2017/2018.</p> <p>Workings: <math>90,545,050/207,916,138 \times 100 = 43.5\%</math></p> <p>Therefore budget realisation/ratio was: <math>100\% - 43.5\% = 56.5\%</math></p> <p>This was as a result of the following:</p> <ul style="list-style-type: none"> <li>• The LG had planned to sell boarded off assets which failed due to delayed valuation.</li> <li>• The LG had planned to sell the District land which reclaimed by the local people</li> <li>• The LG had planned to open a cattle market which failed due quarantine.</li> </ul>	<p>0</p>

<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2</li> </ul>	<p>Local Revenue collections subjected to sharing with LLGs was Shs. 42,079,950 in respect of Local Service Tax deducted from District staff (As at 30/06/2018). Source: Draft Final Accounts FY 2017/2018 page (Annex to Trial Balance)</p> <p>Status of compliance:</p> <p>There was evidence that the DLG remitted Shs. 11,000,000 to Abim TC leaving a balance of Shs.31, 079,950 which was subject to sharing between the District and the seven (07) Sub-counties at a ratio of 35% to 65%.</p> <p>However, the District retained all the Shs. 31,079,950 and did not remit anything to the Sub-counties contrary to the provisions in the LGA Cap 243 as amended section 85 (4) which requires the district to remit 65% to LLGs and retain 35%.</p>	<p>0</p>
<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>Total expenditure on Council allowances and emoluments during FY 2017/2018 was Shs. 50,480,000.</p> <p>Percentage was 42%</p> <ul style="list-style-type: none"> <li>• The District spent Shs. 50,480,000 in FY 2017/2018 on Council allowances and emoluments derived from Shs. 119,244,701 collected in FY 2016/2017. Source: Draft Final Accounts for FY 2017/2018 page No. (Annex to Trial Balance)</li> <li>• This was equivalent to 42% of OSR for FY 2016/2017 over and above the recommended 20% contrary to the LGA Cap 243 as amended First Schedule 4</li> <li>• The District did not seek authority from the Minister of Local Government to spend beyond the recommended maximum of 20%</li> </ul>	<p>0</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"> <li>• 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</li> </ul>	<p>The district did not have a Senior Procurement Officer, duties were being performed by a Procurement Officer as per the appointment letter dated 12th September 2016</p>	<p>0</p>
<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1</li> </ul>	<p>The Abim LG TEC conducted the evaluation of all projects under selective bidding on 8th February 2018 and submitted the reports to the LG Contracts Committee for further action. The district did not implement any project awarded under open bidding. The following projects were evaluated;</p> <ol style="list-style-type: none"> <li>1. A passenger shade at Taxi park in Abim Town council worth 24, 616, 250 (selective bidding)</li> <li>2. A pit latrine at Kanu PS worth 9, 814. 650. (selective bidding)</li> <li>3. Administration block at Lotuke primary school worth 23, 116, 790 (selective bidding)</li> <li>4. Administration block at Nyakwae sub-county worth 24,000,000 (selective bidding)</li> <li>5. A 3 stances pit latrine at Morelem Girls PS worth 12, 500,000 (selective bidding)</li> </ol>	<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"> <li>• Evidence that the Contracts Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1</li> </ul>	<p>The LG Contracts Committee sat on 9th March 2018 and considered the recommendations of TEC. The Contracts Committee based its decisions to award contracts for projects under Selective domestic bidding on the recommendations of TEC. This was evidenced by minutes of Contracts Committee under minute number 04/cc/09/03/17-18. The following projects were awarded;</p> <ol style="list-style-type: none"> <li>1. A passenger shade at Taxi park in Abim Town council worth 24, 616, 250 (selective bidding)</li> <li>2. A pit latrine at Kanu PS worth 9, 814. 650. (selective bidding)</li> <li>3. Administration block at Lotuke primary school worth 23, 116, 790 (selective bidding)</li> <li>4. Administration block at Nyakwae sub-county worth 24,000,000 (selective bidding)</li> <li>5. A 3 stances pit latrine at Morelem Girls PS worth 12, 500,000 (selective bidding)</li> </ol>	<p>1</p>
<p>The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.</p> <p>Maximum 2 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2</li> </ul>	<p>The District procurement and Disposal plan for FY 2018/2019 was still being prepared by the time of Assessment so there was no way of ascertaining whether all the infrastructure projects were covered.</p> <p>The LG made procurements for FY 2017/2018 in adherence to the procurement plan.</p>	<p>0</p>

<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/ infrastructure by August 30: score 2</li> </ul>	<p>The district had not prepared any bid documents for infrastructure/investment projects as the procurement plan itself was not finalised. Some key departments like health and education were yet to submit their procurement plans to the PDU by the time of assessment</p>	<p>0</p>
<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2</li> </ul>	<p>The district did not have an updated Contract register as the provided Contract register book did not show detailed information about the executed contracts. There was no information about the project status, amount paid and outstanding balance. There were however complete procurement files for all projects executed in the previous year.</p>	<p>0</p>

<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects):</li> </ul> <p>score 2.</p>	<p>The LG adhered with procurement thresholds for the projects implemented in 2017/18 FY. There was no project worth 50 million and above and therefore all the projects were awarded through Selective domestic bidding. This was evidenced through the following awarded projects;</p> <ol style="list-style-type: none"> <li>1. A passenger shade at Taxi park in Abim Town council worth 24, 616, 250 (selective bidding)</li> <li>2. A pit latrine at Kanu PS worth 9, 814. 650. (selective bidding)</li> <li>3. Administration block at Lotuke sub-county worth 23, 116, 790 (selective bidding)</li> <li>4. Administration block at Nyakwae sub-county worth 24,000,000 (selective bidding)</li> <li>5. A 3 stances pit latrine at Morelem Girls PS worth 12, 500,000 (selective bidding)</li> </ol>	<p>2</p>
<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates</li> </ul> <p>for all projects based on technical supervision: score 2</p>	<p>The works projects implemented in 2017/18 were all implemented by the lower local governments and none had an interim certificate and this made the verification of payments difficult since the LLGs were the implementers of all the projects mentioned in the performance measure 14 above .</p>	<p>0</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"> <li>• 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</li> </ul>	<p>There were no projects under implementation in 2018/2019 and all the visited sampled projects did not have site boards</p>	<p>0</p>
<p>Financial management</p>			

