



Local Government Performance Assessment

Budaka District

(Vote Code: 571)

Assessment	Scores
Accountability Requirements	67%
Crosscutting Performance Measures	75%
Educational Performance Measures	78%
Health Performance Measures	60%
Water Performance Measures	88%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Annual performance contract			
<p>LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.</p>	<ul style="list-style-type: none"> • From MoFPED's inventory/schedule of LG submissions of performance contracts, check dates of submission and issuance of receipts and: <ul style="list-style-type: none"> o If LG submitted before or by due date, then state 'compliant' o If LG had not submitted or submitted later than the due date, state 'non- compliant' • From the Uganda budget website: www.budget.go.ug, check and compare recorded date therein with date of LG submission to confirm. 	<p>Budaka District was compliant with the PFMAA and LG budget guidelines that require LGs to have submitted a Performance Contract to the MoFPED by the 1st of August.</p> <p>The first draft of the Performance Contract was submitted online to the MoFPED on the 13/07/18 and it was rejected with comments. The revised draft was sent on the 18/07/18, which was also rejected with comments and the final copy was sent on the 10/08/18 as reflected on the report generation date indicated on the final copy approved by the PS/ST available at the District Planner's office. The Report was approved by PS/ST on the 22nd of August 2018, as reflected on the LG reports submission/status generated at the MoFPED on the 28th of August 2018</p>	Yes
Supporting Documents for the Budget required as per the PFMA are submitted and available			

<p>LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY by 30th June (LG PPDA Regulations, 2006).</p>	<ul style="list-style-type: none"> • From MoFPED's inventory of LG budget submissions, check whether: <ul style="list-style-type: none"> o The LG budget is accompanied by a Procurement Plan or not. If a LG submission includes a Procurement Plan, the LG is compliant; otherwise it is not compliant. 	<p>Budaka district was Compliant with the LGPPDA Regulations, 2006, that require the LGs to submit budget estimates together with the Procurement Plan.</p> <p>The Budget estimates with the Procurement Plan were submitted on line to the MoFPED on the 10th of August 2018 and approved by MoFPED as per report submission/status schedule generated on the 28th of August 2018.</p>	<p>Yes</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"> • If LG submitted report to MoFPED in time, then it is compliant • If LG submitted late or did not submit, then it is not compliant 	<p>Budaka District was not Compliant with the Budget Preparation guidelines as per the PFMA Act, 2015, that require LGs to have submitted the Annual Performance Report of the previous FY by the 31st of July 2018.</p> <p>The Annual Performance Report was submitted on line to the MoFPED on the 17th of August 2018 as indicated by the report generation date indicated on the hard copy of the Annual Performance Report available at the District.Planner's office.</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"> • If LG submitted all four reports to MoFPED of the previous FY by July 31, then it is compliant (timely submission of each quarterly report, is not an accountability requirement, but by end of the FY, all quarterly reports should be available). • If LG submitted late or did not submit at all, then it is not compliant. 	<p>Budaka district was not compliant with the guidelines as per PFMA Act, 2015, that requires LGs to have submitted all the four quarterly reports to MoFPED by the 31st of July 2018.</p> <ul style="list-style-type: none"> - The Quarter 1 Report was submitted on the 21/03/18 which is after the deadline of 15/10/18 - Quarter 2 Report was submitted on the 5/05/18, which was after the deadline 15/01/18 - Quarter 3 Report was submitted on the 27/04/18 , which was after the deadline of 15/04/18 - Quarter 4 Report was submitted on 17th of August 2018, which was after the deadline of 15/07/18 <p>Reasons cited by the Planner included challenges of the PBS system that kept on shutting down/freezing, not saving data and the customer care from the centre was slow in responding the queries raised by the LGs.</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"> • If LG submitted a 'Response' (and provide details), then it is compliant • If LG did not submit a 'response', then it is non-compliant • If there is a response for all – LG is compliant • If there are partial or not all issues responded to – LG is not compliant. 	<p>Status on implementation of Internal Audit recommendation for 2016/17 seen dated 12/03/2018 and signed by the CAO Mr. Batambuze Abdu and referenced CR/106/1. Received by the Directorate of Internal Audit on 22/03/2018 and MoLG on 22/03/2018 and MoFPED on the same date. Issues pointed out were majorly cleared. This was done before the end of April 2018 which indicates that the LG is compliant.</p>	<p>Yes</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.</p>		<p>From the Auditor General's report the LG obtained an unqualified opinion hence it is compliant.</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"> • A functional Physical Planning Committee in place that considers new investments on time: score 1. 	<p>Budaka district has a Functional Physical Planning Committee, comprised of 7 members that was appointed by the CAO on the 21/03/18 as per appointment letters reference thus CR/156/7. The committee is comprised of the following officers:</p> <ul style="list-style-type: none"> - Senior Environment Officer - District Engineer - Senior Inspector of schools - Physical Planner (Secretary) - District Health Officer - Senior Land Management Officer - Chief Administrative Officer (Chairperson) <p>The Committee met 5 times during the FY to discuss land allocation issues as well as approval of land applications. The committee sat on the following dates:</p> <p>7/09/20 to review and approve the plan for King Faisal primary School and some land applications as per minute number BDPPC06/2017 (6)</p> <p>24/10/2017 to review and approve land applications and 2 investment plans as per minute number BDPPC 05/2017</p> <p>28/12/2017 to review and approve building plans and consider land applications as per minute number BDPPC/05/2017 (06)</p> <p>28/02/2018 to review and approve land applications BDPPC/01/2018 (5)</p> <p>25/05/2018 to review and approve building Plans and land applications as per minute number BDPPC/02/2018 (6)</p>	<p>1</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"> • Evidence that district/ MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD score 1. 	<p>The minutes of the five meetings held on the 7/09/2017, 24/10/2017, 28/12/2017, 28/02/2018 and 25/05/2018 were shared with the ministry of Lands Housing and Urban Development (MoLHUD) on the following dates as evidenced by the dates indicated on the “Received Stamps” of the MoLHUD</p> <ul style="list-style-type: none"> - Minutes of 7/09/2017 submitted on shared on the 18/09/17 - Minutes of 24/10/2017 submitted on 31/10/17. - Minutes of 28/12/17 submitted on 10/01/18 - Minutes of 28/02/18 submitted on 15/03/18 - Minutes of 25/05/18 submitted on 14/06/18 	<p>1</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"> • All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0 	<p>While Budaka District has not yet developed a Physical Development Plan for the entire district, Budaka Town Council has a valid Physical Development Plan (2016-2021), and most of the development plans are approved by the Town Council in consistency with the Physical Development Plan of the Town council. Secondly, the district developed , during the last five years, valid Physical Development Plans for New Growth Areas including :</p> <ul style="list-style-type: none"> - Iki Iki Town Council (formerly a Town Board) valid from 2013-2018 - Kamonkoli Town Council (formerly a Town board) valid from 2013-2018. - Kaderuna Town council (formerly a Town board) valid from 2023-2018. <p>The Town Councils approve private and government architectural plans in consistency with the respective physical plans and submit copies to the district. Before the New Growth Areas became Town Council, the district was approving investments in consistency with the Town Board Physical Plans.</p>	<p>1</p>

<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> Action area plan prepared for the previous FY: score 1 or else 0 	<p>While no Area Action Plans were developed during the previous FY, the district had already developed valid Area Action Plans for the Town Boards and Trading Centres (named earlier in the above indicator) hence there was no need to develop new ones as there were no new Growth Centres that were gazetted in the previous FY.</p>	<p>1</p>
<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2. 	<p>The district Planner provided evidenced to confirm that the priorities in the current Annual Work Plan were based on the outcomes of the Budget Conference.</p> <p>The evidence included a Budget Conference Report for the conference held on 1/11/ 2017 that outlined the key priorities for each sector as indicted below:</p> <p>Health:</p> <ul style="list-style-type: none"> - Construction of Placenta pit at Naboa - Installation of solar system at Lyama HC III - Fencing of Nansanga HC III - Fence Completion at Katira HC III - Installation of Solar Power at maternity ward and replacement of batteries at Kererekere HC IIII - Installation of Solar Power at Kaderuna HC III - Renovation of staff house at Kameruka HC III - Installation of Solar Power in general wards and OPD block at Budaka HC IV - Procurement of 2 office tables hairs, 5 office chairs and 3 filing cabinets for DHOs office - Tilling of District medical stores <p><i>Mentioned on Page 2 of the report</i></p>	<p>2</p>

Education:

Classroom construction (2) at Wailaga and Kaperi Primary Schools

Construction of 5 Stance Pit Latrines at Bulakaka, Idudi, Linghole, Mugiti, Kachomo, Wailagala Primary Schools.

