

LGPA 2017/18

Accountability Requirements

Apac District

(Vote Code: 502)

Assessment	Compliant	%
Yes	2	33%
No	4	67%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Assessment area: Annual performance contract			
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.	XXX	Not Compliant – Apac District submitted the APC 2017/18 to MoFPED after the deadline (i.e. not submitted before 30th June 2017) as per MoFPED/PAC Secretariat Receipt dated 3rd /8/2017 and Receipt Number 4049.	No
Assessment area: Supporting Documents for the Budgavailable	jet required as	per the PFMA are submitt	ed and
LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).	XXXXX	Not Compliant – No documented evidence seen at MoFPED and Apac District to confirm that Apac District APC/Budget 2017/18 submitted to MoFPED was accompanied by a Procurement Plan.	No
Assessment area: Reporting: submission of annual and	d quarterly bud	dget performance reports	
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)	XXXXX	Not Compliant – The Apac District submitted late the APR 2016/17 (Q4 Consolidated Report) to the MoFPED (i.e. as per Receipt dated 3rd/8/2017 and Receipt No: 0898, hence the APR going in well after 31st July 2017).	No

LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)	XXXXXX	Not Compliant – All 4 quarterly reports for the FY 2017/18 were duly submitted but Q4 submitted late (i.e. Q1 - 10th/11/2016 Receipt No: 0033; Q2 – 27th/2/2017 Receipt No: 0774; and Q4 – 3rd/8/2017 Receipt No: 0898).	No
Assessment area: Audit			
The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous financial year by April 30 (PFMA s. 11 2g). This statement includes actions against all findings where the Auditor General recommended the Accounting Officer to take action (PFMA Act 2015; Local Governments Financial and Accounting Regulations 2007; The Local Governments Act, Cap 243).	XXXXX	The LG provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous FY by April 30. (PFMA s.112g). The submission letter dated 23/2 /2017 was submitted on 24/3/2017. The LG responded to all the 5 audit queries raised.	Yes
The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer	xxxxx	From the Annual report of the Auditor General FY 2016/2017, Apac District obtained an unqualified audit opinion.	Yes



LGPA 2017/18

Crosscutting Performance Measures

Apac District

(Vote Code: 502)

Score 56/100 *(56%)*

Crosscutting Performance Measures

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Planning	g, budgeting and execution		
1	All new infrastructure projects in: (i) a municipality; and (ii) all Town Councils in a District are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans Maximum 4 points for this performance measure.	Evidence that a municipality/district has: • A functional Physical Planning Committee in place that considers new investments on time: score 2.	0	Whereas the Apac District's Physical Planning Committee was formed on CAO's appointment (letter dated 20th/10/2017) and the PPC composed of several members that doubled as heads of departments, for the FY 2017/18, the PPC was not functional. For example, it met only twice since its date of forming (with the first signed and stamped minutes seen for the 6th/9/2017 focusing on its induction of PPC members as well as handwritten, unsigned and unstamped meeting notes of another meeting for 30th/1/2018). With this evidence, it is clear that the PPC is not fully functional (i.e. going by a requirement that calls for the PPCs to meet within 28 days to consider/ approve the submitted applications in line with the approved physical plans).
		• All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2.	0	Based on selected sample of new investments, there was no evidence that the applications cum investments were being approved in time in line with the districts physical plans. Also, there was neither documented evidence (e.g. in form of district council minutes) to offer proof that the physical plans had been approved by council nor PPC minutes that confirmed that applications were being vetted to ensure their consistence with Physical Plans approved by council. According to official records got from MoLHUD, (Status of Physical Planning in Uganda 2017, the MoLHUD Physical Planning Department (2015) only considered physical plans for Aduku Town Council (see Page 1 that states available and valid Structural Plan 2013-2023 and with an available and valid Detailed Plan, 2013-2015). Unfortunately, all this contradicted the availed documents in Apac District (i.e. with a Structural Plan 2012-2022 and a Detailed Plan, 2013-2023). Information at Apac District indicated that while the district had 1 Town Council (Aduku), 4 more had been approved but the physical planning unit not fully equipped to manage these changes.

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

• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.

2

Apac District held a Budget Conference on 25th/10/2016. Based on the contents of the Budget Conference Report (BCR), there was some evidence that the AWP 2017/18 was based on outcomes of the budget conference. The BCR contained departmental presentations that specified the priorities that were easy to see from the AWP 2017/18. For education, strengthening school inspection, monitoring and support supervision is seen on page 28 of the AWP 2017/18 and again seen on page 8 of the BCR. For health, infrastructure enhancement (face lifting of health center IIIs) is seen on page 18 of the AWP 2017/18 and on page 7 of the BCR. For water, drilling and installation of deep wells is seen on page 35 of the AWP 2017/18 and page 6 of the BCR.

• 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 different, justification has to be provided and evidence that it was approved by Council. Score 2.

2

There was evidence that the capital investments in the approved AWP 2017/18 were derived from Apac District's 5-year Development Plan (MDP) 2015/16-2019/20. On the AWP-MDP linkages, the approved AWP (page 26) shows that the education sector investments e.g. construction of classrooms appears in the DDP on pages 157. For health, the capital investments that were approved and captured in the AWP include renovation of Apac Hospital (page 18-19) that appears also in the DDP on page 156. On water, the approved AWP (page 34) shows that the water sector investments e.g. construction of shallow wells appears in the DDP on pages 159.

		• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1.	0	According to records made available to the assessors, during the FY 2016/17, Apac District TPC met nine (9) times out of 12 (27th/4/2017, 7th/3/2017, 21st/3/2017, 27th/1/2017, 12th/1/2017, 15th/8/2016, 19th/9/2016, 21st/11/2016 and 5th/10/2016). However, no TPC minutes on file for FY 2016/17 offered documented proof that the TPC discussed developed project profiles (e.g. those that would be seen in the DDP, 2015/16-2019/20). The TPC appeared to cherry pick what projects to discuss, let alone what aspects of the projects to focus on. The NUSAF III and UWEP projects featured more prominently than others, another pointer to limited robustness of the planning function by the District Planning Unit. Indeed, for the FY2016/17, NPA's (2017) Certificate of Compliance with Planning Guidelines awarded Apac District a score of 50% only on the robustness of the planning process. The emerging overall average score hovered way below average (25.4%) — one of the least performing districts when all planning aspects were kept into view (see page 81).
3	Annual statistical abstract developed and applied Maximum 1 point on this performance measure	Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum 1 point.	1	The Draft Annual Statistical Abstract (as at the time of the assessment – 12th/2/ 2018) was not submitted for review. Rather, the Final Annual Statistical Abstract 2015/16 was the one on offer for review. This captured some gender-related and gender dis-aggregated data (e.g. on pages 25 on district population, page 54 on number of orphans and distribution of elderly persons). However, even in its draft status, there was evidence that the TPC of the 7th/3/2017 agenda item 5 and min.05/07/o3/2017 deliberated on the need to come up with data and information in the statistical abstracts in ways that would help influence allocations and decision making. Still, the District Planning Unit appeared to require the assistance of UBOS to help beef up and finalise the draft statistical abstract.

4	Investment activities in the previous FY were implemented as per AWP. Maximum 6 points on this performance measure.	• 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	2	As per the Q4 Consolidated Report FY2016/17 as well as AWP and APC/budget FY 2016/17 (approved by the council of 17th/5/2016 min 05/05/2016), all (100%) infrastructure projects implemented in FY 2016/17 by Apac District were derived from the approved AWP and Budget 2016/17. A sample confirmed that whatever was implemented was as per plan and budget. Feducation, latrine construction is seen on page 17 and 118 of the AWP 2016/17 and page 55 of the Q4 Consolidated Report for the FY 2016/17. For health, OPD construction and rehabilitation is seen on page 113 of the AWP 2016/17 and page 57 of the Q4 Consolidated Report for the FY 2016/17. For water, shallow well and borehole construction is seen on page 125 of the AWP 2016/17 are page 63 of the Q4 Consolidated Report for the FY 2016/17.
		• Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. o 100%: score 4 o 80-99%: score 2 o Below 80%: 0	0	Only some projects (78.6%) implemented in FY 2016/17 were completed as per work plature – with 11 completed against the 14 budgete and/or planned for as per approval by council (see min: 05/05/2016 for the council meeting of the 17th/5/2016). This means, therefore, that as per approved budget and plan, only projects were not completed (i.e. going by the implementation status captured in the Q4 Consolidated Report 2016/17).
5	The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects and assets	• Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2	0	According to details in the Approved Finance Statement for Apac District for 2016/17, only 66% of the investment projects implemented in FY 2016/17 were completed within approved budget.
	during the previous FY Maximum 4 points on this Performance Measure.	• Evidence that the LG has budgeted and spent at least 80% of O&M budget for infrastructure in the previous FY: score 2	2	According the AFA 2016/17, Apac District budgeted for O&M and the actual expenditucorresponded with the budget (86.6%), hen falling above the recommended 80% threshold (NB: budget was 1,900,000,000/= actual expenditure 1,646, 261, 645/= and the variance 253,738,355/= according annual Financial Statements dated 15th/12/2017 for the period ended 30th/6/2017).