<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4</li> </ul>	<p>The LG had been rolled on IFMS in FY 2016/2017 and the monthly bank reconciliations were being generated on the system.</p> <p>There was no evidence of print-outs of updated monthly bank reconciliations on file at the time of assessment and it was not possible to walk through the IFMS to track the monthly bank reconciliations due to network challenges.</p>	<p>0</p>
<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• If the LG makes timely payment of suppliers during the previous FY <ul style="list-style-type: none"> <li>– no overdue bills (e.g. procurement bills) of over 2 months: score 2.</li> </ul> </li> </ul>	<p>The LG executed few contracted works due to budgetary constraints. However, there was evidence of timely payment of contractors during FY 2017/2018 as indicated below:</p> <ul style="list-style-type: none"> <li>• Recommendation to pay M/s Ebowa Investment Ltd Shs. 481,826,562 for construction of Morulem Pipes Water System under DWSCG &amp; PRDP funding 5/1/2018 was paid on 5/1/2018 – same day.</li> <li>• Recommendation to pay M/s Ebowa Investment Ltd the balance of Shs. 23,953,251 on certificate No. 7 for construction of Morulem Pipes Water System &amp; PRDP funding on 17/1/2018 was paid on 19/1/2018 within 2 days.</li> </ul>	<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"> <li>• Evidence that the LG has a substantive Senior Internal Auditor: 1 point.</li> <li>• LG has produced all quarterly internal audit reports for the previous FY: score 2.</li> </ul>	<p>The LG had a substantive Principal Internal Auditor (Otyang Joel Romwald) appointed by the District Service Commission on 1st /2/2008 under Min. No. 27/2008 Ref CR/156/3</p>	<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"> <li>• LG has produced all quarterly internal audit reports for the previous FY: score 2.</li> </ul>	<p>The LG produced all the 4 quarterly internal audit reports for FY 2017/2018 as follows:</p> <ul style="list-style-type: none"> <li>• 1st quarter dated 30/11/2017 Ref. AUD/252/2.</li> <li>• 2nd quarter dated 14th /2/2018 Ref. AUD/252/2.</li> <li>• 3rd quarter dated 30th/4/2018 Ref. AUD/252/2.</li> <li>• 4th quarter dated 7th /8/2018. AUD/252/2.</li> </ul> <p>They were all addressed to the District Chairperson and copied to LGPAC, CAO amongst others.</p>	<p>2</p>
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<p>Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries from all quarterly audit reports: score 2.</p>	<p>The LG failed to avail evidence of having provided information to the Council and LGPAC on the status of implementation of internal audit findings for FY 2017/2018 from all the 4 quarterly internal audit reports.</p>	<p>0</p>
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• 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.</li> </ul>	<p>The 4 quarterly internal audit reports for FY 2017/2018 were submitted to the LG Accounting Officer and LGPAC on the same dates as indicated below:</p> <ul style="list-style-type: none"> <li>• 1st quarter dated 30/11/2017 Ref. AUD/252/2.</li> <li>• 2nd quarter dated 14th /2/2018 Ref. AUD/252/2.</li> <li>• 3rd quarter dated 30th/4/2018 Ref. AUD/252/2.</li> <li>• 4th quarter dated 7th /8/2018. AUD/252/2.</li> </ul> <p>However, there was no evidence of the LGPAC having reviewed and followed – up any of the 4 quarterly internal audit reports for FY 2017/2018. In addition there were no LGPAC reports to Council.</p>	<p>0</p>

<p>The LG maintains a detailed and updated assets register Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>The LG had been rolled on IFMS in FY 2016/2017 and the assets register was being maintained on the system.</p> <p>However, there was no manual assets register at the time of the assessment to enable comparison with the recommended format and up-datedness.</p> <p>Tracking the assets register on the system was not possible due to the following:</p> <ul style="list-style-type: none"> <li>Not possible to walk through IFMS to track the assets register due to network challenges.</li> </ul>	<p>0</p>
<p>The LG has obtained an unqualified or qualified Audit opinion Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY:</p> <ul style="list-style-type: none"> <li>Unqualified audit opinion: score 4</li> <li>Qualified: score 2</li> <li>Adverse/disclaimer: score 0</li> </ul>	<p>Abim DLG obtained Unqualified Audit Opinion for FY 2017/18</p>	<p>4</p>
<p>Governance, oversight, transparency and accountability</p>			
<p>The LG Council meets and discusses service delivery related issues Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>The District Council of Abim met and discussed service delivery related issues. For example:</p> <ul style="list-style-type: none"> <li>Min. No.05/ADC/5/12/9/17 – Laying of Abim District Local Government Alcohol Consumption and Sale Control Bill, 2017 (Minutes of Abim District Council meeting held on 12th September 2017).</li> <li>Min. No.05/ADC/5/12/9/17 – Laying of Abim District Local Government Alcohol Consumption and Sale Control Bill, 2017 (Minutes of Abim District Council meeting held on 12th September 2017).</li> </ul>	<p>2</p>

<p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 1.</li> </ul>	<p>The CAO assigned Mr. Olwit Nelson (ACAO / Abim) to coordinate response to feedback (grievance / complaints) and respond to feedback and complaints. There was no letter of appointment availed for verification</p>	<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"> <li>• 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</li> </ul>	<p>The district had NOT specified a system for recording, investigating and responding to grievances. At the time of assessment there was no book for recording complaints / grievances.</p>	<p>0</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"> <li>• The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2</li> </ul>	<p>The district had not published the LG Payroll and Pensioner Schedule on public notice boards at the Abim district headquarters. The pay roll on the notice board was for January 2018.</p>	<p>0</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the procurement plan and awarded contracts and amounts are published: score 1.</li> </ul>	<ul style="list-style-type: none"> <li>• A 'Procurement Notice' was said to have been published in the New Vision newspaper (of 9th August 2018). The Procurement and Disposal Unit did not avail any copy and it had not been displayed on the Notice Boards at the Abim District Headquarters.</li> <li>• The procurement plan was not displayed on any Notice Board.</li> </ul>	<p>0</p>