Supply of 3- Seater- desks at Budaka Primary School, St. Peters Nalubembe, Kotinyanga, Kachomo, Bupuchai

Emptying of latrines at Kaperi, Kiryolo, Budaka, Naboa and Lupada primary Schools.

Named on Page 3 of the Budget conference Report.

Water:

Drilling of New Boreholes and Rehabilitation of malfunctioning boreholes at various sites including:

New boreholes at Kaderuna (various sites at Kaderuna sub-county) , Budaka, Lyama, Naboa and Nansanga.

Sites for Borehole Rehabilitation included: various sites at Iki Iki, Lyama and Tadameri sub-counties.

Mentioned on page 4 of the Budget conference Report.

<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If differences appear, a justification has to be provided and evidence provided that it was approved by the Council. Score 1. 	<p>Evidence was produced by the District Planner in form of extracts of Capital Investments from the Five Year District Development Plan (DDP) that was compared with an extract of from the current Annual Work Plan and budget. The projects were the same as envisaged in the 5 Year Plan except that in the current Annual Work Plan and Budget, the project sites are enumerated.</p> <p>The key projects in the DDP included:</p> <p>Education:</p> <ul style="list-style-type: none"> - Construction of 20 Classrooms - Construction of 10 4-in-1 teachers houses - Construction of 350 Latrines <p><i>Mentioned under the Education Sector Priorities on page 170 of the Annual Work Plan on pages 74 of the Annual budget performance Report (Quarter 4 Report).</i></p> <p>Health:</p> <p>Projects indicated in the DDP on page 165 included:</p> <ul style="list-style-type: none"> - Construction of 4 stance pit latrines at selected sites - Fencing of health facilities at selected sites - Renovation of maternity ceilings at selected sites <p><i>The same facilities are detailed at different pages of the current Annual budget performance report (Quarter 4 report) for instance:</i></p> <ul style="list-style-type: none"> - Latrine construction detailed on page 127 of the Q4 report - Fencing of health facilities , detailed on pages 114, and 127 of the Q 4 report - Renovation of maternity ceilings <p>Water</p> <p>Water projects mainly included construction and Rehabilitation of Boreholes and are mentioned on page 221 of the District Development Plan.</p> <p><i>The same projects are detailed out in the Budget performance Report (Q4 report) with specific sites for drilling new boreholes (14 boreholes) and for rehabilitation of 140 boreholes, clearly mentioned. The projects are detailed on pages 115, 123, 130 and 136.</i></p>	
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<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> • Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2. 	<p>Evidence was produced to confirm that Project Profiles were developed and discussed at TPC meetings.</p> <p>The Profiles were appended to the Five year District Development Plan 2015/16 to 2019/20, together with Environmental Mitigation Plans.</p> <p>The education profiles are appended on pages 210,216 and staff house on page 214.</p> <p>The Project Profiles were discussed at the TPC meeting of 11/05/17 as per minute number 06/TPC/5/2017.</p> <p>The profiles are consistent with the standard format as per National Planning Authority guidelines</p>	<p>2</p>
<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> • Annual statistical abstract, with gender-disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum score 1. 	<p>Budaka district developed Statistical Abstracts for the FY 2016/17 that were used for planning, budgeting and resource allocation for the 2017/18 and statistical abstracts for the FY 2017/18 that were used for planning, budgeting and resource allocation for the FY 2018/19</p> <p>Booklets for Statistical Abstracts for both financial years (2016/17 &2017/18) do exist at the Planning unit. The Abstracts for FY 2016/17 that were used for resource allocation for FY 2017/18 were presented to the TPC meeting that sat on 10/08/2017 and discussed under minute number 05/08/TPC/2017.</p>	<p>1</p>

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

Evidence was adduced by the Principal Planner to confirm 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 as follows: An extract of infrastructure projects was made from the Annual Work Plan approved by Council and was compared with an extract of the projects reported on in the Annual Performance Report (Q 4 Report) and all projects were the same as indicated below:

Projects in the AWP (page 20)

Education

- Construction of 2 classrooms at Kamonkoli primary school
- Construction of staff houses at Naboia primary school
- Construction of pit latrines at Nabikeeto, Kakure, Bulangira, Kerekerene, Naboia, Kyali and Nyanza II primary schools

The same projects are reported on in the Quarter four report on pages 71 and 72

Health

- Construction of 4 stance pit latrines at Kerekerene HC III
- Fencing of Kamonkoli HC III
- Fencing of Katira HC III
- Renovation of ceiling at Sapiri HC III

the same projects are reported on in the quarterly report on pages 71 and 72.

Water (page 23 of the AWP)

- Construction of 14 deep boreholes
- Rehabilitation of 7 boreholes
- Construction of 1 Public Toilet

The same projects are reported on in the quarterly report on pages 72 of the Quarterly report.

<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. <ul style="list-style-type: none"> o 100%: score 4 o 80-99%: score 2 o Below 80%: 0 	<p>Obtained the projects monitoring report and this was matched with payments as per the draft financial statements and noted that majority of the investment projects were completed as per work plan by the end of the financial year. All these projects had the retention fees outstanding. The projects include:</p> <ul style="list-style-type: none"> i. Construction of 15 boreholes by KLR (U) Ltd. at a cost of shs. 243,773,250 in the water sources of Idudi B, Namukalo, Likip, Nakabale, Kabuna Centre, Bulyampiti, Buloki, Nachewu, Kamonkoli, Bukaligwonko, Wage, Moru, Mijoyi, Kaderuna and Nampagala. The retention for the above sites was yet to be paid as at the time of the assessment implying achievement of 95% ii. Looked at the construction of office block at Budaka Sub County by M/s Chain Construction Ltd. at a cost of 64,767,604 that was completed by the end of the year pending settlement of the retention fee. iii. Construction of a 2 stance lined pit latrine at Budaka Town Council by JCM General Associates Ltd. that was completed at shs. 9,739,779 pending settlement of retention fee. iv. Construction of 4 stance lined pit latrine at Kerekerene HCIII by M/s Peak Super investment at a cost of shs. 15,904,040 pending settlement of retention fee. <p>All the above projects are at 95% in terms of settlement.</p>	
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<p>The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2 	<p>A review of information contained in the Annual budget performance report (as part of the Q4 report submitted to MoFPED and the Annual Final Accounts confirmed that the projects were completed within the approved budgets.</p> <p>Projects looked at were:</p> <ol style="list-style-type: none"> Construction of boreholes at an estimated cost of shs. 274,500,000 had a contract sum of shs.243,773,250 Construction of office block at kakule sub county at a budgeted cost of shs. 65,000,000 had a contract price of shs. 64,649,604 Construction of 4 stance lined pit latrine at Kerekerene had been estimated at shs. 16,000,000 and was constructed at shs. 15,904,040 (variance is 0.6%) Construction of 2 classroom block at Kadimukoli primary school that was estimated at shs. 47,000,000 was constructed at a cost of shs. 46,909,853 	2
<p>The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that the LG has budgeted and spent at least 80% of the O&M budget for infrastructure in the previous FY: score 2 	<p>The Principal Planner indicated to the Assessor that due to limited funding, sectors do not normally prioritize the allocation of funds for Operations and Maintenance especially that most of the infrastructure projects are new constructions in form of schools, health facilities and/or staff accommodation. For the education sector, most of the routine O&M costs are addressed through the school management Committees or through the intervention of the sub-counties without the involvement of the district.</p> <p>The only traces of O&M in the health sector were in form of rehabilitation/repair works at Sapiri and Kameruka health centres III.</p> <p>- Repair of ceiling at Sapiri HC III</p> <p>Budgeted 9 million Shs. and Spent 5.8 million shillings , constituting a % of 64 %</p> <p>- Repair of Ceiling at Kameruka HC III</p> <p>Budgeted 9 million shillings and spent 9.3 million shillings constituting 93.3 %/.</p> <p>Other O&M costs were for the rehabilitation of boreholes which had a budget of 34 million shillings but spent 56 million shillings constituting an over expenditure of 164% (owing to the more funds that were made available from the uncollected retention fees by the contractors that was utilised to repair more boreholes).</p>	0
Human Resource Management			