LG has substantively recruited and appraised all Heads of Departments

Maximum 5 points on this Performance Measure.

 Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2 All HoDs had been appraised by the time of the assessment. Verified information included a review of their Performance Appraisal files that included duly signed Performance Agreements and Reports by the HoDs and the Chief Administrative Officers. the status was as indicated below:

- 1. Chief Finance Officer: Personal File Ref-CR/D/11637. Appraised on 31/08/2017, Performance Agreement signed on 31/08/216 and Performance Report endorsed by CAO on the 31/08/2017
- 2. District Health Officer: Personal File Ref: CR/D/11797. Appraised on 12/07/17, Performance Agreement signed on 01/07/2017 and Performance Report endorsed by the CAO on 12/07/2017.
- 3. District Education Officer: Personal File Ref. CR/D/10197. Appraised on 15/07/ 2017, Performance Agreement signed on 02/07/2017 and Performance Report endorsed by the CAO on 15/07/2017
- 4. Natural Resources Officer: Personal File Ref.CR/D/10041. Appraised on 19/07/2017, Performance Agreement signed on 07/08/2016 and Performance Report endorsed by the CAO on 19/07/2017.
- 5. District Planner: Personal File Ref.CR/D/11629. Appraised on (PS Form 5) 5/08/2017, duly signed by the CAO. (Planning was still a Unit- upgraded to Department in FY 2017/18).
- 6. District Production Officer: Personal File Ref. CR/D/ 10061. Appraised on 12/07/2016 Agreement and Performance Report endorsed by the CAO on 14/08/2017
- 7. District Engineer (Ag, Senior Engineering Officer): Appraised on 31/08/201, Performance Agreement signed on 31/08/2016 and Performance Report endorsed by the CAO on 31/08/201
- 8. District Comm. Dev. Officer (Ag. Senior Comm. Dev. Officer. Appraised on 31/08/2017, Performance Agreement signed on 02/07/2016, and Performance Report endorsed by the CAO on 31/08/2017

• Evidence that the LG has filled all HoDs positions substantively: score 3

Seven (7) out of 9 Heads of Department (HoDs) positions were filled substantively by the time of the review. Two (2) positions were filled by staff in acting capacity. The status was as indicated below:

Substantive appointments

- 1. Chief Finance Officer: Personal File Ref-CR/D/11637. Appointed on 1/09/2017 ref CR/156/1, Min Ext. no. DSC 14/2017 (i).
- 2. District Health Officer: Personal File Ref: CR/D/11797. Appointed on 4/04/205, ref. CR/156/3, Min Ext.no. 18/2005.
- 3. District Education Officer: Personal File Ref. CR/D/ 10197. Appointed on 18/12/2003, ref CR/156/3, Min. Ext no. 98/2003.
- 4. Natural Resources Officer: Personal File Ref.CR/D/10041. Appointed on 13/05/2012, ref. CR/160/1. Min. Ext. no.27/2012.
- 5. District Commercial Officer: Personal File Ref. CR/D/10101. Appointed on 30/05/2012. ref.CR/160/1. Min Ext.no. 27/2012.
- 6. District Planner: Personal File Ref.CR/D/11629. Appointed on 29/03/2016.ref CR/160/1, Min Ext. no. 70/2016 (b).
- 7. District Production Officer: Personal File Ref. CR/D/ 10061. Appointed on 29/03/2016, Min Ext. no. 702016 (b).

Staff in Acting positions

- 8. District Engineer (Ag, Senior Engineering Officer): Personal File Ref. CR/D/11387. Appointed on 30/11/2010 ref. CR/160/1, Min Ext.no.16/2011.
- 9. District Comm. Dev. Officer (Ag. Senior Comm. Dev. Officer) Personal File Ref. CR/D/10219. Appointed on 10/11/2005, ref CR/D/160/1. Min Ext.no. 90/2005.

The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.

Maximum 4 points on this Performance Measure

• Evidence that 100 percent of staff submitted for recruitment have been considered; score 2

DSC considered all (100%) of the submission made by the CAO for recruitment.

Following the approval of the Recruitment Plan for 50 Positions to be filled at Apac District for 2016/17 (CAO's submission to MoPS dated 12/09/2016) and MoPS responses to CAO dated; 3/02/2017-approving 28 positions in the Health department as per ref. ARC/293/05 and response from MoPS dated 17/10/2017 ref. ARC 6/293/05, approving 10 assorted positions and 12 in the Agriculture department), altogether, 50 positions were cleared by MoPS for recruitment including regularizing recruitment for 18 Health workers who were working on contract supported by the SDS /Intra Health Project.

- CAO made 81 declarations to the DSC for consideration for recruitment. (50 recruitment and31 staff replacements as per Declaration of Vacant Positions to the DSC dated 201/12 2016 ref. CR/156/11. The declaration included individual declarations for vacant positions.
- DSC sat from 10th April to 2nd May 2017 as per letter from Sec, DSC dated 2/05/2017 DSC/ APC/ 212/4 and handled 98 recruitments including 17 promotions of Head Teachers and Deputy Head Teachers.

• Evidence that 100 percent of staff submitted for confirmation have been considered: score 1	1	The DSC considered all (100%) submissions made by CAO for consideration for confirmation of staff. • The DSC (20th sitting of 2017) sat on 17th October 2017, ref. DSC/APC/156/1 and considered 15 confirmations (8 for Education, 1 for Finance, 2 for Health, 2 for Production and 1 for Administration). • The DSC (19th sitting) sat on the 24th of August 2017 (ref. DSC/APC/156/1) and considered staff across sectors that had completed their Probation had been duly appraised (Education 53, Administration 20, Planning Unit 3, Finance 4, Engineering 1, Natural resources 4 and Community Development 4). Individual minute extracts for the confirmation in appointment are contained in the minutes cited above.
• Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1	1	The DSC acted on all (100%) cases (3 cases) submitted by CAO for consideration for Disciplinary action. • The DSC deliberated on the cases during the 19th sitting on 24/08/2017 and considered 3 cases for dismissal on due to forgery of academic documents as per Minute Extract No. 14 of 2017 (n). • DSC meeting of the first quarter of 2017/18 FY following a submission by the CAO for consideration for Disciplinary action made on the 29/09/2016. DSC acted and the staff in point was dismissed on account of Forgery of Academic Documents, as per minute extract no. 90/2016 (n).

Staff recruited and retiring access the salary and pension payroll respectively within two months Maximum 5 points on this Performance Measure.	• 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	3	All (100%) the 50 newly recruited staff during FY 2016/17 managed to access the Salary Pay Roll not later than two months after appointment. This was verified through taking a random sample of 5 files of the new staff that were Appointed in May 2017. All the 5 staff appeared on the July 2017 Pay Roll verified at the HRM office as per details below: File No. and IPPS No. 1. CR/D/12579 - 1005735 2. CR/D/12597 - 1006055 3. CR/D/12580 - 1006023 5. CR/D/12596 - 1006027
Assessment area: Revenue	• 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	0	Only 7 out of the 54 (13%) staff that retired from Public Service managed to access the Pension Pay Roll within not later than two months after retirement. The major reasons cited by the HRO for the delay in accessing the Pay Roll include but are not limited to: • Inconsistency in records (names, dates of birth, titles of jobs held vs. records at MoPS, salary steps etc.) that result into delays in while harmonizing the anomalies. • Delays by retired staff in processing their files before submitting them to HRM for appropriate action. • Bureaucracy at MoPS despite the decentralisation of the processing of pension files districts and follow up with MoPS by the HRM rather than the individual retirees.