<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>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.</li> </ul>	<p>The Abim district performance assessment results for 2017/2018 and implications were said to have been discussed in DTPC and DEC meetings. However, the minutes of the meetings held were not availed at the time of assessment.</p>	0
<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"> <li>Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1</li> </ul>	<p>There was no evidence to demonstrate that the District communicated and explained guidelines, circulars and policies issued by the national level to LLGs during FY 2017/2018.</p> <p>What was presented as evidence was outside the period of reference (of FY 2017/2018), i.e. a letter from the CAO / Abim DLG to all Senior Assistant Secretaries and Township Officer regarding 'Additional Responsibilities of Parish Chiefs' as directed by H.E. The President of Uganda (Ref: CR/ABM/154 dated 18th April 2017).</p>	0
<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"> <li>Evidence that LG during the previous FY conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc.) with the public to provide feedback on status of activity implementation: score 1.</li> </ul>	<p>The district conducted discussions with the public to provide feedback on status of activity implementation, in collaboration with ADRA Uganda.</p> <p>For example, the Social Accountability and Transparency Meeting held in Kiru, Abim Town Council on the 9th July 2017. The theme was 'Factors Responsible for Poor Performance and Enrolment in Schools along the Highway in Abim District'</p>	1
<p>Social and environmental safeguards</p>			

<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• 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.</li> </ul>	<p>The district Gender Focal Person provided guidance and support to sector departments on how to mainstream gender in their activities. For example there was evidence that he trained women on how to demand for services, importance of group formation and also mobilised them for economic development, this was evidenced in the report produced on 4th may 2018.</p>	<p>2</p>
<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• 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 implement-ted: score 2.</li> </ul>	<p>The gender focal person and the CDO had planned a number of activities according to the 2018/19 work plan to mainstream gender and they include; induction of women councils, provision of soft loans to women groups with funds from ministry of Gender Labour and Social development, and celebrating women's day. The budget of 4, 3230, 000 allocated for gender mainstreaming activities in 2017/18 FY was fully utilised. It was spent on women empowerment activities in Lotuke and Alerek sub counties and the celebration of international women's day in march 2018.</p>	<p>2</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"> <li>• 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</li> </ul>	<p>Environmental screening was not done for any of the five sampled projects</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"> <li>• Evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1</li> </ul>	<p>There was no evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents as the bid documents for the sampled projects did not have a section addressing environmental and social management and health and safety issues</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"> <li>• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1</li> </ul>	<p>All the projects implemented in FY 2017/2018 were implemented by LLGs (sub-counties and Abim Town council) so there was no way of accessing land title and agreements as the LLGs were not under assessment and the district did not keep copies.</p>	<p>1</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"> <li>• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1</li> </ul>	<p>The Environmental and Social Mitigation Certification Form wereas not completed for completed projects as there was no certificate signed by the Environmental Officer and CDO</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"> <li>• Evidence that the contract payment certificated includes prior environmental and social clearance (new one): Score 1</li> </ul>	<p>The contract payments for sampled projects were effected at the respective lower local governments but the District environmental officer confirmed that he was not consulted for any environmental and social clearance as a requirement for contract payment</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"> <li>• Evidence that environmental officer and CDO monthly report, includes a) completed checklists, b) deviations observed with pictures, c) corrective actions taken. Score: 1</li> </ul>	<p>The Environmental officer and the Community Development Officer did not write any monthly reports as they did not visit any of the sampled projects during their implementation by the lower local governments.</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 department 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"> <li>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</li> </ul>	<p>There was evidence the LG budgeted for 34 Head Teachers and 465 teachers. The LG approved budget estimate for FY 2018/19 under Vote no. 573, Education Sector showed all teachers on the staff list were budgeted for.</p> <p>The LG had a total of 499 Teaching staff including Head Teachers in 34 Primary Schools.</p>	4
<p>The LG education department 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"> <li>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</li> </ul>	<p>From the list of school and the staff list, the LG had an average of 14 teachers in each primary school.</p> <p>From the list of schools and list of staff, the assessment team sampled 5 schools:</p> <ul style="list-style-type: none"> <li>Abim P/S =20 teachers, plus Head Teachers.</li> <li>Orwamuge P/S =22 teachers plus a head teacher.</li> <li>Alerek P/S =22 teachers plus head teacher.</li> <li>Otalabar P/S =13 teachers plus head teachers.</li> <li>Kiru P/S= 22 Teachers, plus a head teacher.</li> </ul> <p>The LG had deployed more than the minimum of 1 head teacher and 7 teachers. Comparatively, it's one of the best in terms of staffing of the schools.</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"> <li>• Evidence that the LG has filled the structure for primary teachers with a wage bill provision <ul style="list-style-type: none"> <li>o If 100%: score 6</li> <li>o If 80 - 99%: score 3</li> <li>o If below 80%: score 0</li> </ul> </li> </ul>	<p>For the FY 2018/19, the LG had no wage bill. As per the staff list, the LG recruited last in March 2018.</p> <p>The Inspector of Schools Ms. Okori Rose informed the assessment team that the department had a ceiling of 537 teachers. From the school list of teachers, the gap was only 38, but the schools could still do with the current staffing which stood at 499 teachers.</p> <p>She further noted that currently, they only did recruitment on replacement basis when need arose.</p> <p>From the above gap (34). The LG has filled up to 92.9 % of the staff requirement.</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"> <li>• 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</li> </ul>	<p>The LG Department of Education had one (1) substantively appointed Inspector of schools. The Senior inspector of Schools positions was not filled.</p> <p>The staff structure provides for: one (1) Senior Inspector and one (1) inspector of schools.</p> <p>The above notwithstanding, the department had two (2) Senior Education officers who function as Inspectors of School, those were not substantively appointed</p>	<p>0</p>
<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> <li>• Primary Teachers: score 2</li> </ul>	<p>There was no evidence that a recruitment plan for primary school teachers was drawn and submitted to HRM for recruitment during the FY 2018/19.</p>	<p>0</p>

<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> <li>• School Inspectors: score 2</li> </ul>	<p>There was no evidence that a recruitment plan for inspectors of school was drawn and submitted to HRM for recruitment during the FY 2018/2019).</p>	<p>0</p>
<p>Monitoring and Inspection</p>			
<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> <li>• 100% school inspectors: score 3</li> </ul>	<p>The district had two (2) School Inspectors. There was no evidence that they were appraised</p>	<p>0</p>
<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> <li>• Primary school head teachers <ul style="list-style-type: none"> <li>o 90 - 100%: score 3</li> <li>o 70% and 89%: score 2</li> <li>o Below 70%: score 0</li> </ul> </li> </ul>	<p>The district had thirty four (34) primary schools and therefore 34 Head Teachers as per the district staff list. There was no evidence that they were appraised</p>	<p>0</p>