<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG has filled all HoDs positions substantively: score 3 	<p>From review of the approved staff structure (approved by council under 03/07/BDLG/COU/2017 and by MoPS on 20th July 2017 ref No.ARC 135/306/01), the LG has 10 departments. Of the approved 10 departments 7 are headed by substantive HoDS while 3 are not substantive. The three HoDs in acting positions are indicated below:</p> <p>a) Higenyi Paul: DEO; appointed on promotion as, a senior education officer and assigned duties of the DEO on 20th July 2017 by CAO</p> <p>b) Kijali Kamwada Cyprian: NRO; appointed as senior environment officer under minute 118/02/2018 on 20th/2/2018. Assigned duties of DNRO on 25th Apr 2018 by CAO.</p> <p>c) Ariokot Florence: Trade Commerce and Industry; appointed as senior commercial officer under minute 184/05/2018 on 14th May 2018.</p> <p>The District reported that they have advertised and failed to attract candidates, for Natural resources the substantive officer retired in April 2018 thus the District has not yet filled it and for trade and commerce, the department has just been operationalized.</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"> • Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2 	<p>Nine of the 10 HoDs, were appraised in 2017/18 FY while 1 was not appraised (Ariokot Florence: Natural Resources officer). The reason why she was not appraised is because she was recruited on 14th May 2018.</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"> • Evidence that 100 % of staff submitted for recruitment have been considered: score 2 	<p>In 2017/18, 34 vacancies were submitted to the DSC under the following submissions: a) 10th Jan 2018 1 Vacancy; b) 15th January 2018 21 vacancies; c) 06th Nov 2017 2 vacancies and d) advert of 14th Sept 2017 10 vacancies.</p> <p>All the 34 (100%) were considered under the following meetings:</p> <p>a) 12th Jan 2018; Minute No 62/01/2018</p> <p>b) 14th Sept 2017; minute no 19 .1 (ii)/09/2017</p> <p>c) 7th Dec 2017; Minutes 59.1/12/2017 – 59.6/12/2017, 59.7/12/2017, 59.8/12/2017-59.11/12/2017</p> <p>d) 23rd Feb 2018; minute nos: 155.0/02/2018 – 163/02/2018</p> <p>e) Meeting of 26th April 2018; minute no: 177/04/2018</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"> • Evidence that 100 % of positions submitted for confirmation have been considered: score 1 	<p>217 staff were submitted to the DSC for confirmation. All the 217 (100%) were considered under the DSC meetings of:</p> <p>a) 31st August; Minute no: 11/08/2017, 11.1/0/2017, 11.2/08/2017 and 11.3./08/2017, 11.4/08/2017 – 12.58/08/2017;</p> <p>b) 28th November 2017; 49.1/11/2017 – 49.7/11/2017;</p> <p>c) 16th January 2018; 77.4/01/2018 -77.6/01/2018;</p> <p>d) 8th Feb 2018; Minute No: 99/02/2018, 100/02/2018, 101/02/2018, 102.0/02/2018 – 102.14/02/2018;</p> <p>e) 19th Feb 2018; 123.0/02/2018 – 125/02/2018; and</p> <p>f) 16th May 2017; minute no: 160.1/05/2017 – 160.74/05/2017.</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"> Evidence that 100 % of positions submitted for disciplinary actions have been considered: score 1 	<p>4 submissions of disciplinary actions were received by the DSC in 2017/18. All the four (100%) submission were handled as indicated below:</p> <p>Stephen Wajobi, handled on 26th April 2018 minute no. 175.1/04/2018</p> <p>Sisye Adonikamu, handled on 26th April 2018. Minute No. 175.2/04/2018</p> <p>Wajega Sam, handled on 8th May 2018. Minute No. 183/05/2018</p> <p>Tagu Ally Moses, handled on 31/08/2017. Minute No. 10/08/2017</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"> 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 	<p>20 new staff were recruited in 2017/18, of these 18 (90%) accessed the payroll within 2 months while 2 accessed after 2 months as indicated below:</p> <p>a) Kigaye Gerald accessed in May because MoPS had blocked the position (IPPS had indicated that there was no position after the deletion of the staff who had been promoted)</p> <p>b) Namongin Esther accessed in July because MoPS had blocked the position (IPPS had indicated that there was no position after the deletion of the staff who had been promoted)</p> <p>It was reported by the District that on many occasions there are delays in enrolling staff on the payroll because Ministry of Finance delays issuing supplier numbers which is a requirement. Additionally the District reported that MoPS still controls staff payroll which it generates for Districts every month.</p>	<p>0</p>

<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2 	<p>From the review of pension list, it was found out that 13 new staff were due for retirement in 2017 . Of the 13, only 6 (46%) had accessed the payroll. However even among the 6 none of them had accessed within the 2 months after retirement as indicated below for two of the retired officers.</p> <p>a) Wasakana Betty 31/1/2018, accessed in June 2018</p> <p>b) Kageni Henry 25/12/2017, accessed in June 2018</p>	<p>0</p>
<p>Revenue Mobilization</p>			
<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> If increase in OSR (excluding one/off, e.g. sale of assets) from previous FY but one to previous FY is more than 10 %: score 4. If the increase is from 5% -10 %: score 2. If the increase is less than 5 %: score 0. 	<p>Total of OSR for FY 2016/2017 Shs. 149,645,976</p> <p>Total of OSR for FY 2017/2018 Shs. 114,980,013</p> <p>The decrease in OSR was therefore Shs. -34,665,963</p> <p>Percentage decrease is therefore. – 23.1%</p> <p>Received the draft financial statements for FY2017/18 that were received by the Accountant General on 06/09/2018. The local revenue for the FY 201718 was shs. 213,980,013. This however, includes disposal of assets amounting to shs. 99,000,000. For purposes of the assessments this is reduced from OSR as explained in the manual. The OSR therefore used is shs. 114,980,013</p>	<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"> If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10 %: then score 2. If more than +/- 10 %: Score 0. 	<p>Total Local Revenue Planned/Budgeted for FY 2017/2018 Shs. 180,000,000</p> <p>Total Local Revenue collected during FY 2017/2018 Shs. 114,980,013</p> <p>The revenue collection ratio is thus 63.9%</p> <p>From the approved work plan and budget estimates for the FY 2017/18 on page 4 the local revenue budgeted for the District was shs.231,458,000 . This includes amount as expected from the lower Local Governments. The budget component of the District is only shs. 180,000,000. This implies that 36.1% of the income was not collected hence the LG does not score under the indicator.</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"> Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2 	<p>Local Revenue collections subjected to sharing with LLGs Shs.7,500,000 for FY 2017/18</p> <p>Amount of local revenue remitted to LLGs in FY 2017/18 Shs. 4,875,000</p> <p>Status of compliance: 65%</p> <p>Reviewed payment voucher No. 02/11/2017 dated 22/11/2017 in which the District in among many transfers was transferring shs. 4,875,000 to Mugiti Sub county as 65% share of the local revenue collected from Uganda Clays. It is only the collection from Uganda Clays that the District makes on behalf of the sub counties. In other instances it's the lower local governments that collect on behalf of the District and only remit 35% to the District.</p>	<p>2</p>
<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the total Council expenditures on allowances and emoluments- (including from all sources) is not higher than 20% of the OSR collected in the previous FY: score 2 	<p>Total of OSR for FY 2017/2018 Shs. 114,980,013</p> <p>Total of OSR for FY 2016/17 was shs. 149,645,976</p> <p>The percentage is 11.5 % which is below the threshold of 20% and thus the scores maximum points on the indicator. Total payment to Council is shs. 17,230,000. i.e. voucher 08/03/2018 of shs.2,422,000, Voucher 02/04/2018 of shs. 2,300,000, Voucher 26/11/2018 of shs. 2,550,000, Voucher 06/12/2017 of shs. 2,958,000, voucher 24/08/2017 of shillings 2,300,000 Voucher 11/09/2017 of shs. 2,300,000 and Voucher 15/09/2017 of shs. 2,400,000</p>	<p>2</p>
<p>Procurement and contract management</p>			
<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2 	<ul style="list-style-type: none"> The District has a Substantive Senior procurement officer (Kutta Noah) appointed on 29th Nov 2007 under DSC minute No: 70/2007. Additionally, the District has a procurement officer (Kuchana Sam) appointed under DSC minute No: 161/02/2018 	<p>2</p>

The LG has in place the capacity to manage the procurement function

Maximum 4 points on this performance measure.

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

TEC produced and submitted reports to the Contracts Committee.

For example

(a) Technical evaluation Committee meeting was held 14/08/2017 (Ref; BUDA571/WRKS/2017-2018/00004): Construction of staff house, Kitchen and Pit Latrine

Naboa Parents P/S

Produced report 14/08/2017 submitted to contracts committee. The report

Recommended that M/S AFRO GENERAL BUILDING AND CARPENTRY LTD be awarded contract at UGX 96,200,000

(b) Technical evaluation Committee meeting was held 07/08/2017 (Ref; BUDA571/WRKS/2017-2018/00001): Construction of 15 complete bore holes Produced report 07/08/2017 submitted to contracts committee. The report

Recommended that M/S KLR (U) LTD be awarded contract at UGX 240,773,250.