9	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) Maximum 4 points	• If increase in OSR from previous FY but one to previous FY is more than 10%: score 4 points • If the increase is from 5-10%: score 2 point • If the increase is less than 5%: score 0 points.	0	The actual local revenue collected by the LC in FY 2015/16 was Ugx 565,585,455 while in FY 2016/2017 local revenue collected was Ugx 491,991,000. This gave a decline in loc revenue collected of Ugx 73,594,455 which 13 % decrease. The reasons for the decline were highlighted as follows; failure by LLGs remit to the District, quarantine along lake shores due to the outbreak of foot and mound diseases, negative attitude of tax payers towards paying taxes and Drought and
	on this Performance Measure.			famine.
10	LG has collected local revenues as per budget (collection ratio) Maximum 2 points on this performance measure	• If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within /-10%: then 2 points. If more than /- 10%: zero points.	0	The District had a budget of Ugx 717,020,00 in FY 2016/17 and the actual local revenue collected in FY 2016/17 was Ugx 491,991,0 giving a variance of Ugx 225,029,000. This was 31% shortfall.
11	Local revenue administration, allocation and transparency	• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2	0	The CFO explained that the District doesn't remit the 65% to the LLGs because the LLG also failed to remit the 35% to the District. therefore, the District had to retain the 65% meant for the LLGs.
	Maximum 4 points on this performance measure	• Evidence that the LG is not using more than 20% of OSR on council activities: score 2	0	From the trial balance, council allowances Ugx 78,933,000 and standing committee allowances Ugx 288,061,630 was drawn fro local revenue. This gives a total of Ugx 366,994,630 which is 64% of total local revenue. The LG used more than 20% of lo revenue on council activities.

12	The LG has in place the capacity to manage the procurement function
	Maximum 4 points

Maximum 4 points on this performance measure.

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

2

• The LG has the position of Senior Procurement Officer (refer appointment of designation dated 8/6/2011 signed by CAO, Leru Andrew) and Procurement Officer (Min No 23/2015, confirmation of appointment dated 4 may 2015 signed by CAO, Kizito Mukasa Fred.

 Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1 The TEC produced and submitted reports to the Contracts committee for;

Construction of 2 classroom block at Boda PS in Chawente sub county signed by 3 evaluation members on 3/11/2016,

Opening of Teibu II Angayki-Akuli community access road (10.2 km) signed by evaluation members on 3/11/2016,

Construction of 2 stance pit latrine at Nambieso HC III signed by 4 Evaluation members on 21/3/2017,

Construction of two 5 stance pit latrine at Chawente primary school &Tegot primary school signed by evaluation members on 3/11/2016,

Drilling and installation of 12 deep wells lot 1 signed by 4 members on 3/11/2016

		• Committee		Contracts committee considered recommendations for the following Infrastructural projects; Opening of Teibu II Angayki-Akuli community access road (10.2 km) Min 33/11/2016-17 signed by secretary and chairman on 23/11/2016
		considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1	1	Construction of 2 stance pit latrine at Nambieso HC III ,Min 87/04/2016-17 signed by secretary and chairman on 23/11/2016, Construction of two 5 stance pit latrine at Chawente primary school &Tegot primary school ,Min 33/11/2016-17 signed by secretary and chairman, Drilling and installation of 12 deep wells lot 1 min 33/11/2016-17 dated 23 Nov 2016 signed by Secretary and Chairman
13	The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed. Maximum 2 points on this performance measure.	• 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	2	 The procurement and disposal plan for the current FY of LG showing work plan procurements was signed by Senior procurement officer and CAO on 9/8/2017 and received by Executive Director PPDA on 21 Aug 2017. The LG made procurements in the previous FY through submission of 4th quarter report on procurement and disposal and submission of disposal plan and procurement work plan to PPDA, signed by CAO dated 13/07/2017 and received by PPDA on 21 Aug 2017.

The LG has prepared bid documents, maintained contract registers and procurement	• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2	0	• The LG prepared 60% of bid documents and advertised for bidding documents on the new vision newspaper on Sept 4th 2017, due to no funding for the 4th quarter.
activities files and adheres with established thresholds. Maximum 6 points on this performance	• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2	2	The LG had an updated contracts register for 2016/17 showing names of contractors, location address contacts, location of sites contracts sum. All were viewed in a hard copy contracts register written on Apac District local government contracts register
measure	• For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.	2	The LG adhered with procurement thresholds for the following projects; • Construction of 2 classroom block at Boda PS in Chawente sub county under open bidding at 68,589,182/= • Opening of Teibu II Angayki-Akuli community access road 10.2 km, under open bidding at 265,721,516/= • Construction of 2 stance pit latrine at Nambieso HC III and placenta Pit under selective bidding at 11,481,813/= • Construction of two 5 stance pit latrine at Chawente primary school &Tegot primary school under selective bidding at 35,618,772/= • Drilling and installation of 12 deep wells lot 1 under open biding at 235,074851/=

15	The LG has certified and provided detailed project information on all investments Maximum 4 points on this performance measure	Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2	2	Work projects in the previous FY were certified interim and completion certificates for; Substantial completion certificate for construction of 2 classroom block with office and store signed by District engineer and CAO on 17TH Feb 2017, Low cost sealing of Apac –Atar road(2.2km) signed by District engineer and CAO on 21 April 2017, Substantial completion certificate for Rehabilitation of theatre block at Apac Hospital signed by District engineer and CAO on 13 March 2017, Substantial completion certificate of drilling and installation of 10 deep wells in Apac district signed by District engineer and CAO on 13 March 2017.
		• 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	0	Projects visited for Current FY include; Low cost sealing of Alenga-Kungu road (1.5km), Renovation of Apac Hospital Mortuary, Construction of modern Hospital Laboratory at Apac main Hospital. However there was no evidence of site boards indicating name of project, value of project, location, contractor and expected duration for the current FY at the time of assessment.

Assessment area: Financial management

16	The LG makes monthly and up to-date bank reconciliations Maximum 4 points on this performance measure.	• Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4	0	From the information on the IFMIS, the TSA was reconciled as at 13/4/2017. The CFO explained that the respective accountants from the departments delay to submit information for updating the system. This issue also appeared as an audit query in all the quarterly internal audit reports. The bank reconciliation statements for General fund account and the TSA are not being reconciled on a monthly basis as per LGFAR 73 (1-2).
17	The LG made timely payment of suppliers during the previous FY Maximum 2 points on this performance measure	• If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2.	2	The format of the payment register in the system doesn't have a provision for overdue bills. However, the sampled payment requests and vouchers reveal timely payment of suppliers. E.g. • Request for payment for construction of community access road by Gob's Investment (U) Ltd dated 23/1/2017 was forwarded on 25/1/2017 and paid on 2/2/2017. • Request for payment for low cost sealing of Apac Atar road 2.2 km by Mogen enterprises Ltd 20/1/2017 was forwarded by engineer on 20/1/2017, approved by CAO on 25/1/2017 and paid on 2/2/2017. • Payment for rehabilitation of 3 classroom block at Atana P/S by Mid north builder and civil engineering works Ltd dated 11/1/2017 was forwarded by engineer on 23/1/2017 and paid on 2/2/2017. All the above transactions prove timely payment of suppliers.
18	The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations	• Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.	0	The LG has an Acting Principal Internal auditor and the Internal auditor. The two produced all the quarterly internal audit reports. Copies with submission letters dated 31/10/2016, 30/1/2017, 30/4/2017 and 31/7/2017 were available.

Maximum 6 points on this performance measure.