<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>For the FY 2017/18, there was evidence that guidelines below were received:</p> <ul style="list-style-type: none"> <li>• Circular on closure of illegal schools, ADM/04/121/01. issued on 26/3/2018</li> <li>• Guidelines on Global Hand Wash 2018. ADM/164/04 issued on 20/8/2018.</li> </ul> <p>The Senior Inspector of Schools informed the assessment team that the circulars had just been brought from the MoES one week ago, thus not yet disseminated</p>	<p>0</p>
<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>There was no evidence of meetings with School Heads to sensitize them on guidelines, circulars and policies by the MoES.</p>	<p>0</p>
<p>The LG Education Department has effectively inspected all registered primary schools<sup>2</sup></p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> <li>o 100% - score 12</li> <li>o 90 to 99% - score 10</li> <li>o 80 to 89% - score 8</li> <li>o 70 to 79% - score 6</li> <li>o 60 to 69% - score 3</li> <li>o 50 to 59 % score 1</li> <li>o Below 50% score 0.</li> </ul> </li> </ul>	<p>School inspection was at 50 %. (=1) for all 34 government schools.</p> <p>For FY 2017/18, the Education Department inspected 43 licensed and registered P/S, 34 of which were government schools.</p> <p>Between FY 2017/18, there were 3 school terms. School inspection was done only twice (2/3) out of which there was a report for only one (1/2) which represents 50 % of inspection per term with report written.</p> <p>The assessment team was able to review the inspection reports for term III dated 19/1/2018. Term one report for 2018 was not available yet.</p>	<p>1</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"> <li>• 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</li> </ul>	<p>Although there was only one available school inspection report for term III 2017, there was evidence that Education Department met on 7/November/2017, In a Sectoral Committee (Education &amp; Health) meeting. Under minutes EDUC/151/1 pages 1-4 and discussed School Inspection Report.</p> <p>Another meeting took place on 25th/8/2017 under minutes no. EDUC/151/1 and, the third meeting took place on 18th/3/2018. It can be found on page 5 of the minutes.</p> <p>From the above meeting dates, it was thought possible that the LG department of education did not keep proper records of the school inspection reports because there was only one inspection report and yet there were three meetings as mentioned above to discuss various reports on school inspection.</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"> <li>• 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</li> </ul>	<p>There was evidence of submission of School Inspection reports to DES as per Form 4 Acknowledgement note dated 19th /1/18. This was further confirmed by the presence of a tick on matrix for submission of monitoring, work plans, reports &amp; accountability report 2018, page 1 obtained from DES.</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"> <li>• Evidence that the inspection recommendations are followed- up: score 4.</li> </ul>	<p>There was no verifiable evidence from the files in the DEOs' office and from the sampled schools that the LG Department followed up on recommendations from the School Inspection reports.</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>	<ul style="list-style-type: none"> <li>• Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> <li>o List of schools which are consistent with both EMIS reports and PBS: score 5</li> </ul> </li> </ul>	<p>A comparison of the school list and the PBS generated list on Abim for the FY 2018/19 appeared as ABM/ABI/1382. The compared lists were identical and consistent.</p>	<p>5</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"> <li>• Enrolment data for all schools which is consistent with EMIS report and PBS: score 5</li> </ul>	<p>There was evidence of Enrolment data for all 34 primary schools on PBS generated list at the DEO's Office.</p>	<p>5</p>
<p>Governance, oversight, transparency and accountability</p>			

<p>The LG committee responsible for education 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"> <li>• 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</li> </ul>	<p>The Social Services and Community Development Committee was in place. However, no minutes of any meetings held during FY 2017/2018 were presented during assessment.</p>	<p>0</p>
<p>The LG committee responsible for education 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"> <li>• Evidence that the education sector committee has presented issues that require approval to Council: score 2</li> </ul>	<p>No report of the committee was availed to ascertain whether the committee presented issues for approval to Council.</p>	<p>0</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"> <li>• 100% schools: score 5</li> <li>• 80 to 99% schools: score 3</li> <li>• Below 80 % schools: score 0</li> </ul>	<p>There was evidence that P/S at the LG had SMCs and that the SMC's were functional. The Assessment Team reviewed 33 SMC files:</p> <p>Alerek P/S, Orwamuge P/S, Gulonger P/S, Kiru P/S and Abim P/S. 33 out of 34 schools represent 97%.</p> <ul style="list-style-type: none"> <li>• Alerek P/S had an SMC meeting on 19/7/2017 to discuss accountability of UPE funds.</li> <li>• Orwamuge P/S had an SMC meeting on 5/7/2018 for Budget Estimate Reading'</li> <li>• Gulonger P/S SMC meeting was held on 25/6/2018 under minute no. 04/02/2018 and 05/02/2018. The agenda was Budget Presentation and Approval.</li> </ul>	<p>3</p>

<p>The LG has publicised all schools receiving non- wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3</li> </ul>	<p>There was no evidence on the notice board that the LG made public the list of all the schools receiving non-wage recurrent grants for FY 2017/18.</p>	<p>0</p>
<p>Procurement and contract management</p>			
<p>The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements, to the Procurement Unit that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>There was no procurement input to PDU for FY 2018/19.</p> <p>What was presented to the assessment team were:</p> <ul style="list-style-type: none"> <li>• 4-unit staff house &amp; 4 stance pit latrine construction in Abolokoma P/S.</li> <li>• 5 stance pit latrine in Alerek and Abim Primary Schools.</li> <li>• 3 seater at Kanu P/S and staff Units.</li> </ul> <p>However, all the above input was in a procurement plan dated 15 /5/2017.</p>	<p>0</p>
<p>Financial management and reporting</p>			