(c) Technical evaluation Committee meeting was held 12/02/2018 (Ref; BUDA571/WRKS/2017-2018/00018):: Construction of a 4-stance pit latrine at Kerekerene HCIII Produced report 12/02/2018 submitted to contracts committee. The report

Recommended that M/S PINE PEAK SUPER INVESTMENTS LTD be awarded contract at UGX 15,904,040.

The LG has in place the capacity to manage the procurement function

Maximum 4 points on this performance measure.

• Evidence that the Contracts

Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations:
score 1

Contracts Committee considered recommendations of the TEC.

For example

a) (Ref; BUDA571/WRKS/2017-2018/00004): Construction of staff house, Kitchen and Pit Latrine Naboa Parents P/S

Report of the contracts committee seating on 18/08/2017, minute no 7/18/8/2017 as per TEC recommendation, Contracts committee looked at the evaluation report and considered its recommendation that M/S AFRO GENERAL BUILDING AND CARPENTRY LTD be awarded contract at UGX 96,200,000

b) (Ref; BUDA571/WRKS/2017-2018/00001): Construction of 15 complete bore holes -Report of the contracts committee seating on 18/08/2017, minute no 6/18/8/2017 as per TEC recommendation, Contracts committee looked at the evaluation report and considered its recommendation that M/S KLR (U) LTD be awarded contract at UGX 240,773,250.

c) (Ref; BUDA571/WRKS/2017-2018/00018):: Construction of a 4-stancece pit latrine at Kerekerene HCIII. Report of the contracts committee seating on 19/02/2018, minute no 10/19/2/2018 as per TEC recommendation, Contracts committee looked at the evaluation report and considered its recommendation that M/S PINE PEAK SUPER INVESTMENTS LTD be awarded contract at UGX 15,904,040.

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

The procurement and Disposal Plan for 2018/2019 year covers all infrastructure projects in the approved (approval date 26/05/2017) annual work plan and budget. For example

- Construction of 2 classroom block at Kyali P/S (Ref; BUDA571/WRKS/2018-2019/00008) at UGX 56,997,598).
- Construction of Office Block at Kachomo S/C (Ref; BUDA571/WRKS/2018-2019/00002) at UGX 76,789,331.
- .Construction of 2 classroom Block at Wailagala P/S Ref; BUDA571/WRKS/2018-2019/00006) at UGX 56,973,782
- Construction of Office Block at Katira S/C Ref; BUDA571/WRKS/2018-2019/00001) at UGX 78,111,331
- Construction of (10) complete bore holes Ref; BUDA571/WRKS/2018-2019/00003) at UGX 158,592,000

In FY 2017/2018 procurements were done as per plan in accordance with the procurement plan).

- Construction of staff house, Kitchen and Pit Latrine at Naboia Parents P/S (Ref; BUDA571/WRKS/2017-2018/00004) at UGX 96,200,000
- Construction of 15 complete bore holes (Ref; BUDA571/WRKS/2017-2018/00001): at UGX 240,773,250.
- Construction of a 4-stanccce pit latrine at Kerekerene HCIII (Ref; BUDA571/WRKS/2017-2018/00018) at UGX 15,904,040.
- Renovation of ceiling Board at Kameruka H/C III HCIII (Ref; BUDA571/WRKS/2017-2018/00022) at UGX 9,827,474
- Construction of a 5-stanccce pit latrine at Nansanga T/C (Ref; BUDA571/WRKS/2017-2018/00024) at UGX 15,453,255

<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/ infrastructure by August 30: score 2 	<p>For FY 2018/2019, By August 30 2018, all bid documents for all investment/infrastructure were prepared above 80%. The Approval date was 4/June/2018 These include:</p> <ul style="list-style-type: none"> • Construction of 2 classroom block at Kyali P/S (Ref; BUDA571/WRKS/2018-2019/00008) at UGX 56,997,598). • Construction of Office Block at Kachomo S/C (Ref; BUDA571/WRKS/2018-2019/00002) at UGX 76,789,331. • .Construction of 2 classroom Block at Wailagala P/S Ref; BUDA571/WRKS/2018-2019/00006) at UGX 56,973,782 • Construction of Office Block at Katira S/C Ref; BUDA571/WRKS/2018-2019/00001) at UGX 78,111,331 • Construction of (10) complete bore holes Ref; BUDA571/WRKS/2018-2019/00003) at UGX 158,592,000 	<p>2</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"> • For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2 	<p>For FY 2017/2018, contract register fully updated (2017-2018).such as</p> <ul style="list-style-type: none"> • Construction of staff house, Kitchen and Pit Latrine at Naboia Parents P/S (Ref; BUDA571/WRKS/2017-2018/00004) at UGX 96,200,000 • Construction of 15 complete bore holes (Ref; BUDA571/WRKS/2017-2018/00001): at UGX 240,773,250. • Construction of a 4-stanccce pit latrine at Kerekerene HCIII (Ref; BUDA571/WRKS/2017-2018/00018) at UGX 15,904,040. • Renovation of ceiling Board at Kameruka H/C III HCIII (Ref; BUDA571/WRKS/2017-2018/00022) at UGX 9,827,474 • Construction of a 5-stanccce pit latrine at Nansanga T/C (Ref; BUDA571/WRKS/2017-2018/00024) at UGX 15,453,255 	<p>2</p>

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

Maximum 6 points on this performance measure.

- For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.

For FY 2017/2018, procurement thresholds were well adhered to. Example of sampled projects Above 50 million (Open Domestic bidding) and below selective

- Construction of staff house, Kitchen and Pit Latrine at Naboa Parents P/S (Ref; BUDA571/WRKS/2017-2018/00004) at UGX 96,200,000(Open Domestic bidding, New Vision Thursday, 1st June 2017)
- Construction of 15 complete bore holes (Ref; BUDA571/WRKS/2017-2018/00001): at UGX 240,773,250. (Open Domestic bidding, New Vision Thursday, 1st June 2017).
- Construction of a 4-stance pit latrine at Kerekerene HCIII (Ref; BUDA571/WRKS/2017-2018/00018) at UGX 15,904,040 (Selective bidding, sent invitations to three Companies. Invitation letter was dated 11/01/2018).
- Renovation of ceiling Board at Kameruka HCIII (Ref; BUDA571/WRKS/2017-2018/00022) at UGX 9,827,474(Selective bidding, sent invitations to three Companies. Invitation letter was dated 11/01/2018).
- Construction of a 5-stance pit latrine at Nansanga T/C (Ref; BUDA571/WRKS/2017-2018/00024) at UGX 15,453,255(Selective bidding, sent invitations to three Companies. Invitation letter was dated 24/01/2018).