		• 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: score 2.	2	All the quarterly internal audit reports for the previous FY contain information on audit findings and copies were given to council and LGPAC as follows; first quarter, second quarter, third quarter and fourth quarter were submitted on 30/10/2016, 30/1/2017, 23/5/2017 and 19/8/2017 respectively (information from the delivery book).letters of follow up addressed to CAO from internal audit department dated 30/9/2016 was on file signed by the Ag. Principal internal auditor. Also follow up letter by CAO to Medical superintendent dated 28/3/2017 was available.
		• 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	1	There was evidence that the quarterly internal audit reports were submitted to LG Accounting officer and LGPAC as follows; first quarter, second quarter, third quarter and fourth quarter were submitted on 30/10/2016, 30/1/2017, 23/5/2017 and 19/8/2017 respectively (information from the delivery book). LGPAC has reviewed them and evidence of LGPAC reports dated 15th /11/2016, 15th /8/2017, 5th /10/2017 and 22nd /12/2017 were available. Also the Sub counties are given copies of the quarterly internal audit reports and LGPAC reports as a sign of follow up so that they can respond to the audit queries.
19	The LG maintains a detailed and updated assets register Maximum 4 points on this performance measure.	• 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	0	The LG maintains two asset registers but they are not up dated and not according to the format as per the accounting manual. The issue of asset registers featured in all the quarterly internal audit reports 2016/17.

|--|

Assessment area: Governance, oversight, transparency and accountability

The LG Council meets and discusses service delivery related issues

Maximum 2 points on this performance measure

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

There was evidence that Apac District Council was functional. For example, it met 6 out of 6 mandatory times in FY 2016/17. The council meetings happened on the 4th/11/2016, 5th/8/2016, 21st+22nd/12/2016, 31st/8/2016, 30th/5/2017, 31st/3/2017 and 29th+30th/6/2017). On a few occasions when the district council met, it deliberated on relevant service-delivery issues e.g. discussion of budgets, plans and reports. Most of the time, the council meetings deliberated on committee reports and recommendations for its approval. It is worth noting that committee issues featured prominently in council deliberations, the council minutes were often silent when it came to covering aspects such as TPC reports, monitoring reports, LG PAC reports and performance assessment results/reports. For the periods under review, the exceptions to the rule included the following:

- The council meeting of the 29th and 30th June 2017 covered (indirectly) TPC Reports (as seen in agenda item 6, executive business with DEC's inputs that are informed by CAO inputs having sought all inputs from the TPC).
- The council meeting of the 14th and 15th March 2017 covered (indirectly) Monitoring Reports (agenda item 7, laying of committee monitoring and brief reports seen in min: 07/03/2017 pages 7-9).
- The council meeting of the 21st and 22nd December 2016 covered LG PAC Reports (agenda item 5, executive business on LG PAC Report for the FY 2016/17 min: 05/12/2016 pages 2-3).
- The council meeting of the 14th and 15th March 2017 covered Performance Assessment Results/Reports (agenda item 3, communication from the chair (part c on review of ACODE assessment results) seen in min: 04/03/2017 pages 2-3).

22	The LG has responded to the feedback/complaints provided by citizens Maximum 2 points on this Performance	designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback	2	Documented evidence seen in form of CAO' letter to the District Information Officer (DIO') dated 8th/2/2017 as the designated focal point person on the budget website and meant to coordinate lower-level feedback or and responses to (gripyeness /gemplaints)
23	The LG shares information with citizens (Transparency)	Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2	2	Documented evidence seen of publishing payroll register on the notice board of the District Planner but with no evidence of the posting of a pension register/schedule.
	Total maximum 4 points on this Performance Measure	Evidence that the procurement plan and awarded contracts and amounts are published: score 1	1	Documented evidence seen of publishing of procurement register on several notice boar of Apac District LG (including the notice boar at the entrance of the Main Block under renovation).
		• 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.	0	Not Applicable (N/A) – There was no LGPA the FY under review.
24	The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens Maximum 2 points on this performance measure	• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1	1	There was documented evidence to prove that information relayed through central government agencies (MoFPED, MoLG, OPM, MDAs, etc) e.g. circulars, guidelines, policies and procedures (on DDEG, NAADS, NUSAF, etc) was disseminated or remitted to Lower level Local Governments (LLG). Seen was the District Planner's Power Point Presentation to LLG stakeholders dated 9th/3/2017 and disseminating (DDEG) planning guidelines. The presentation cover other aspects such as PRDP.

Agge	and the second second as	• Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc) with the public to provide feed-back on status of activity implementation: score 1.	1	For the FY 2016/17, there was documented evidence for the use of Community Group Discussions/Dialogues as seen in the Nomo Sub-county Baraza DIO Report dated 5th/10/2016 involving OPM and ADLG officials (LCV Chair person, RDC and CAO) to discuss the districts performance structured around departmental presentations. Additionally, there was documented evidence for the use of Radio Talk Shows as seen in the Divine FM (90.6) Radio Programme Report by the DIO dated 31st/3/2017 that engaged selected district Heads of Departments to communicate about selected government programmes (e.g. DDEG, NUSAF, UWEP and YLP) .
-	essment area: Social a	nd environmental safeguar	ds	
25	The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles Maximum 4 points on this performance measure.	• Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2.	2	Gender Focal Person provided guidance on; Report on sensitisation and orientation of key district and sub county stakeholders in gender mainstreaming dated 18th Dec 2017 signed by CDO-GFP(34M,21F attendance) Activity report on the training of health unit in charges and Police officers on clinical management of GBV and rape on 13 Oct 2016 signed by CDO, Report on refresher training of infrastructure management committee members 21-23 Aug 17.attended by 18 members(10F and 18M)
		• Evidence that gender focal point has planned activities for current FY to strengthen women's roles and that more than 90% of previous year's budget for gender activities has been implemented: score 2.	0	Planned activities for current FY include; Community mobilisation and awareness of gender issues, Promotion of economic empowerment of women, skills enhancement of women leaders, Gender responsive monitoring and evaluation in sectors and LGs. however 50 % activities for previous year's budget for gender activities were implemented due to budget shortfall

LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition

Maximum 6 points on this performance measure

Evidence that
 environmental screening
 or EIA where
 appropriate, are carried
 out for activities, projects
 and plans and mitigation
 measures are planned
 and budgeted for: score
2

Environmental screening reports and plans were carried out for the following projects;

Sova bean production in Alworogeng parish

Soya bean production in Alworoceng parish, lbuje sub county signed by environment officer on 21/01/2017,

Atana p7 Abolo west-Malaba community access road(8.2km) watershed Ikokom Gueno signed by district environment officer on 4/01/2017,

Amok –Oriye Agela community access road (10.7km)signed by district environment officer on 4/01/2017,Amiamola-Acinanga community access road (4.1km) lower Nile catchment signed by environment office on 4/1/2017

• Evidence that the LG integrates environmental and social management plans in the contract bid documents; score 1

Contract bid documents integrated environmental and social managements plans for ;

Construction of 2 classroom block with office and store at Boda PS identified maintenance of excavations and excavations free from surface water at 200,000/=,

Drilling and installation of 12 deep wells under lot 1 integrates construction of drainage pattern at 350,000/=,

Opening of Teibu-Angayki community acess road, restoration of sites ,quarries and borrow pits at 3,000,000/=

• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc): score 1	1	The LG had consent and voluntary land contribution forms for; Community access road in Nabieso Sub county signed by land owners LC1 and LC2 on 29/12/2016, Opar community access road signed by land owners LC I and LC II of Aduku sub county on 3/1/2017. Land acquisition for Malaba market between Imat Yonia (seller) and Apac SC LG signed by sub county chief dated 3 Aug 2017.recommended by Contract committee members Min CC/08/11/2017-18 on 24th/11/2017 signed by CAO,A byeto Stella on 28-11-2017
• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2	2	The LG had environmental and social Certification forms for; Certificate of environmental restoration of rehabilitation of community access roads in Chegere sub county signed by district Engineer and environment officer on 2/12/2016, Rehabilitation of community access roads in Inomo Sub county signed by district engineer and environment officer on 25/04/2016, Certificate of compliance for construction of Alira via oder swamp to Abongomola HC II community access road (12.5km)signed by environment officer on 14/4/2017



LGPA 2017/18

Educational Performance Measures

Apac District

(Vote Code: 502)

Score 67/100 (67%)

Educational Performance Measures

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Human	Resource Management		
1	The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per	• 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	4	Apac DLG has budgeted for a Head Teacher and 7 teachers per school as evidenced in approved budget estimates FY 2017/18.
	Maximum 8 for this performance measure	• Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4	4	Apac DLG has made the required deployments as evidenced by the 2017/18 list schools by S/County compiled by the DEO
2	LG has substantively recruited all primary school teachers where there is a wage bill provision Maximum 6 for this performance measure	• Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0	6	Apac has filled all (100%) of the 1527 positions in the structure for primary school teachers. Verified the evidence from the staff list of 2017/18