<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3.</li> </ul>	<p>There was evidence that the LG Education department timely certified and recommended suppliers for payment such as M/s ECUBEN Enterprises requested for payment of Shs. 1,091,000 for repair of motor vehicle LG0053-70 on 21st/2/2018 which was recommended for payment on 30th/3/2018 and paid on 5th/4/2018 vide PV-16621416 within 42 days.</p> <p>Note: The LG Education department did not undertake any more contracted supplies as the sector budget had been adjusted at the latest hour to cater for the Presidential pledge on construction of a seed school which also was not implemented in FY 2017/2018 as all the sector funds were attached by court to pay the pensioner who had sued the District.</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"> <li>• 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</li> </ul>	<p>At the time of assessment, the Education department had not submitted the annual performance report for FY 2017/2018 to the Planner / Abim DLG for consolidation.</p> <p>The submission, if it was to be made, will be after the deadline of 15th July 2018.</p>	<p>0</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"> <li>• 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</li> <li>o If sector has no audit query score 4</li> <li>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</li> <li>o If all queries are not responded to score 0</li> </ul>	<p>No evidence was availed to the assessment team that the LG Education Sector provided information to the internal audit on the status of implementation of all the 10 audit findings in FY 2017/2018.</p> <p>The Sector had a total of 10 audit findings for FY 2017/2018: 1 of which was recorded in the first quarter, 3 in the second quarter, and 6 in the fourth quarter.</p>	0
<b>Social and environmental safeguards</b>			
<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"> <li>• 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</li> </ul>	<p>There was evidence of dissemination of guidelines on how senior women / men teachers should provide guidance to girls and boys in schools about reproductive health, life skills &amp; Hygiene.</p> <p>There was a training by Gender Officer on menstrual hygiene on 21/4/2018 for senior women and men teachers from 45 schools.</p>	2
<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"> <li>• 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</li> </ul>	<p>There was no evidence that the gender department disseminated guidelines on managing sanitation for girls and PWDs. This was verified with Labong P/S.</p>	0

<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"> <li>• Evidence that the School Management Committee meets the guideline on gender composition: score 1</li> </ul>	<p>The assessment committee sampled 5 SMS files in the DEO's Office for gender composition:</p> <ul style="list-style-type: none"> <li>• Alerek P/S, 6 out of 10 members were female.</li> <li>• Orwamuge P/S, 3 out of 12 members were female.</li> <li>• Kiru P/S, 4 out of 12 are female.</li> <li>• Dure P/S, 4 out of 13 members are female.</li> <li>• Gulonger P/S, 3 out of 13 are female.</li> </ul>	<p>1</p>
<p>LG Education department has ensured that guide- lines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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:</li> </ul>	<p>There was no evidence that the Education department issued any guidelines on environmental management during FY 2017/2018 (The year of assessment) since there were no projects.</p>	<p>1</p>
<p>LG Education department has ensured that guide- lines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>There was no evidence of screening school projects before approval as there were no projects submitted for this FY 2017/18.</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"> <li>• The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 1</li> </ul>	<p>There was no report on site visitation filed since there were no running projects for this FY 2017/18.</p>	<p>1</p>
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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"> <li>• More than 80% filled: score 8</li> <li>• 60 – 80% - score 4</li> <li>• Less than 60% filled: score 0</li> </ul>	<p>There was evidence that the LG had filled the structure for PHC with a wage bill from PHC wage for FY 2017/2018 as indicated below:</p> <ul style="list-style-type: none"> <li>• Out of 269 health staff establishment for Abim District as per the approved staff establishment by MoPS dated 23rd /3/2017 Ref. ARC 135/306/01 206 had been filled leaving 63 not filled representing 76.6% within the wage bill.</li> </ul>	4
<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>	<p>There was evidence that Health department had submitted a comprehensive recruitment plan for FY 2018/2019 as per submission letter entitled “Submission of Recruitment Plan and Request for Additional Positions in Abim District for 2018/2019” dated 11th /12/2017 Ref. CR/ABM/104/2 to the HRM department.</p>	6

<p>The LG Health department has conducted performance appraisal for Health Centre IVs and Hospital In-charge and ensured performance appraisals for HC III and II in-charges are conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the all health facilities in-charges have been appraised during the previous FY:</p> <ul style="list-style-type: none"> <li>o 100%: score 8</li> <li>o 70 – 99%: score 4</li> <li>o Below 70%: score 0</li> </ul>	<p>The district had twenty (20) health facilities;</p> <p>District Hospital 1</p> <p>Health Centre III 4</p> <p>Health Centre II 15</p> <p>It therefore had 20 Officers in Charge. There was evidence that only four were appraised, representing a 10% compliance level. Those appraised were:</p> <p>Otana Dick Enrolled Nurse - 30th August 2018</p> <p>Olee Marinko Enrolled Nurse - 10th August 2018</p> <p>Ochieng Micheal Clony, Enrolled Nurse – 11th September 2018</p> <p>Chemonges Victor, Enrolled Nurse</p>	<p>0</p>
<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"> <li>• 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</li> </ul>	<p>There was evidence that the LG Health department had deployed health workers as per the budget for FY 2017/2018 as indicated below:</p> <ul style="list-style-type: none"> <li>• Abim Hospital, 187 approved and 141 filled.</li> <li>• Orwamuge HC III, 19 approved 17 filled.</li> <li>• Alerek HCIII, 19 approved and 16 filled</li> <li>• Nyakwae HCIII, 19 approved and 13 filled.</li> <li>• Abim TC 5 approved and 2 filled.</li> <li>• Atunga HCII, 9 approved and 8 filled.</li> <li>• Kanu HCII, 1 approved and 1 filled.</li> <li>• Amita Prison HCII, 1 approved and 1 filled.</li> <li>• Kiru HCII, 9 approved and 7 filled.</li> </ul>	<p>4</p>
<p>Monitoring and Supervision</p>			

<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"> <li>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</li> </ul>	<p>There was evidence that DHO had communicated all guidelines, circulars, policies ,issued by MOH to lower level health units as indicated below: Orwamuge HC III, Alerek HC III, Atunga HC II and Kiru HC II received DHO's communication on 16/04/2018 explaining the following guidelines, policies and circulars issued at national level:</p> <ul style="list-style-type: none"> <li>Ebola Virus outbreak preparedness 2015</li> <li>Intermittent Proflax Therapy for malaria in pregnancy 2016.</li> <li>Patients' Bill of Risk Dated 30/06/2018.</li> <li>Strategies to improve health workers' attendance to duty.</li> <li>National Medical Store Delivery Schedule</li> </ul>	<p>3</p>
<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"> <li>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</li> </ul>	<p>There was evidence that the DHO held meetings with health facility in-charges like in Atunga HC II and Kilaki HC III where meetings was held on 6th/6/2018 and discussed issues of absenteeism, late coming and misconduct such as stealing drugs.</p>	<p>3</p>
<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT/MHT has supervised 100% of HC IVs and district hospitals (including PNFPs receiving PHC grant) at least once in a quarter: score 3</p>	<p>There was evidence that DHT had supervised 100% of Abim Hospital and issues like drug inventory, staff welfare including promotions, internal transfers as per DHT supervision report date 6th /6/2018.</p>	<p>3</p>