<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2 	<p>Projects implemented in the FY 2017/18 were appropriately certified with interim and completion certificates as per technical supervision. For example Completion and interim certificates were available.</p> <p>For example</p> <ul style="list-style-type: none"> • Construction of staff house, Kitchen and Pit Latrine at Naboa Parents P/S (Ref; BUDA571/WRKS/2017-2018/00004) completion certificate dated 15/02/2018 • Construction of 15 complete bore holes (Ref; BUDA571/WRKS/2017-2018/00001): completion certificate dated 15/03/2018 • Construction of a 4-stance pit latrine at Kerekerene HCIII (Ref; BUDA571/WRKS/2017-2018/00018) completion certificate dated 31/03/2018 • Renovation of ceiling Board at Kameruka H/C III HCIII (Ref; BUDA571/WRKS/2017-2018/00022) completion certificate dated 26/06/2018 • Construction of a 5-stance pit latrine at Nansanga T/C (Ref; BUDA571/WRKS/2017-2018/00024) completion certificate dated 29/05/2018 	<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"> • 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 	<ul style="list-style-type: none"> • The FY 2018/2019 project site boards for all projects are not yet erected • But even the ones that were erected previous financial year are not clearly labelled. They miss information on contract value and expected duration 	<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"> • Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4 	<table border="1"> <thead> <tr> <th>Month</th> <th>Status</th> <th>Date</th> </tr> </thead> <tbody> <tr> <td>December 2017</td> <td>Done</td> <td>08/01/2018</td> </tr> <tr> <td>January 2018</td> <td>Done</td> <td>05/02/2018</td> </tr> <tr> <td>February 2018</td> <td>Done</td> <td>05/03/2018</td> </tr> <tr> <td>March 2018</td> <td>Done</td> <td>04/05/2018</td> </tr> <tr> <td>April 2018</td> <td>Done</td> <td>07/05/2018</td> </tr> <tr> <td>May 2018</td> <td>Done</td> <td>04/06/2018</td> </tr> <tr> <td>June 2018</td> <td>Done</td> <td>05/07/2018</td> </tr> </tbody> </table> <p>The LG makes timely and up to date reconciliations as evidence above.</p>	Month	Status	Date	December 2017	Done	08/01/2018	January 2018	Done	05/02/2018	February 2018	Done	05/03/2018	March 2018	Done	04/05/2018	April 2018	Done	07/05/2018	May 2018	Done	04/06/2018	June 2018	Done	05/07/2018	4
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<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • If the LG makes timely payment of suppliers during the previous FY <ul style="list-style-type: none"> – no overdue bills (e.g. procurement bills) of over 2 months: score 2. 	<p>The Local government timely made payment to suppliers and contractors and there were no overdue bills seen. Below are the examples:</p> <ol style="list-style-type: none"> i. Voucher No. 26/12/17W being payment for the construction of 10 boreholes by KLR (U) Ltd. at shs.143,964,000. Request was done on //12/2017 and the District Water Officer recommended for payment on 11/12/2018. Payment was done on 14/12/2017 ii. Voucher No. 01/04/2018 being payment to KLR (U) Ltd. for borehole construction at shs. 76,592,750. Request was done on 01/02/2018 and the water officer initiated and recommended for payment on 21/03/2018. Forwarded to CAO for approval on 22/3/2018 CFO sanctioned payment on 23/3/2018 Approval was done on 26/03/2018 and payment was done on 28/03/2018 iii. Voucher No. 01/06/2018 being payment to Go-Standard Service Ltd. of shs.8,594,319 for construction of 5 stance line pit latrine at Nansanga Trading Centre. Request was done on 23/05/2018 and the District Engineer recommended for payment on30/05/2018 and accounts approved for payment on 31/05/2018. Payment was done on 04/06/2018 iv. Voucher No. 22/01/18 being payment to Budaka District Pump Mechanics of shs.1,083,139 being retention fees. Request was made on 22/01/2018 and the District Water Officer recommended for payment on 22/01/2018. Accounts approved for payment on 23/01/2018 and payment was done on 24/01/2018. v. Voucher No. 22/05/2018 being payment for the rehabilitation of boreholes by Budaka District Pump Mechanics Consultancy of shs. 26,512,277. Request was done on 02/05/2018 and th District water Officer recommended for payment on 03/05/2018. . Accounts 	2																								

approved payment on 14/05/2018 and payment was done on 14/05/2018.

vi. Voucher No. 06/02/18 Educ being payment to Afro General Builders & Carpentry (U) Ltd. for construction of staff houses at Naboa PS. Request was submitted on 14/02/2018. DEO forwarded for payment on 20/02/2018 and accounts approved on 20/02/2018. Payment was done on 20/02/2018

vii. Voucher No. 18/05/2018 being payment to Bandobya Investments and Contractors Limited for the supply of 36 three seat desks. Request was submitted on 02/05/2018 and the DEO forwarded for payment on 24/05/2018. Accounts approved payment on 31/05/2018 and payment was done on 31/05/2018

viii. Voucher No. 03/06/2018 for the construction of a 5 stance pit latrine at Kakule PS by Naki Investments Uganda Limited. Request was submitted on 30/05/2018 and DEO forwarded for payment on 07/06/2018. Payment was done on 12/06/2018 after approval on 07/06/2018

ix. Voucher No. 09/05/2018 being payment to Kenrock Technical Services Co. Ltd for construction of 2 classroom block at Kadimukoli PS . Request was submitted on 08/05/2018 and DEO forwarded for payment on 11/05/2018. Approval of payment was done on 14/05/2018 and payment was done on the same date.

x. Voucher No. 01/06/2018 being payment to Go-Standard Services Limited for the construction of a 5 stance pit latrine at Naboa PS. Request was done on 23/05/2018. DEO forwarded for payment on 05/06/2018 and approved for payment on 06/06/2018. Payment was done on 06/06/2018

xi. Voucher No. 02/06/2018 at Namoli Multi- Contractors for the construction of a 5 stance latrine at Nabiketo PS. Request was submitted on 29/05/2018 and approved for payment on 06/06/2018. Approval was done on 07/06/2018 and payment was done on the same date.

<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG has a substantive Senior Internal Auditor: 1 point. • LG has produced all quarterly internal audit reports for the previous FY: score 2. 	<p>A letter seen from the CAO Mr. Batambuze Abdu dated 13 February 2018 and referenced CR/160/1 appoints Senior Internal Auditor Mr. Mbago Charles as the Principal Internal Auditor on promotion as per the District Service Commission under Minute No. 93.1/02/2018 of 8 February 2018. The District has a substantive Principal Internal Auditor</p>	<p>1</p>
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The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations

Maximum 6 points on this performance measure.

• LG has produced all quarterly internal audit reports for the previous FY: score 2.

Quarter	Date of report	Reference
Quarter 1	20/10/2017	CR/200/1
Quarter 2	15/01/2018	No reference
Quarter 3	24/05/2018	CR/200/1
Quarter 4	27/07/2018	No reference

Obtained and reviewed the quarter 1 audit report prepared by Kaligo Charles Gole, Ag. District Internal Auditor dated 20/10/2017 and signed off on 25/10/2017 as per stamp appended for the Head of internal audit. The report was to District Chairperson and copied to OAG, the PS MoLG, Commissioner Internal Auditor General, MoFPED, CAO Budaka District, PAC Chairman Budaka, DEO Budaka, and Registry. No issues were raised with respect to Water, Education and Health.

Obtained and reviewed Quarter 2 that was issued on 15/01/2018. An item was observed under water w.r.t use of boreholes before commissioning was done. Responses were provided by the water sector. Health and Education had no issues raised.

Reviewed Quarter 3 report that was prepared on 24/05/2018 and received by the District Chairperson on 28/05/2018, Secretary LG PAC on 29/05/2018 . Water had one issue on accountability

Quarter 4 had an issue under Education regarding financial management issues in primary schools

Health had an issue of medicines management in Health Units

<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>PAC is yet to discuss the internal audit findings for the FY 2017/1. There is therefore no evidence that the council and LG PAC have received information on the status of implementation of the internal audit findings.</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"> • Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1. 	<p>Although there is evidence that the internal audit reports are forwarded to the CAO, the LG PAC, There is no evidence that these internal audit reports for the FY 2017/18 were discussed by the LG PAC and follow ups on the findings were done. The reports that were discussed by LG PAC during the FY 2017/18 were relating to findings made in the FY 2016/17.</p>	<p>0</p>
<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG maintains an up- dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4 	<p>Apart from maintaining the Assets register in a manual format, it is properly recorded in line with the format provided for in the manual</p>	<p>4</p>

<p>The LG has obtained an unqualified or qualified Audit opinion</p> <p>Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY:</p> <ul style="list-style-type: none"> • Unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0 	<p>The LG obtained an unqualified report as per the report of the Auditor General for the FY 2017/18</p>	<p>4</p>
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Governance, oversight, transparency and accountability