3	LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision. Maximum 6 for this performance measure	• 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	6	• Apac DLG has substantively filled all the apositions of inspectors provided in the wag bill as evidenced by the 2017/18 education department staff list.
4	The LG Education department has submitted a recruitment plan covering primary teachers and	Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of Primary Teachers: score 2	2	No recruitment plan in place because all positions of teachers are filled as evidence by the FY 2018/17 performance contact
	school inspectors to HRM for the current FY. Maximum 4 for this performance measure	Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of School Inspectors: score 2	2	There is no recruitment plan needed since all positions of inspectors are substantively filled as evidenced by the staff list.
5	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.	Evidence that the LG Education department appraised school inspectors during the previous FY • 100% school inspectors: score 3	3	There are 2 Inspectors of Schools in Apace District: 1. Senior Inspector of Schools- Personal File ref no. CR/D/ 10198. Appointed on 31/05/2012 as per Min Ext.no. 27/2012. (Appraisal was not conducted, Inspector was on interdiction). 2. Inspector of Schools- Personal File Ref CR/D/12567. Appointed on 1/05/2017as pref no. CR/156/1 and Min Ext. no. 08/2017 (c). Appraisal not conducted as the Inspector was appointed in FY 2016/17.
	Maximum 6 for this performance measure			

A		Evidence that the LG Education department appraised head teachers during the previous FY. • 90% - 100%: score 3 • 70% - 89%: score 2 • Below 70%: score 0	0	There was no verifiable evidence on file to indicate that the Primary Head teachers were appraised during the calendar years 2016 and 2017. Ten files were sampled but they all had incomplete information. some had old information for calendar year 2015. The HRM and DEO indicated that the Sub county Chiefs had not yet returned the files to the DEO's office for endorsement.
6	The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools Maximum 3 for this performance measure	• 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	1	The Apac DLG received several circulars and guidelines and communicated them to the district, They include the following seen by the assessor in the DEO's office: • Achievements on Primary schools Pupils and Teachers in Uganda in Numeracy and Literacy in English disseminated in 2017. • Guidelines of Feeding and Nutrition intervention Program for use in UPE and Universal Post Primary Education and Training (UPPET) school systems • Placement information guide for Primary seven leavers (2017 edition)
		• 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, including on school feeding: score 2	0	There was no documentary evidence to show that DEO held any sensitisation meetings with H/teachers regarding any guidelines or circulars

7	The LG Education Department has effectively inspected all private and public primary schools Maximum 12 for this performance measure	• Evidence that all private and public primary schools have been inspected at least once per term and reports produced: o 100% - score 12 o 90 to 99% - score 10 o 80 to 89% - score 8 o 70 to 79% - score 6 o 60 to 69% - score 3 o 50 to 59% score 1 o Below 50% score 0.	12	Apac DLG has made the requisite inspection for all (100%) private and public schools during 2016/17. Verified the evidence from the Q1 report of 30/10/16 Q2 of 20/02/17 Q3 on 3/4/17 and Q4 on 30/06/117
8	LG Education department has discussed the results/reports of school inspections, used them to make recommendations	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	0	There was no documentary evidence to show that Apac DLG Education departmental had met and discussed inspection reports.
	for corrective actions and followed recommendations Maximum 10 for this performance measure	• 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	0	No evidence to show that APAC DEO had submitted school inspection reports to the DES
		Evidence that the inspection recommendations are followed-up: score 4	0	There was no evidence that the inspection recommendations are followed up
9	The LG Education department has submitted accurate/consistent reports/date for school lists and	• Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5	5	The data submitted by the DEO of 108 schools for 2016/17 government aided primary schools is consistent with the EMIS (108) and PBS (108) data
	enrolment as per formats provided by MoES Maximum 10 for this performance measure	Evidence that the LG has submitted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and OBT: score 5	0	The data of 2016/17 government aided primary school enrolment of 105,764 submitted by the DEO is not consistent wit EMIS (104500) and OBT (104000)

	The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council Maximum 4 for this performance measure	• Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etcduring the previous FY: score 2	2	The Education, Health and Sanitation (E Committee is responsible for education of top of other social sectors. The committee met 6 out of the 6 mandatory times (i.e. the 1st/3/2017, 15th/6/2017, 19th/4/2017, 21st/9/2016, 24th/9/2016 and 27th/7/2017 A review of the committee minutes made available confirmed that sometimes (e.g. the 24th/9/2016 pages 4-7) the standing committee discussed education service delivery issues including departmental quarterly updates on priorities and report as well as challenges and recommendations. Even so, there was nevidence in the minutes of discussion of results from Performance Assessments, PAC Reports, inspection and monitoring.
		• Evidence that the education sector committee has presented issues that requires approval to Council: score 2	2	The council meetings on the 29th+30th/6/2017 (pages 7-8) and 21st - 22nd/12/2016 (page 7) deliberated on El Committee reports with issues that requi council's approval.
11	Primary schools in a LG have functional SMCs Maximum 5 for this performance measure	Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0	5	The Apac school management committee meet the guidelines on gender composition as evidenced by the minutes of the meetings by the following sampled SMCs Tebeke P/S SMC 2/6 (Catholic Church Founding body) are women Ayabi P/S SMC 2/6 (COU as Founding Body) are Women Olelpek P/S SMC 2/6 (Catholic Church Founding Body) are women
12	The LG has publicised all schools receiving non-wage recurrent grants Maximum 3 for this performance measure	• Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3	0	No lists of schools receiving UPE funds were seen publicized on the DEO or on t CAO's notice board

The LG Education department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30: score 4	0	The procurement requests seen were submitted on 27/9/2017
The LG Education department has certified and initiated payment for supplies on time Maximum 3 for this performance measure	• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points	3	The education department certified and initiated payment for suppliers on time as seen from the payment requests and vouchers below; • Request from Gen Rwot Enterprises Ltd for construction of Atigolwok 5 stance drainable pit latrine dated 3/4/2017 was certified and forwarded on 13/4/2017 and paid on 15/5/2017. • Request for construction of a two classroom block with office and store at Boda P/S by Roovaco (U) Ltd dated 10/2/2017 was certified and forwarded on 20/2/2017 and paid on 13/3/2017. • Request for payment for construction of a semi detached staff house under SFG at Abalokweri P/S by Kast engineering works Ltd dated 27/1/2017 foerwrded by engineer on 17/2/2017 and paid on 24/2/2017.
Assessment area: Financi	ial management and reporting		

15	The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure	• Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by mid-July for consolidation: score 4	0	According to the LG Planner's records and evidence from the Q4 Consolidated APR for the FY 2016/17, while the education department submitted inputs to the plannin unit for all 4 quarters for FY 2016/17 (i.e. Q1 - 10th/11/2016 Receipt No: 0033; Q2 – 27th/2/2017 Receipt No: 0416; Q3 – 29th/5/2017 Receipt No: 0774; and Q4 – 3rd/8/2017 Receipt No: 0898), the submissions were sometimes slow, hence the late submission of the Q4 APR (meant to be submitted before 31st/7/2017).
16	LG Education has acted on Internal Audit recommendation (if any) Maximum 4 for this performance measure	• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points o If all queries are not responded to score 0	4	From the information in all the quarterly internal audit reports 2016/17 the Educatio department had no internal audit queries in FY 2016/17.
Asset 17	LG Education Department has disseminated and promoted adherence to gender guidelines Maximum 5 points for this performance measure	Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc: Score 2	2	Apac DEO disseminated guidelines as evidenced in the report on the two day training for senior women /male teachers o menstrual Hygiene management in Schools that took place on 09 to 11 November 2016 at Scouts Hall
		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	0	The was no evidence to show disseminatio of guidelines on sanitation for girls

		Evidence that the School Management Committee meet the guideline on gender composition: score 1	1	The Apac school management committees meet the guidelines on gender composition as evidenced by the minutes of the meetings by the following sampled SMCs: • Tebeke P/S SMC 2/6 (Catholic Church as Founding body) are women • Ayabi P/S SMC 2/6 (COU as Founding Body) are Women • Olelpek P/S SMC 2/6 (Catholic Church as Founding Body) are women
18	LG Education department has ensured that guidelines on environmental management are disseminated Maximum 3 points for this performance measure	• Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc): score 3:	3	The DEO in collaboration with District Environmental Department issued guidelines on Environment as evidenced in the following reports compiled by the District Environmental Officer on 31/07/17 and 18/01/17 respectively: • Environmental compliance inspection report on Good Foundation Junior School • Environment compliance Inspection report on Iteko P/S



Health Performance Measures

Apac District

(Vote Code: 502)

Score 70/100 (70%)

Health Performance Measures

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Human res	source planning and manag	gement	
1	LG has substantively recruited primary health workers with a wage bill provision from PHC wage Maximum 6 points for this performance measure	Evidence that LG has filled the structure for primary health workers with a wage bill provision from PHC wage for the current FY • More than 80% filled: score 6 points, • 60 – 80% - score 3 • Less than 60% filled: score 0	6	out of the 390 approved staff positions for health facilities in Apac 335 (86%) were filled with a wage bill available in the approved annual work plan. A document showing list of staff in each of the health facilities by name an the annual work plan with the wage bill is available at the office of the DHO for verification.
2	The LG Health department has submitted a comprehensive recruitment plan to the HRM department Maximum 4 points for this performance measure	Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers: score 4	4	A comprehensive recruitment plan was developed to fill vacant positions and was submitted to the HR. A copy is available at the office of the DHO.