<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT/MHT has ensured that HSD has supervised lower level health facilities within the previous FY:</p> <ul style="list-style-type: none"> <li>• If 100% supervised: score 3</li> <li>• 80 - 99% of the health facilities: score 2</li> <li>• 60% - 79% of the health facilities: score 1</li> <li>• Less than 60% of the health facilities: score 0</li> </ul>	<p>The LG did not have a Health Centre IV but the DHT supervised the lower level health facilities as evidenced in the supervision log book at Orwamuge HC III. Issues like solar panels for water which had been donated by an NGO called AVIS taken by the LC III Chairman leaving the health centre staff to buy water from NW&amp;SC.</p>	<p>3</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"> <li>• 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</li> </ul>	<p>There was evidence that all the 4 quarterly reports were discussed by the LG Health department as indicated below:</p> <ul style="list-style-type: none"> <li>• Q1 was discussed on 17/7/2017</li> <li>• Q2 was discussed on 5th /12/2017</li> <li>• Q3 was discussed on 20/3/2018</li> <li>• Q4 was discussed on 5/7/2018.</li> </ul> <p>Recommendations for corrective action included the following: Disciplinary action against late coming and absenteeism, Staff promotions and salary increments.</p>	<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"> <li>Evidence that the recommendations are followed</li> <li>– up and specific activities undertaken for correction: score 6</li> </ul>	<p>There was evidence that recommendations were followed up and specific actions undertaken for corrective action. For example, one of the recommendations in the quarterly inspection reports was taking disciplinary action against late coming and absenteeism. This was followed up by introducing daily attendance sheets for all health personnel obtained from MoH (which were seen by the assessor), Certificates of merit for staff that kept time and did not absent themselves within a period of 6 months.</p>	<p>6</p>
<p>The LG Health department has submitted accurate/consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> <li>List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10</li> </ul> </li> </ul>	<p>There was evidence that the LG had submitted accurate / consistent data regarding the facilities receiving PHC funding as per HMIS report on Form 017 dated 3rd /8/2018 which was distributed over 20 types of medical supplies like drugs, colour coded bins, cotton wool, syringes surgical blades among others.</p> <p>The data submitted was also consistent with the PBS.</p>	<p>10</p>
<p>Governance, oversight, transparency and accountability</p>			
<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"> <li>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</li> </ul>	<p>The Social Services and Community Development Committee was in place. However, no minutes of any meetings held during FY 2017/2018 were presented during assessment.</p>	<p>0</p>

<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"> <li>Evidence that the health sector committee has presented issues that require approval to Council: score 2</li> </ul>	<p>No report of the committee was available to ascertain whether the committee presented issues for approval to Council.</p>	<p>0</p>
<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"> <li>If 100% of randomly sampled facilities: score 6</li> <li>If 80-99 %: score 4</li> <li>If 70-79: %: score 2</li> <li>If less than 70%: score 0</li> </ul>	<p>There was evidence of 5 functional HUMCs for Abim Hospital and 4 sampled lower health units of Orwamuge HC III, Alerek HC III, Atunga HC II, and Kiru HC II that met and discussed the budget and resource issues like late coming, absenteeism, drug misappropriation, staff welfare /promotion/salary increment and upgrading of Orwamuge HC II to HCIII. The total number of randomly sampled facilities was a 100% of which was functional.</p>	<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"> <li>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</li> </ul>	<p>There was evidence that the LG publicised all health facilities receiving PHC non-wage recurrent grants as seen on the notice boards of the 4 sampled H/Cs of Orwamuge, Atunga, Alerek and Kiru.</p>	<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"> <li>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</li> </ul>	<p>No evidence was provided as the District Procurement Officer was out of station on the 2nd day of the assessment.</p>	<p>0</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"> <li>Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2.</li> </ul>	<p>The LG Health department did not submit procurement request form (Form PP5) to the PDU for FY 2018/2019</p>	<p>0</p>



<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4.</li> </ul>	<p>There was evidence that the DHO certified and recommended suppliers timely for payment such as M/s CHII Petroleum requested for payment for supply of 15 tyres for Health department for Shs. 5,250,000 on 9th/11/2017 under LPO No. 07500 and GRN 604 dated 9th/11/2017 which was recommended for payment on 10th/11/2017 and paid on 17th/11/2017 vide PV- 15646192 within 8 days..</p> <p>Note: The LG Health department did not undertake any more contracted supplies as the sector budget had been adjusted at the latest hour to cater for the Presidential pledge on upgrading of a HCII to HCIII which also was not implemented in FY 2017/2018 as all the sector funds were attached by court to pay the pensioner who had sued the District.</p>	<p>4</p>
<p>Financial management and reporting</p>			
<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"> <li>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</li> </ul>	<p>At the time of assessment, the Health department had not submitted the annual performance report for FY 2017/2018 to the Planner / Abim DLG for consolidation.</p> <p>The submission, when made, will be after the deadline of 15th July 2018.</p>	<p>0</p>