<p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2 	<p>The Clerk to Council produced evidence to confirm that the Budaka District Council met and discussed service delivery issues including monitoring reports, performance.</p> <p>The evidence was in a set of 6 minutes of Council meetings that were convened during the previous FY to among other issues discuss service delivery. The minutes were reviewed by the Assessor and it was ascertained that indeed the council discusses service delivery issues as indicated below:</p> <p>Meeting of 18/07/2017, under minute number 03/07/BDLG/Cou/2017, discussed and approved the staff structure, discussed the budget allocation and the need for additional funding from government to specifically fund immunisation activities (40 million shillings) and 20 million to fund sanitation activities under the sanitation fund.</p> <p>Meeting of 21/12/2017, under minute number 21/12/BDLG/Cou/2017 under Education issues discussed the issue of the ministry of Education to establish a model UPE school at Wayiraga primary school. Under Health issues; the Council approved the construction of staff houses at Iki Iki HC III funded by USAID PATH programme, to sensitize the communities about the planned indoor spraying programme.</p> <p>Meeting of the 3/01/2018, under minute number 31 and 32/1/BDLG/Cou/18, discussed Water related issues including the concern that the district was experiencing some water shortages due to the fact that some water sources had dried up and some of the boreholes had broken down, the district Chairperson had identified a development partner John 414 to support the rehabilitation of 114 boreholes in the district. Noted the poor sanitation at most of the water sources and cautioned the public about the possible outbreak of Cholera. Discussed the need to recruit a pump mechanic to be responsible for repairing boreholes in the district.</p>	<p>2</p>
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		<p>Meeting of 11/01/2018, under minute number 37/1/BDLG/Cou/18/38/1, discussed the bad state of Nakalama-Tirinyi- Mbale road and the prolonged delays by the contractor (DOTT services) in completing the construction works and the resultant inconveniences to the traffic flow and the excessive dust that was affecting the lives of people.</p> <p>Meeting of the 29/03/ 2018, under minute numbers 48/03/BDLG/2018, 47/03/BDLG/2018 & 43/03/BDLG/2018, under Education, discussed the need to close 48 primary schools that were not meeting the required standards as per ministry of education requirements, approved the newly elected board of Bugwere High School and recommended the promotion of the Senior Education Officer. Discussed the budget allocations for the education department (7,380,884,367=) and Health department allocation of 2,414,072,974=, for FY 2018/19.</p> <p>Under the Water Sector, the issue of Namatara swamp that had caused insecurity between the Bagwere of Budaka district and the Banyole of Butalejja district communities was discussed and an appeal was made to the Ministry of Water and the Environment to intervene in the conflict.</p> <p>Meeting of the 25/05/2018: Education issues were discussed under minute number 5/5/BDLG/Cou/ 05/2018. Health issues were discussed under minute number 53/05/BDLG/Cou/18. A new development partner RHITES-EC had come to the district and would support the district to implement HIV&AIDS as well as malaria, TB and nutrition activities. Issue of staff retirement in the health and education sectors was discussed. Discussed the report of the indoor spraying that had been completed with coverage of 96.2%. The district Nutrition Action plan was also discussed.</p>	
<p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> • Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 1. 	<p>While Budaka district has a designated person appointed by CAO to coordinate response to feedback and complaints from the communities (appointed PAS on 11/09/17 as per letter ref.no. CR/161/3) and to ensure that among other responsibilities receive complaints from the community and channel the complaints to the appropriate officers for action and ensure feedback, <i>there was no solid evidence to confirm that the LG responded to the feedback/ complaints provided by the citizens. There was no evidence to confirm that there was a specified system of recording, investigating and/or responding to grievances. For instance there was no file whereby all correspondences were filed and could be traced.</i></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"> • The LG has specified a system for recording, investigating and responding to grievances, which should be displayed at LG offices and made publically available: score 1 	<p>There was no evidence to confirm that there was a specified system of recording, investigating and/or responding to grievances. For instance there was no file whereby all correspondences were filed and could be traced. The Principal Administrative Secretary had no formal way of recording the complaints other than stating that when he receives the complaints, he channels them to appropriate officers to handle and ensure feedback to the complainants. There was no file for filing correspondences about Grievances and complaints from the communities and the formal feedback provided to the complainants.</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"> • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2 	<p>There was evidence in form of displayed payroll on for the month of September 2018 on the public notice board outside the office of the district Planner. The pensioner schedule for the month of August 2018 was also displayed.</p> <p>Other information displayed included "Verification of Pensioners for FY 2018/19, displayed on the 12/09/18 as per letter reference number CR/167/1. The list indicated 157 pensioners.</p>	<p>2</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> • Evidence that the procurement plan and awarded contracts and amounts are published: score 1. 	<p>There was evidence that excerpts from the Procurement Plan including Best Bidder Call Notices were displayed on public notice boards, and at the notice board at the procurement office. The Best Bidder Evaluated notices capture information including: the dated of the notice and date of removal, method of bidding, the selected bidder and the contract sum.</p>	<p>1</p>

<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> Evidence that the LG performance assessment results and implications are published e.g. on the budget website for the previous year (from budget requirements): score 1. 	<p>While the LG performance results were not published on the budgets website (information was provided to NITA to Upload the results but did not), the LG held a TPC meeting on the 14/06/2018 and the results were discussed under minute number 5/TPC/06/2017. All participants were given hard copies the summarised results were pinned at the notice board. A copy of the summarised results was available at the district planner's office.</p> <p>The Results were also discussed at the DEC meeting that was held on 26/06/2018 as per minute number 08/DEC/06/2018 during which the district chairperson expressed concern over the poor performance and urged the technical staff to ensure that the gaps identified in the assessment exercise are addressed so that the district can register improved performance in subsequent assessments</p>	<p>1</p>
<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1 	<p>The Planner adduced evidence to the effect that the LG communicated and explained guidelines, circulars and policies issued at national level.</p> <p>The evidence included minutes of TPC meetings during which some policy documents/guidelines were disseminated for example:</p> <ul style="list-style-type: none"> - DDEG guidelines were disseminated during the stakeholders meeting that were held on 9/05/2018. The guidelines were discussed by the Planner and other heads of departments and clarification was made on any areas that were not easily understood by the participants. The report of the TPC meeting clearly indicates the areas that were clarified as indicated on Page 9 of the report. - Budget Call Circular 2. Discussed and disseminated during the Senior management Committee meeting that was convened on 27/02/2018, under minute number 103/Mgt/02/2018. - Budget Framework Papers discussed by the Finance and Planning Committee convened on the 7/12/2017 and discussed under minute number 10/ACM/12/2017. 	<p>1</p>

<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that LG during the previous FY conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc.) with the public to provide feed-back on status of activity implementation: score 1. 	<p>The major evidence adduced by the Principal Planner indicated that Radio Talk shows were the major mode of discussions to update the public on the status of activity implementation. The talk shows were conducted at the Bugwere Radio and were presided over by the RDC (who is provided with airtime through the central government accompanied by the heads of departments). The radio talk shows were conducted on the dates indicated below:</p> <ul style="list-style-type: none"> - Radio talk show held on 26/06/2018, presided over by the RDC accompanied by the DEO, DHO and health educator. Evidence of talking points provided to the RDC were presented to the assessor by the RDC. The talking points dwelt on the process of conducting the indoor spraying exercise that was a control measure for reducing mosquitoes to curb the spread of Malaria. - Radio talk show held on 18/09/2018: Sector heads provided talking points to the RDC to provide updates that included updates on the DDEG and other grants, highlights of sector performance and the preparations for the national Budget Conference. - Radio talk show held on 17/07/18 dwelt on discussing the strategic plan of Bugwere, updates on Agriculture investments, efforts of the civil society organisations in budget monitoring in health, education and sanitation. 	<p>1</p>
<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"> • 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. 	<p>Guidance has been provided by gender focal point person to departments regarding how to mainstream gender. For example</p> <ul style="list-style-type: none"> • Held discussions with TPC members and shared guidelines on gender main streaming on 12/04/2018 held in District Council Chambers. (MIN;06/TPC/04/18). • Provided guidance on how to include women, PWDs in projects (Letter dated 8/11/2017). • Conducted mentoring to sub county CDOs in main streaming gender in sub county plans and budgets. • Conducted gender Analysis for Budaka District on 13/02/2018. 	<p>2</p>

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

Maximum 4 points on this performance measure.

- Evidence that the gender focal point and CDO have planned for minimum 2 activities for current FY to strengthen women's roles and address vulnerability

and social inclusions and that more than 90 % of previous year's budget for gender activities/ vulnerability/ social inclusion has been implemented: score 2.

In FY 2018/19 Gender focal point person and CDO have planned activities (work plan Vote:571 Budaka) These include

- Gender Main streaming
- children and youth services,
- community based services and
- support to disabled and elderly, representation on Women councils.
- probation and welfare support
- operation of community based services Department.
- Support to Youth Councils

In FY 2017/18 over 90% of the planned activities on gender activities/vulnerability/social inclusion well implemented e.g

- 100% achievement was registered as was planned. PWDs supported to attain skills, Departments were helped on how to conduct gender mainstreaming, use data for planning, mentoring of departments on gender main streaming, facilitating youth council meetings, supporting people with disabilities, dissemination of gender aggregated data,
- Women, youth and disability councils were inducted. Mobilization, meetings and participation in international days were all done.
- Supported Youth Livelihood programs, NUSAF3, UWEP through sensitization, training and monitoring.
- Held radio talk show on Bugere FM about SGBV on 27/11/2017.

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 1

Environmental screening and EIA are carried out for activities and projects are planned and budgeted for in respective BOQs for specific projects in each department depending on the department e.g payment vouchers (NO 19/19/2017, 15/02/2018) indicates money drawn from the budget as planned for conducting environmental screening all district development projects.

Example of screened included:

- Construction of staff house, Kitchen and Pit Latrine at Naboa Parents P/S (Ref; BUDA571/WRKS/2017-2018/00004) screening done 23/03/2017.
- Construction of 15 complete bore holes (Ref; BUDA571/WRKS/2017-2018/00001): screening done on 28/03/2017
- Construction of a 4-stance pit latrine at Kerekerene HCIII (Ref; BUDA571/WRKS/2017-2018/00018) screening done.08/03/2017
- Construction of a 5-stance pit latrine at Kadenge P/S screening done 8/03/2018.
- Construction of a 5-stance pit latrine in Nabuketo P/S (screening done 08/03/207).
- Construction of a 5-stance pit latrine at Nansanga T/C (Ref; BUDA571/WRKS/2017-2018/00024) S screening done 23/03/2018.