3	The LG Health department has ensured that performance appraisal for health facility in charge is conducted Maximum 8 points for this performance measure	Evidence that the health facility in-charge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0	4	Two staff (the Medical Superintendent of Apac Hospital and the In-Charge of Aduku HC IV) qualified to be appraised by the DHO. 1. Medical Superintendent of Apac Hospital- Personal File Ref- CR/D 11851. Appointed on 1/10/2007 ref Minute Ext.no. 13/2007. Appraised on 1/07/2016. Performance Agreement signed on 1/07/2016 and performance Report endorsed by the CAO on 15/07/2017. In- Charge Aduku HC IV: Personal File Ref: CR/D/11431. Appointed on 1/10/2007 ref. CR/160/1 No Appraisal Documents seen on file at the time of the assessment.
4	The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY. Maximum 4 points for this performance measure	• Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4	4	This evidence was established. The list of health workers deployed to health facilities matched with the staff included in the annual work plan with a budget for the current FY. Both documents are filed at the office of the DHO for verification.

5	The DHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities Maximum 6 for this performance measure	• Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3	3	There was proof that these documents were communicated to health facilities. For example on January 5 2017, a circular entitled "efficient use of resources provided by development partners" was signed by the PS ministry of health; ADM 246/502/01. This circular was received and endorsed by the DHO. Copies of the endorsed circular were made and sent to each of the health facilities on 9/02/2017 to pass on this message. This circular is available for verification at the office of the DHO. On 10/11/2016 The DHO made email communications to the incharges of Aduku HC IV and Apac General Hospital sharing guidelines on utilization of PHC funds to disseminate to lower level health facilities. A printed copy of this email is filed at the office of the DHO.
		• Evidence that the DHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3	0	There was no evidence at the office of the DHO to support that these meetings were held.
6	The LG Health Department has effectively provided support supervision to district health services	Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3	3	Apac general hospital and Aduku HC IV, the only facilities at this level in Apac wer both supervised by the office of the DHO. Evidence of this activity is included in the support supervision reports of 30/05/2017, 14/11/2016, and 23/02/2017 filed at the DHOs office for verification.
	Maximum 6 points for this performance measure	Evidence that DHT has supervised lower level health facilities within the previous FY: • If 100% supervised: score 3 points • 80 - 99% of the health facilities: score 2 • 60 - 79% of the health facilities: score 1 • Less than 60% of the health facilities: score 0	2	The DHT supervised 82% (28/34) of of the health facilities in the district. Details of these supervision activities are included in the support supervision reports for the previous FY with dates; 20/07/2016, 6/10/2016, 14/11/2016, 12/12/2016, 23/02/2017 and 30/05/2017.

7	The Health Sub- district(s) have effectively provided support supervision to lower level health units Maximum 6 points for this performance measure	Evidence that health facilities have been supervised by HSD and reports produced: • If 100% supervised score 6 points • 80 - 99% of the health facilities: score 4 • 60 - 79% of the health facilities: score 2 • Less than 60% of the health facilities: score 0	0	Maruzi HSD that was sampled only supervised 59% (10/17) health facilities which it is mandated to support supervise in Apac. According to the support supervision report filed at the office of the MS Apac General Hopsita, only Ibuje HC II, Alodo HC II, Apoi HC II, Ayago HC II, Kungu HC II, Taboke HC III, Taboke HC II (Mission) Wansolo and Alenga were the only ones supervised during the previous FY
8	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	• Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4	4	Discussion of support supervision reports was confirmed. At sampled health facilities, Olelpek HC II and Biashara HC II, findings of support supervision were discussed with health facility management, recommendations were generated and documented in the support supervision book on the same day this exercise was conducted. For example support supervision at Olelpek on 05/08/2016 (for micro plan monitoring) 31/08/2016 and 31/10/2016 (integrated) recommendations were made in the support supervision book for follow up.
	Maximum 10 points for this performance measure	• Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6	6	Follow up of recommendations was confirmed. For example during a support supervision exercise at Kungu HCII on 15/12/206, it was established that the incharge was selling hepatitis B vaccines. This issue was discussed in the DHT and council meetings and it recommended to take disciplinary action against this officer. This matter was forwarded to the CAO who instructed interdiction of the officer effective 20/12/2016 and immediate reduction of the officers' salary to a half. Details are available in the personnel file of this officer in HR department.

9	The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH Maximum 10 for this performance measure	• Evidence that the LG has submitted accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports and OBT: score 10	10	LG has submitted consistent and accurate data regarding the list of health facilities. All the 28 government aided facilities that report through the district HMIS system were also confirmed in the OBT. HMIS reports and OBT were filed at the office of the DHO at the time of the assessment.
Asse	essment area: Governand	ce, oversight, transparency	and acc	countability
10	The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council Maximum 4 for this performance measure	• Evidence that the council 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	2	The Education, Health and Sanitation (EHS) Committee is responsible for health on top of other social sectors. The committee met 6 out of the 6 mandatory times (i.e. on the 1st/3/2017, 15th/6/2017, 19th/4/2017, 21st/9/2016, 24th/9/2016 and 27th/7/2016). A review of the committee minutes made available confirmed that sometimes (e.g. on the 24th/9/2016 pages 7-9) the standing committee discussed health service delivery issues including departmental quarterly updates on priorities and reports as well as challenges and recommendations. Even so, there was no evidence in the minutes of discussion of results from Performance Assessments, LG PAC Reports, supervision and monitoring.
		Evidence that the health sector committee has presented issues that require approval to Council: score 2	2	The council meetings on the 29th+30th/6/2017 (pages 7-8) and 21st + 22nd/12/2016 (page 7) deliberated on EHS Committee reports with issues that required council's approval.
11	The Health Unit Management Committees and Hospital Board are operational/functioning Maximum 5 points	Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues): • If 100% of randomly sampled facilities: score 5 • If 80-99%: score 3 • If 70-79%:: score 1 • If less than 70%: score 0	5	HUMC meetings for Biashara were held on 10/03/2016, 9/12/2016, 7/04/2017 and 1/6/2017. For Aganga HC II, on 20/10/2016, 30/ 12/2016, 31/05/2017, Atar HC II on 6/03/2017, 27/03/2017. All HUMC meetings held discussed PHC releases and some generated activity budgets to guide activity implementation.

12	The LG has publicised all health facilities receiving PHC nonwage recurrent grants Maximum 3 for this performance measure	• Evidence that the LG has publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards: score 3	3	The LG has has publicized PHC releases for Q 1, 2 and 3 for all the health facilities receiving PHC none wage support in the district. Copies of releases are displayed on the Notice board of the health department.
Asse	essment area: Procureme	ent and contract manageme	ent	
13	The LG Health department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget	• Evidence that the sector has submitted procurement requests 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	2	The LG has submitted the procurement request 2017/2018 the following items: completion of construction of a maternity at Olepek, renovation of outpatient department, construction of 5 stance latrine, renovation and extension of mortality block and, construction of a laboratory block, at Apac general hospital on 20/04/2017. A copy procurement request is available for verification at the office of the DHO.
	Maximum 4 for this performance measure	Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2	0	The LG has submitted PP form 5 to PDU for completion of construction of a maternity ward renovation Olepek, renovation of outpatient department, construction of 5 stance latrine, renovation and extension of mortality block and, construction of a laboratory block, at Apac general hospital on 20/10/2017
14	The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS Maximum 8 points for this performance measure	 Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time: 100% - score 8 70-99% - score 4 Below 70% - score 0 	4	The district has supported procurement of medical supplied for Apac General Hospital and Aduku HC IV. The DHO participated in quantification of medicines required before the health facility management finally generated a procurement plan. However the copy of the procurement plan for the lower level health facilities was not available at the DHOs office although it was reported as having been developed.