<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</p> <ul style="list-style-type: none"> <li>• If sector has no audit query: Score 4</li> <li>• 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</li> <li>• If all queries are not responded to Score 0</li> </ul>	<p>The Sector had a total of 17 audit findings for FY 2017/2018 6 of which were recorded in 1st quarter, 3 in 2nd quarter, none in 3rd quarter and 8 in 4th quarter.</p> <p>No evidence was availed to the assessment team by the Sector on information to the internal audit on the status of implementation of all the 17 audit findings for FY 2017/2018.</p> <p>The queries raised included late transfer of PHC funds to lower Health Units, non-attendance to duty by lower Health Unit staff, expired drugs, loss of Health Units' assets, non-use of dispensing log books, drug requisitions and issue vouchers, unaccounted for funds, HUMC not involved in witnessing delivery of drugs/sundries, no deduction of PAYE on staff salaries amongst 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"> <li>• Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines (i.e. minimum 30 % women: score 2</li> </ul>	<p>The 4 sampled HUMCs were gender sensitive as indicated below:</p> <ul style="list-style-type: none"> <li>• Orwamuge HUMC had 7 members of which were women and 4 were men representing 43% women.</li> <li>• Kiru HUMC had 6 members of which 2 were male and 4 were women representing 67%</li> <li>• Alerek HUMC had 7 members of which 4 were women and 2 were men representing 67%</li> </ul>	<p>2</p>
<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2.</li> </ul>	<p>The LG issued guidelines on how to manage sanitation in health facilities on 6/6/2018 during the supervision visits by DHT.</p> <p>Guidelines on sanitation management included segregation of toilets (coo-men, mon-women) for staff, placenta pits, bin liners, incinerator amongst others.</p>	<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"> <li>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</li> </ul>	<p>According to district officials, there were no health facility infrastructure projects implemented in FY 2017/2018. Therefore, no environmental screening was done in FY 2017/2018 under the sector.</p>	<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"> <li>The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 2</li> </ul>	<p>No site visits were conducted by the environmental officer as there were no sites to visit</p>	<p>0</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"> <li>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.</li> </ul>	<p>The LG issued guidelines on medical waste management on 6/6/2018 during the supervision visits by DHT.</p> <p>These controls included sanitation charts, posters amongst others.</p>	<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"> <li>• 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"> <li>o If 100 % of the budget allocation for the current FY is allocated to S/Cs below average coverage: score 10</li> <li>o If 80-99%: Score 7</li> <li>o If 60-79: Score 4</li> <li>o If below 60 %: Score 0</li> </ul> </li> </ul>	<p>Safe water coverage data from MOWE indicated that the average safe water coverage for Abim District for FY 2017/18 was 85%.</p> <p>The Sub-counties with safe water coverage below the District average were; Alerek (84%), Awach (35%) and Lotukei (74%).</p> <p>From the review of the Annual Work plan and PBS for FY 2018/19, the sub counties which were budgeted for included; Morulem, Abim, Magamaga, Alerek, Lotukei and Abim Town council.</p> <p>Therefore the Assessment team realized that out of 6 sub counties budgeted for in the FY 2018/2019, only 2 sub counties were below district average leaving out Awach sub county with the lowest safe water coverage of 35%. Therefore only 33.3% of the budget was allocated to the sub counties with safe water coverage below the district average.</p>	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"> <li>• 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"> <li>o If 100 % of the water projects are implemented in the targeted S/Cs: Score 15</li> <li>o If 80-99%: Score 10</li> <li>o If 60-79: Score 5</li> <li>o If below 60 %: Score 0</li> </ul> </li> </ul>	<p>The review of the Budget and Annual Progress Report for FY 2017/18 submitted by the District Water Department revealed that 12 Boreholes were budgeted for rehabilitation in the sub counties of; Abim, Abim T/C, Alerek, Magamaga, Nyakwae, Morulem, Lotukei and Awach. Although there were 12 boreholes rehabilitated in total only 9 out of the budgeted were implemented which makes 75%.</p> <p>During the field inspection, the recently Rehabilitated Boreholes at Abim CPS barracks (Abim T/C), Acarayede (Abim T/C) and Amul P/S (Abim T/C) were confirmed to be in place and functioning satisfactorily.</p>	5

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"> <li>• If more than 95% of the WSS facilities monitored: score 15</li> <li>• 80% - 95% of the WSS facilities - monitored: score 10</li> <li>• 70 - 79%: score 7</li> <li>• 60% - 69% monitored: score 5</li> <li>• 50% - 59%: score 3</li> <li>• Less than 50% of WSS facilities monitored: score 0</li> </ul>	<p>The review of the Annual Progress Report revealed that the District Water Department did not implement any new WSS facility. 12No_ boreholes were rehabilitated in the FY 2017/2018. The filed inspection report dated 3rd Sept 2018 clearly indicated that all the water projects were regularly supervised and monitored.</p> <p>However out of 384 WSS in the district, only 54 were inspected and monitored which brings it to 14%.</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"> <li>• Evidence that the district has submitted accurate/consistent data for the current FY: Score 5</li> <li>• List of water facility which are consistent in both sector MIS reports and PBS: score 5</li> </ul>	<p>The MIS Report from MoWE indicated rehabilitation of 12 Boreholes which was consistent with the AWP and budget for FY 2017/18</p>	<p>5</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"> <li>List of water facility which are consistent in both sector MIS reports and PBS: score 5</li> </ul>	<p>List of water facilities presented in the MIS reports at the MoWE were consistent with those in the performance contract and PBS 2018/2019. These WSS facilities included only the Rehabilitation of 12No boreholes</p>	<p>5</p>
<p>Procurement and contract management</p>			
<p>The district Water department has submitted input for district's procurement plan, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has submitted input for the district procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4</p>	<p>The District Water Department did not submit input for the district procurement plan that covered all investment items in the approved sector AWP and budget to PDU on time. The submission was done on 15th May 2018 and received by PDU on 16th May 2018 which was beyond the stipulated deadline of 30th April 2018 as required.</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"> <li>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</li> </ul>	<p>The District Appointed DWO (Mr. Mwaka Isaac Philip) as the contracts manager for the WSS projects.</p> <p>There was no evidence of a contract management plan by the contract manager and also no site visit meeting minutes were availed to the Assessment team to verify if there were any monthly site visits made for the different WSS infrastructure projects.</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"> <li>If water and sanitation facilities constructed as per design(s): score 2</li> </ul>	<p>Approved Designs for the rehabilitation of WSS facilities were availed to the Assessor. Site Inspection report dated 3rd September 2018 was prepared and made available for review.</p> <p>The Assessment team sampled three facilities which were Boreholes at Abim CPS barracks (Abim T/C), Acarayede (Abim T/C) and Amul P/S (Abim T/C). All the above three water supply facilities were found functioning satisfactorily as per design specifications.</p>	<p>2</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If contractor handed over all completed WSS facilities: score 2</li> </ul>	<p>The contactors have technically handed over the rehabilitated WSS facilities (12No boreholes). However the facilities are still under monitoring and defects liability period before completion certificates are issued to the contractor.</p>	<p>2</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2</li> </ul>	<p>Sampled Interim Payment Certificates showed that the District Water Officer had duly certified the Interim Payment Certificates. For instance under rehabilitation of 12 boreholes Procurement Reference No. ABIM573/WRKS/2017 – 2018/00002 and ABIM573/Wrks/2017-2018/0003 payment request made by the contractors Iyama Enterprises Ltd and Tope General Enterprises Ltd respectively on 18th June 2018 were certified on 20th June 2018</p>	<p>2</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"> <li>Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	<p>There was evidence of timely certification and payment of contractors during FY 2017/2018 as indicated below:</p> <ul style="list-style-type: none"> <li>Recommendation to pay M/s Ebowa Investment Ltd Shs. 481,826,562 for construction of Morulem Pipes Water System under DWSCG &amp; PRDP funding certified on 5/1/2018 was paid on 5/1/2018 – same day.</li> <li>Recommendation to pay M/s Ebowa Investment Ltd the balance of Shs. 23,953,251 on certificate No. 7 for construction of Morulem Pipes Water System &amp; PRDP funding on 17/1/2018 was paid on 19/1/2018 within 2 days.</li> </ul>	<p>3</p>
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Financial management and reporting