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1 	<p>Environmental and social management and health and safety plans are integrated and appended on the bid documents are contracts agreements for example: for example bid documents reviewed, they contain the clause on environmental management and health and safety plans (They are well captured in the BOQs in the contract and bid documents).</p> <p>For example contract for the projects below</p> <ul style="list-style-type: none"> • Construction of staff house, Kitchen and Pit Latrine at Naboia Parents P/S (Ref; BUDA571/WRKS/2017-2018/00004) • Construction of 15 complete bore holes (Ref; BUDA571/WRKS/2017-2018/00001): • Construction of a 4-stancce pit latrine at Kerekerene HCIII (Ref; BUDA571/WRKS/2017-2018/00018) • Renovation of ceiling Board at Kameruka H/C III HCIII (Ref; BUDA571/WRKS/2017-2018/00022) • Construction of a 5-stancce pit latrine at Nansanga T/C (Ref; BUDA571/WRKS/2017-2018/00024) 	<p>1</p>
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<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1 	<p>All projects are implemented were on the land with proof of Ownership. For example Land titles were available</p> <ul style="list-style-type: none"> • Land Title: Plot 632 Budaka BLOCK 2 AT BULOKI • Land Title Block (Road) 2 Plot 780 AT NANSANGA • Land title Plot 629, Block 2 at Bukinomo Kerekerene, Kataira, Iki-Iki. • Land title Plot 768, Block 2 at KAKULE • All sub counties have titles (13 sub counties) <p>For boreholes agreements/letter of consent were available and well signed by both parties and witnessed by Village members. For example:</p> <ul style="list-style-type: none"> • Bore hole at Iddudi (Nabitalo B) Village (Agreement dated 25/10/2017 • Bore hole at Bukaligwoko Village (Agreement dated 1/11/2017 • Bore hole at Kadimukoli (Block 2) Village (Agreement dated 28/10/2017 • Bore hole at Nachewu Village (Agreement dated 29/10/2017 • Bore hole at Kamonkoli Village (Agreement dated 30/10/2017) • . Bore hole at Bulyambiti Village (Agreement dated 27/10/2017) • Bore hole at Moru Village (Agreement dated 11/12/2017). 	<p>1</p>
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<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1 	<p>All completed projects have Environmental and Social Mitigation Certification. For example</p> <ul style="list-style-type: none"> • Construction of staff house, Kitchen and Pit Latrine at Naboia Parents P/S (Ref; BUDA571/WRKS/2017-2018/00004) Certification dated 25/1/2018 • Construction of 15 complete bore holes (Ref; BUDA571/WRKS/2017-2018/00001): Certification dated 18/1/2018 • Construction of a 4-stancee pit latrine at Kerekerene HCIII (Ref; BUDA571/WRKS/2017-2018/00018) Certification dated 25/1/2018 • Construction of a 5-stancee pit latrine at Kadenge P/S Certification dated 25/1/2018 • Construction of a 5-stancee pit latrine in Nabuketo P/S Certification dated 25/1/2018 • Construction of a 5-stancee pit latrine at Nansanga T/C (Ref; BUDA571/WRKS/2017-2018/00024) Certification dated 11/1/2018 <p>Mitigation Certification Forms completed and signed by Environmental Officer and CDO</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"> • Evidence that the contract payment certificated includes prior environmental and social clearance (new one): Score 1 	<p>The contract payment certificated includes prior environmental and social clearance. Clearance is done after inspection of contracts committee and based on the report of this committee. Environmental and social clearance was done before every payment. For example</p> <ul style="list-style-type: none"> • Construction of staff house, Kitchen and Pit Latrine at Naboia Parents P/S • Construction of 15 complete bore holes • Construction of a 4-stancee pit latrine at Kerekerene HCIII • Construction of a 5-stancee pit latrine at Kadenge P/S • Construction of a 5-stancee pit latrine in Nabuketo P/S • Construction of a 5-stancee pit latrine at Nansanga T/C 	<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"> • Evidence that environmental officer and CDO monthly report, includes a) completed checklists, b) deviations observed with pictures, c) corrective actions taken. Score: 1 	<p>Monthly reports were well prepared by the Environmental Officer and CDO. The checklists are completed. There were no deviations observed as per pictures with pictures (c) corrective actions taken.</p> <ul style="list-style-type: none"> • For example the reports (dated 9.01.2018, 5/03/2018, 11/01/2018, 19/09/2017, 21/09/2017) Covers Drilling of boreholes in different villages, constructed latrines, classrooms. <p>with completed checklists including pictures and well spelt actions</p>	<p>1</p>
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Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<p>• Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4</p>	<p>The LG Education department Budaka District budgeted for the H/T and the minimum of 7 teachers as per Performance Contract FY 2018/2019 (Vote 571, work plan 6) submitted 26/7/18 indicates the budgeting for head teachers and teachers.</p> <p>Also there is a list of 59 primary schools, a staff list of 899 teachers including Head teachers.</p>	4
<p>The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<p>• Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school (or minimum of a teacher per class for schools with less than P.7) for the current FY: score 4</p>	<p>As per teachers list, 899 teachers are currently deployed including headteachers. For example in sampled schools;</p> <p>-Namirembe Day and Boarding P/S has a head teacher and 27 teachers.</p> <p>-Nakisenye P/S has 25 teachers including the head teacher.</p> <p>-Namengo Girls P/S has 16 teachers including the head teacher.</p> <p>-Namengo Boys P/S has 14 teachers including the head teacher.</p> <p>Kakule P/S has 15 teachers including the head teacher.</p>	4

<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has filled the structure for primary teachers with a wage bill provision <p>o If 100%: score 6</p> <p>o If 80 - 99%: score 3</p> <p>o If below 80%: score 0</p>	<p>According to Budaka District in ref: approved structure of 2017/18 dated 20/7/17 by P/S MoPS letter to CAO, ref; ARC135/306/01. 899 teachers are deployed while the wage bill according to the performance contract 2018/19 dated 11/7/18 has 921 teachers; the HRM register has 899 teachers. This is a 98% deployment of the 921 teachers as provision of wage bill.</p>	<p>3</p>
<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6 	<p>Budaka District approved structure of 2017/18 had a provision of 2 slots of school inspectors, and they are substantively filled, as per the HRM payroll and wage bill.</p>	<p>6</p>
<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> • Primary Teachers: score 2 	<p>According to submitted a recruitment plan to HRM for the FY 2018/2019 Education Department, the vacant positions of primary teachers are 18 as per recruitment plan dated 11/9/18 quote CR/300 arising out of death, retirement, promotion, abscondment and transfers.</p>	<p>2</p>

<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> • School Inspectors: score 2 	<p>According to a submitted recruitment plan dated as above to HRM for the FY 2018/2019 Education Department, the Position of school inspectors to be filled are 2.</p>	<p>2</p>
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Monitoring and Inspection

<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> • 100% school inspectors: score 3 	<p>The District has 2 inspectors, all the two were appraised as indicated below:</p> <p>a) Magili Joseph Waako: District Inspector of schools appraised by the DEO On 28th 09. 2018</p> <p>b) Kiire Gerald Kigondere: appraised by DIS on 20th 09. 2018</p>	<p>3</p>
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<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> • Primary school head teachers o 90 - 100%: score 3 o 70% and 89%: score 2 o Below 70%: score 0 	<p>It was reported that the District has 59 head teachers, appraisal files of 59 head teachers were reviewed. From the review it was found out that files lacked performance agreements and reports and all the 59 appraisal forms have just been recently signed by the DEO on 28th Sept. 2018 which is long overdue.</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"> • Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1 	<p>All guidelines, policies, circulars issued at the national level in the FY 2017/2018 were communicated to schools, reference circular Teacher support supervision by PS MoES, quote ADM/203/255/01 dated 30/6/17; Closure of illegal schools by PS MoES, quote ADM/104/212/01 dated 26/3/18; Guidelines on school charges by PS MoES quote ADM/48/315/01 dated 24/10/17, also meetings with H/Ts and SMCs on 15th March, 2018,- 12th February. 2018, 13th. April, 2018 and 17th. April, 2018. Issues communicated included gender and inclusive education, curriculum implementation, environmental issues.</p>	<p>1</p>