15	The LG Health department has certified and initiated payment for supplies on time Maximum 2 for this performance measure	• Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points	2	The DHO certified and recommended suppliers timely for payment as seen from the sampled payment requests and vouchers below; • Request from Agwai supply and Construction Company Ltd for the rehabilitation of the operating theatre at Apac hospital dated 12/5/2017 was certified on 11/6/2017, forwarded on 13/6/2017 and paid on 13/9/2017. • Request for payment by Kast engineering works Ltd for construction of a 2 stance drainable pit latrine and 2 placenta pits at Chawente H/C II and Olelpek H/C II dated 14/4/2017 was certified and forwarded on 19/6/2017 and paid on 13/9/2017. • Request from Agwai supply and Construction Company Ltd for the renovation of the operating theatre at Apac hospital dated 15/5/2017 was certified on 15/6/2017 and paid on 13/9/2017.
Asse	essment area: Financial r	management and reporting	1	
16	The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure	• 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	0	According to the LG Planner's records and evidence from the Q4 Consolidated APR for the FY 2016/17, while the health department submitted inputs to the planning unit for all 4 quarters for FY 2016/17 (i.e. Q1 - 10th/11/2016 Receipt No: 0033; Q2 – 27th/2/2017 Receipt No: 0416; Q3 – 29th/5/2017 Receipt No: 0774; and Q4 – 3rd/8/2017 Receipt No: 0898), the submissions were sometimes slow, hence the late submission of the Q4 APR (meant to be submitted before 31st/7/2017).

17	LG Health department has acted on Internal Audit recommendation (if any) Maximum 4 for this performance measure	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 • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0	2	The health department had no internal audit queries in first, second and third quarter internal audit reports. However, there were audit queries and issues of concern in the fourth quarter internal audit report FY 2016/17. For example the issue of Apac hospital not preparing and presenting monthly financial statements and the hospital electricity bill accumulation. Also lower health units not preparing financial statements. A copy of follow up letter to the Medical superintendent from CAO was on file dated 28/3/2017. LGPAC quarter four reports, page 4 has responses from the Hospital administrator and the Medical superintendent on the issues and it also has recommendations on the findings.
	ssament area. Social and			The IIIIMO we when it is a
18	Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health	Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2	2	The HUMC membership for sampled health facilities, Apac general hospital with 2/5 (40%) selected members being females, Olelpek HC II and Biashara HC II, 2/5 (40%) members being females meet the gender requirements.
	facilities. Maximum 4 points	• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2	0	These guidelines were not issued to health facilities. The DHO had no idea having received these guidelines at the LG from the ministry of Health.
19	The LG Health department has issued guidelines on medical waste management Maximum 2 points	Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal: score 2 points.	0	These guidelines have not been issued by the DHO to health facilities. There was not evidence that these guidelines were received by the LG.



LGPA 2017/18

Water & Environment Performance Measures

Apac District

(Vote Code: 502)

Score 81/100 (81%)

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Plannir	g, budgeting and execution	n	
	The DWO has targeted allocations to subcounties with safe water coverage below the district average. Maximum score 10 for this performance measure	• Evidence that the LG Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: score 10	10	 The Safe Water Coverage data for Apac District LG show that the district has safe water access of 75%. Four sub counties were below district safe water access coverage i.e Akokoro S/C-65%, Chawente S/C-61%, Ibuje S/C-68%, & Nambeiso S/C-55%. According to the AWP for Apac DLG in FY 2017/18 received by the MoWE on 11th Augus 2017, a number of deep wells and borehole rehabilitations were allocated i.e; Akokoro S/C-2 deep wells & 2 borehole rehabilitations. Chawente S/C-3 deep wells & 2 borehole rehabilitations. Ibuje S/C-2 deep wells & 2 borehole rehabilitations. Nambeiso S/C- 2 deep wells, 2 borehole rehabilitations & a 5-stance VIP latrine.
2	The LG Water department has implemented budgeted water projects in the targeted subcounties (i.e. subcounties with safe water coverage below the district average) Maximum 15 points for this performance measure	• Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15	15	 In the annual progress report for quarter four of FY2016/17 received by MoWE on 11th August 2017, Apac DLG implemented the following budgeted water projects; Akokoro S/C-3 deep wells & 1 borehole rehabilitation. Chawente S/C-2 deep wells & 2 borehole rehabilitations. Ibuje S/C-3 deep wells & 3 borehole rehabilitations. Nambeiso S/C- 2 deep wells & 2 borehole rehabilitations.

3	The LG Water department carries out monthly monitoring and supervision of project investments in the sector Maximum 15 points for this performance measure	Evidence that the LG Water department has monitored each of WSS facilities at least annually. • If more than 95% of the WSS facilities monitored: score 15 • 80 - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60 - 69% monitored: score 5 • 50 - 59%: score 3 • Less than 50% of WSS facilities monitored - score 0	15	 The Assessor saw borehole construction supervision report for Lot 1 and 2 of FY2016/17. The DWO report dated 15th March 2017 focused on drilling, test pumping, casting and installation supervision for boreholes constructed by Icon Projects Ltd. Another DWO report dated 03rd June 2017 on borehole rehabilitation supervision FY 2016/17 was seen by the assessor. From the assessors view, 98% of the WSS facilities were monitored annually.
4	The LG Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE Maximum 10 for this performance measure	• Evidence that the LG has submitted accurate/consistent data for the current FY: o List of water facility which are consistent in both sector MIS reports and OBT: score 10	10	 The Safe Water Coverage data for Apac District LG show that the district has safe water access of 75%, Abongomola S/C%-95%, Aduku S/C-94%, Akokoro S/C-65%, Apac S/C-86%, Chawente S/C-61%, Chegere S/C-93%, Ibuje S/C-68%, Inomo S/C-77% & Nambeiso S/C-55%. This was similar to the MIS report that shows Apac DLG has safe water access of 75%, Abongomola S/C%-95%, Aduku S/C-93%, Akokoro S/C-65%, Apac S/C-85%, Chawente S/C-61%, Chegere S/C-93%, Ibuje S/C-68%, Inomo S/C-77% & Nambeiso S/C-55%.
Ass	The LG Water	ement and contract manag	jement	Procurement requests to PDU from DWO
	department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance	Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4	0	 were submitted late after April 30th 2017 for instance; Siting, drilling and installation of 18 deep wells under DWSCDG for FY 2017/18 was initiated by the District Water Officer on 26th September 2017. Rehabilitation of 15 deep wells under DWSCDG for FY 2017/18 was initiated by the District Water Officer on 26th September 2017. Construction of 01 drainable latrine at Ogwil landing site, Nambieso S/C under DWSCDG for FY 2017/18 was initiated by the District Water Officer on 26th September 2017.

The DWO has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	• If the DWO prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2	2	 A contract management Plan for FY2016/17 was seen on file in the DWO Reference CR/105/2 i.e Explicit appointment of contracts manager/supervisor of Mr Okello Nelson, Ag district Engineer by the CAO dated 02nd December 2016 was seen for the following projects; Rehabilitation of 19 deep wells by Petemm Logistics Co. Ltd Drilling and installation of 10 deep wells by Icon Projects Ltd Lot 1. Drilling and installation of 10 deep wells by Icon Projects Ltd Lot 2.
	If water and sanitation facilities constructed as per design(s): score 2	2	The designs for WSS visited during field work were found similar with what is mentioned in their Bills of Quantities.
	If contractor handed over all completed WSS facilities: score 2	0	No hand over reports of completed projects were found on file.

• Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 13/3/2017. The payment voucher was with Auditors at the time of assessment so no date of payment. • Request by Petemm logistics company Ltd for rehabilitation of 19 boreholes in Apac DLG dated 20/3/2017 was certified and forwarded for payment on 29/3/2017 and paid on 13/6/2017. • Request for payment for drilling and installation of 10 boreholes by Icon projects Ltd		• If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2	2	 A substantial completion certificate on drilling and installation of 12 deep wells in Apac for FY2016/17 by Icon Projects Ltd was seen. Awarded by the Ag. district Engineer/DWO on 13th March 2017. A payment certificate was also awarded on the same date. A substantial completion certificate on drilling and installation of 10 deep wells in Apac for FY2016/17 by Icon Projects Ltd was seen. Awarded by the Ag. district Engineer/DWO on 13th March 2017. A payment certificate was also awarded on the same date. Hence, it is concluded from the above evidence that DWO appropriately certified all WSS projects.
	 Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 	DWOs timely (as per contract) certified and recommended suppliers for payment: score 3	3	certified and recommended suppliers for payment from the sampled payment vouchers and requests below; • Request for payment for drilling and installation of 10 boreholes by Icon projects Ltd dated 20/2/2017 was forwarded for payment on 13/3/2017. The payment voucher was with Auditors at the time of assessment so no date of payment. • Request by Petemm logistics company Ltd for rehabilitation of 19 boreholes in Apac DLG dated 20/3/2017 was certified and forwarded for payment on 29/3/2017 and paid on 13/6/2017. • Request for payment for drilling and installation of 10 boreholes by Icon projects Ltd dated 27/2/2017 was forwarded for payment on

8	The LG Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 5 for this performance measure	• 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	0	According to the LG Planner's records and evidence from the Q4 Consolidated APR for the FY 2016/17, while the water department submitted inputs to the planning unit for all 4 quarters for FY 2016/17 (i.e. Q1 - 10th/11/2016 Receipt No: 0033; Q2 – 27th/2/2017 Receipt No: 0416; Q3 – 29th/5/2017 Receipt No: 0774; and Q4 – 3rd/8/2017 Receipt No: 0898), the submissions were sometimes slow, hence the late submission of the Q4 APR (meant to be submitted before 31st/7/2017).
9	LG Water Department has acted on Internal Audit recommendation (if any) Maximum 5 for this performance measure	• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 5 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0	5	The water department had no internal audit queries in all the Quarterly audit reports in FY 2016/17.

The LG comm responsible for water met, discussed service delivery issues presented issues that require approval to Community Maximum 6 for performance measure	• Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and	3	The Works, Technical and Community Services (WTC) Committee is responsible for water on top of other works sectors. The committee met 6 out of the 6 mandatory times (i.e. on the 15th/6/2017, 6th/4/2017, 27th/2/2017, 21st/9/2016, 26th/7/2016 and 30th/11/2016). A review of the committee minutes made available confirmed that sometimes (e.g. on the 26th/7/2016 pages 4-6 and 27th/2/2017 page 4) the standing committee discussed water service delivery issues including departmental quarterly updates on priorities and reports as well as challenges and recommendations. Even so, there was no evidence in the minutes of discussion of results from Performance Assessments, LG PAC Reports, supervision, monitoring, and submissions from the District Water and Sanitation Coordination Committee (DWSCC).
	• Evidence that the water sector committee has presented issues that require approval to Council: score 3	3	The council meetings on the 29th+30th/6/2017 (page 8) and 21st + 22nd/12/2016 (page 7+8) deliberated on WTC Committee reports with issues that required council's approval.
The LG Water department has shared information widely to the puto enhance transparency Maximum 6 pot for this performance measure	• 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:	2	 A declaration of funds for third quarter of FY 2017/18 for January to March 2018 was published by the CAO and pinned on noticeboard on 1st February 2018. From the release, Water sector conditional grant for Qtr 3 of FY 2017/18 was Ugshs 10,129,558 as non-wage and Ugshs 222,801,725 as development fund.

• All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2	0	 A 5-stance lined latrine at Wansolo landing site, Akokoro S/C constructed in FY 2016/17 was not labelled at all despite the fact that it was already being used by the community. The field visit by the assessor was done on Tuesday 13th February 2018. Four deep wells for FY 2016/17 visited by the assessor were clearly labelled with name of project, date of construction, contractors name & source of funding; Teitek borehole, Ibuje S/C by Icon Projects Ltd Amocal P/S borehole, Ibuje S/C by Icon Projects Ltd Otuboi borehole, Akokoro S/C by Icon Projects Ltd Akuli A borehole, Apac S/C by Icon Projects Ltd
• Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2	2	 A list of best evaluated bidders for different projects including WSS projects had been displayed on Apac DLG noticeboard i.e Siting, drilling and installation of 18 deep wells(procurement reference no.Apac502/Wrks/17-18/00008). Awarded the contract to Icon Projects Ltd. Contract price: Ugshs 352,363, 529. Rehabilitation of 15 deep wells/boreholes (procurement reference no.Apac502/Wrks/17-18/00009). Awarded the contract to Ngai One Investments Ltd. Contract price: Ugshs 70,848, 120. Construction of a 5-stance drainable drainable latrine at Ogwil Landing site in Nambieso S/C (procurement reference no.Apac502/Wrks/17-18/00010). Awarded the contract to Muganwa ContractorsLtd. Contract price: Ugshs 18,991, 708. Date of display: 13th November 2017 Date of removal:27th November 2017.

12	Participation of communities in WSS programmes Maximum 3 points for this performance measure	• If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1	1	 Application letters for water sources were seen by the assessor including payment receipts/bank slips of Stanbic bank Apac branch for community contribution fee i.e Ayegero L.C.1 village, Apac S/C application for deep well dated 27th September 2017. Telela East L.C.1 village, Abongomola S/C application for deep well dated 18th July 2017. Amowinya L.C.1 village, Akokoro S/C application for deep well with minutes of community meeting dated 04th October 2017.
		• Number of water supply facilities with WSCs that are functioning evidenced by collection of O&M funds and carrying out preventive maintenance and minor repairs, for the current FY: score 2	2	 The DWO opened bank accounts with Centenary Bank, Apac branch for 97 Water User Committees in deposit O & M funds for preventive maintenance and minor repairs. A list of these accounts was pinned in the DWO, Apac DLG.
Assessment area: Social and environmental safeguards				
13	The LG Water department has devised strategies for environmental conservation and management	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	0	There was no EIA report/ environmental screening form for WSS projects seen at DWO and ENR office.
	Maximum 4 points for this performance measure	Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1	1	• The DWO indicated that there has never been cases of unacceptable environmental concerns in the FY 2016/17.

30th November 2016.	Evidence that construction and supervision contracts have clause on environmental protection: score 1	Projects Ltd and the clause on environmental protection was not seen i.e • Drilling and installation of 12 deep wells under PAF/DWSDG Lot 1 awarded to Icon Projects Ltd. Procurement No.Apac502/Wrks/2016-2017/00001. Contract signed by contractor on 19th December 2016. • Drilling and installation of 10 deep wells under PAF/DWSDG Lot 2 awarded to Icon Projects Ltd. Procurement No.Apac502/Wrks/2016-2017/00002. Contract signed by contractor on 30th November 2016.
---------------------	---	--

The LG Water department has promoted gender equity in WSC composition.

Maximum 3 points for this performance measure

 If at least 50% WSCs are women as per the sector critical requirements: score 3

0

- A software report appended in the Quarter four annual progress report for FY2016/17 submitted to MoWE on 11th August 2017 shows WSCs composition for different water facilities.
- 8 out of 18 WSCs (44.4%) had atleast 50% of the members being women as shown below;
- Aminke A borehole, Chegere S/C (M=5, F=4)
- Ayera borehole, Chegere S/C (M=4, F=5)
- Abongokere borehole, Ibuje S/C (M=6, F=3)
- Amocal P/S borehole, Ibuje S/C (M=4, F=5)
- Teitek borehole, Ibuje S/C (M=4, F=5)
- Barmogo borehole, Chawente S/C(M=5,F=4)
- Teopok borehole, Chawente S/C(M=5,F=4)
- Opio-Lunga borehole, Chawente S/C(M=5,F=4)
- Ayago Central borehole, Akokoro S/C(M=5,F=4)
- Otuboi borehole, Akokoro S/C(M=4,F=5)
- Oparomo borehole, Akokoro S/C(M=5,F=4)
- Aora borehole, Aduku S/C(M=5,F=4)
- Aporwegi borehole, Aduku S/C(M=4,F=5)
- Anwangi P/S borehole, Nambieso S/C(M=4,F=5)
- Angeokoma borehole, Nambieso S/C(M=5,F=4)
- Barokeny borehole, Nambieso S/C(M=4,F=5)
- Barlwala A borehole, Inomo S/C(M=5,F=4)
- Aoli B borehole, Inomo S/C(M=4,F=5)

15	Gender- and special-needs sensitive sanitation facilities in public places/RGCs. Maximum 3 points for this performance measure	• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3	3	• The field visit by the assessor on Tuesday 13th February 2018 to a 5-stance lined latrine at Wansolo landing site, Akokoro S/C constructed in FY 2016/17 confirm that the latrine had adequate access and separate stances for men, women and PwDs.
----	---	--	---	---