<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"> <li>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</li> </ul>	<p>At the time of assessment, the Water department had not submitted the annual performance report for FY 2017/2018 to the Planner for consolidation.</p>	<p>0</p>
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<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"> <li>• 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</li> <li>o If sector has no audit query score 5</li> <li>o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3</li> <li>If queries are not responded to score 0</li> </ul>	<p>The Sector had a total of 4 audit findings for FY 2017/2018 all of which were recorded in, 2nd quarter, none in 1st, 3rd and 4th quarter.</p> <p>No evidence was availed to the assessment team by the Sector on information to the internal audit on the status of implementation of all the 4 audit findings for FY 2017/2018.</p> <p>These queries raised included irregular payment of allowances - using wrong rates, unaccounted for funds, direct procurement occasioned without authority of District Contracts Committee and lack of segregation of duties in posting books and monthly bank reconciliations.</p>	0
Governance, oversight, transparency and accountability			
<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"> <li>• 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</li> </ul>	<p>The Finance, Planning, Administration and Investment Committee was in place. However, no minutes of any meetings held during FY 2017/2018 were presented during assessment.</p>	0

<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"> <li>Evidence that the water sector committee has presented issues that require approval to Council: score 3</li> </ul>	<p>No report of the committee was availed to ascertain whether the committee presented issues for approval to Council.</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"> <li>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.</li> </ul>	<p>There was no display of AWP, budget and the Water Development grant releases and expenditures on the District and DWO's Notice boards.</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"> <li>All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2</li> </ul>	<p>The sampled WSS facilities were three Boreholes i.e. Acarayede (Abim TC), obangangeo (Abim TC) and Amul P/S (Abim TC). All of the WSS facilities were labelled with name of Contractor, source of funding, Name of the project and date of construction as required.</p>	<p>2</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"> <li>Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2</li> </ul>	<p>Due to limited sizes of the District Notice Boards, information on tenders and contract awards (indicating contractor name /contract and contract sum) earlier displayed on the</p> <p>District notice boards had been removed to give space to other information displays. However there was a file copy kept with the PDU office that indicated 15th January 2018 s date of display and 30th June 2018 as removal date. The display of information on all tenders and contract awards was done. For instance it indicated Procurement Reference ABIM573/Supplies/17-18/0002 for Rehabilitation of 6 boreholes, Contractor Boke Engineering and Contract sum UGX 1,781,300</p>	2
<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If communities apply for water/ public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1</li> </ul>	<p>Application letters for WSS facilities from communities represented by sub counties together with the minutes of the meetings held by communities were submitted to the District Water Office as per sector critical requirements for action and were properly filed. For instance on 28th June 2018, there was an application from Ajanita Village- Adea Parish- Morulem S/C for a new borehole, on 10th July 2018 there was an application for a borehole from Gangming Village- Lotukei S/C and Kathiputh village- Alerek S/C applied for a borehole on 27th June 2018.</p>	1
<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Water and Sanitation Committees that are functioning evidenced by either: i) collection of O&amp;M funds, ii( carrying out preventive maintenance and minor repairs, iii) facility fenced/protected, or iv) they an M&amp;E plan for the previous FY: score 2</li> </ul> <p>Note: One of parameters above is sufficient for the score.</p>	<p>There was evidence that O &amp; M funds were being collected by WSCs and the sampled water supply facilities Acarayede (Abim TC), obangangeo (Abim TC) and Amul P/S (Abim TC) were fenced, properly maintained and functioning satisfactorily.</p>	2
Social and environmental safeguards			

<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"> <li>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</li> </ul>	<p>There was no evidence of environmental screening for the implemented WSS projects. No screening forms were availed to the Assessment team and no screening reports were presented either. The Environmental officer explained that since there was no new projects being implemented, he though not necessary to do environmental screening for rehabilitation projects.</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"> <li>Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1</li> </ul>	<p>There were no screening reports as per templates hence the assessment team could not verify whether there were any unacceptable environmental concerns that had not be addressed or any mitigation measures put in place.</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"> <li>Evidence that construction and supervision contracts have clause on environmental protection: score 1</li> </ul>	<p>There was no evidence of a clause about Environmental protection in the contract documents sampled. Contract ref; ABIM573/Wrks/2017-2018/0002 and ABIM573/Wrks/2017-2018/0003 for rehabilitation of 6No boreholes.</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"> <li>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</li> </ul>	<p>There was no evidence to show that 50% of WSC's were women. No Software progress reports were presented to the assessment team and no List of WSC with composition was available for review.</p>	<p>0</p>
<p>Gender and special needs-sensitive sanitation facilities in public places/</p> <p>RGCs provided by the Water Department.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3</li> </ul>	<p>The DWO explained to the assessment team that since 2013, the water department had not implemented any Sanitation facility due to limited funding. Therefore there was no sanitation facility sampled to verify adherence to Gender and special needs sensitivity.</p> <p>From the review of Annual Work Plans and budgets for FY 2017/2018 and FY 2018/2019, the assessment team found out that there was no budget allocation to sanitation facilities and the DWO's reason was that there was inadequate funding though he could not provide any proof.</p>	<p>0</p>