<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level: score 2 	<p>A number of meetings were held with head teachers of primary schools on different dates to elaborate and sensitize on the matters regarding guidelines as guided by the MOES</p> <p>for example meetings with H/Ts and SMCs on 15th March, 2018, 12th February, 2018, 13th April, 2018 and 17th April, 2018. Issues communicated included gender and inclusive education, curriculum implementation, environmental issues.</p>	<p>2</p>
<p>The LG Education Department has effectively inspected all registered primary schools</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> o 100% - score 12 o 90 to 99% - score 10 o 80 to 89% - score 8 o 70 to 79% - score 6 o 60 to 69% - score 3 o 50 to 59% - score 1 o Below 50% - score 0. 	<p>A quarterly Inspection report 1 as per DIS's submission to CAO, list of 59 primary schools plus 11 registered private schools dated 18/4/17, quarter 2 report dated 18/12/17, quarter 3 report dated 26/4/18 and quarter 4 dated 29/6/18.</p> <p>Findings included lack of feeding of learners, inactive Snr. woman and man, lack of instructional materials, lack of uniforms, hand washing facilities lack, staff housing among others.</p> <p>Recommendations included DEO, DIS, and Secretary for Education at District to sensitize parents, head teachers to ensure hand washing facilities, department to lobby the District for staff houses budgeting among others. as per the reports all schools were inspected.</p> <p>The sampled schools,</p> <ul style="list-style-type: none"> -Nakisenye P/S was inspected on 18/11/17, 27/3/18 and 26/6/18. -Namirembe Day and Boarding P/S was inspected on 13/10/17, 16/4/18 and 27/6/18. -Namengo Girls P/S was inspected on 9/11/17, 27/3/18 and 26/6/18. -Namengo Boys P/S was inspected on 10/11/17, 28/3/18 and 26/6/18. -Kakule P/S was inspected on 4/7/17, 19/3/18 and 22/5/18 	<p>12</p>

<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4 	<p>The education department did not discuss school inspection reports no such minutes to the effect were available. Also the reports were not going through the DEO as DIS seemed to direct his reports to CAO.</p>	<p>0</p>
<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2 	<p>Budaka Education department did not submit school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports. There was a delay in the quarterly releases of funds, the reason the department has not delivered the reports to DES.</p>	<p>0</p>

<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the inspection recommendations are followed- up: score 4. 	<p>On the 15/2/18 the District Education Department held a meeting with parents at Kasuleta P/S to follow up the recommendations of the quarter 1 and 2 inspection reports DEO, DIS and Education Secretary where these were charged to sensitize parents on issues raised in the reports.</p> <p>On 16/6/18 workshop for H/Ts and teachers to follow up recommendations on inspection report for quarter 3 at Namengo Girls P/S and there was a report on the workshop dated 18/2/18 by DIS.</p>	<p>4</p>
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> o List of schools which are consistent with both EMIS reports and PBS: score 5 	<p>Data submitted was accurate and consistent</p> <p>For example performance contract FY 2018/2019 submitted 26/7/18 provides the list of primary schools of 59 consistent with PBS data. EMIS was not used this year information received from MoES.</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"> • Enrolment data for all schools which is consistent with EMIS report and PBS: score 5 	<p>Enrolment data submitted for all schools was consistent and accurate/consistent with PBS as reviewed at the time of 59 schools and 63,094 pupils as per 2018.</p>	<p>5</p>

Governance, oversight, transparency and accountability

<p>The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<p>• Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc. during the previous FY: score 2</p>	<p>Evidence was adduced by the Clerk to Council to confirm that the Council Committee for education met and discussed service delivery issues including support supervision, performance assessment results and LG PAC reports for the previous FY. The committee met on the dates indicated below:</p> <p>Meeting of the 22/09/2017: Discussed under minute number 04/SS/09/17 and among other issues in education, the DDEG grant allocation of 20 million shillings and the development grants of 64 million and the allocation for DEO monitoring and supervision activities of 8 million shillings. Discussed enrolment at primary and secondary schools, need for schools to be engaged in extracurricular activities. Challenges included the inadequate staffing levels both at the district office and at primary schools level, lack of furniture at schools, inadequate pit latrines, lack of staff accommodation, absenteeism of teachers and pupils and the need for parents to support feeding of pupils at schools.</p> <p>Meeting of the 6/12/2017, under minute number 10/SS/12/2017, discussed the half year budget performance, discussed school enrolment at both primary and secondary schools and it was deemed to be low, discussed progress of pit latrine construction at Kirifolo, Bugoya, Suuni, Kodir, and others which had all reached finishing level. Construction of staff house and kitchen at Naboa was still at walling level, while the Ministry of Water and Environment was urged to fund the construction of pit latrines at Kadenge, Buchai and Nabikeero primary schools.</p>	<p>2</p>
<p>The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<p>• Evidence that the education sector committee has presented issues that require approval to Council: score 2</p>	<p>Evidence adduced included a series of recommendations made by the council Committee for education that were presented to Council by the chairperson of the committee as indicated below:</p> <p>Council meeting of the 18/07/2017 under minute number 03.07/BDLG/Cou/2017 approved the district structure including for the education department. Resolved issues related to the additional budget allocation to sectors including the education sector.</p> <p>Council meeting of 21/12/2017 under minute number 21/12/BDLG /Cou/2017 resolved issues including the recommendation to the Ministry of education to establish model UPE schools at Wayiragara primary school.</p>	<p>2</p>

<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO/ MEO)</p> <ul style="list-style-type: none"> • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80 % schools: score 0 	<p>All the 59 primary schools in Budaka District have functional SMCs. These SMCs meet regularly and keep minutes and submitted minutes to the DEO. For example as sampled ,</p> <p>-Namirembe Day and Boarding P/S SMC had meetings and recorded minutes on various days such as on 29/9/17, 23/1/18, 28/6/18 discussing financial reports, staff housing and feeding of children among others.</p> <p>-Nakisenye P/S SMC had meetings and recorded minutes on various days on 22/6/17, 17/2/18, 26/6/18 and duly forwarded the minutes to the DEO.</p> <p>-Namengo Girls P/S SMC had meetings and recorded minutes on 6/12/17, 18/6/18 while they didn't hold one in 1st term 2018 because the chairman was not available .</p> <p>-Kakule P/S SMC had meetings and recorded minutes on 6/10/17, 25/1/18, 9/3/18, 25/6/18 and were able to submit minutes to the DEO.</p> <p>-Namengo Boys P/S had meetings on 20/9/17, 26/3/18 and 30/6/18 and filed their minutes at DEOs office. In the minutes H/Ts reports, Budget approval were discussion items among others and all filed at the DEOs office.</p>	<p>5</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"> • Evidence that the LG has publicised all schools receiving non-wage recurrent grants <p>e.g. through posting on public notice boards: score 3</p>	<p>All schools receiving non-wage recurrent grants were posted on public notice boards at the DEO's office, seen and ascertained.</p>	<p>3</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,</p> <p>to the Procurement Unit that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the sector has submitted procurement input to Procurement Unit that covers all investment items in the approved Sector annual work plan and budget on time by April 30: score 4 	<p>Education Department Submissions were done and they covered all investment items in the approved Sector annual work plan and budget. The submissions were done on 26/6/18 which was later than 30/4/18 as required by the assessment measure.</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"> Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3. 	<p>A review of the payment requests indicated that the District Education Officer timely recommended and certified suppliers and contractors requests for payment. Examples are as outlined below:</p> <p>i. Voucher No. 06/02/18 Educ being payment to Afro General Builders & Carpentry (U) Ltd. for construction of staff houses at Naboa PS. Request was submitted on 14/02/2018. DEO forwarded for payment on 20/02/2018 and accounts approved on 20/02/2018. Payment was done on 20/02/2018</p> <p>ii. Voucher No. 18/05/2018 being payment to Bandobya Investments and Contractors Limited for the supply of 36 three seat desks. Request was submitted on 02/05/2018 and the DEO forwarded for payment on 24/05/2018. Accounts approved payment on 31/05/2018 and payment was done on 31/05/2018iii. Voucher No. 03/06/2018 for the construction of a 5 stance pit latrine at Kakule PS by Naki Investments Uganda Limited. Request was submitted on 30/05/2018 and DEO forwarded for payment on 07/06/2018. Payment was done on 12/06/2018 after approval on 07/06/2018iv. Voucher No. 09/05/2018 being payment to Kenrock Technical Services Co. Ltd for construction of 2 classroom block at Kadimukoli PS . Request was submitted on 08/05/2018 and DEO forwarded for payment on 11/05/2018. Approval of payment was done on 14/05/2018 and payment was done on the same date. v. Voucher No. 01/06/2018 being payment to Go- Standard Services Limited for the construction of a 5 stance pit latrine at Naboa PS. Request was done on 23/05/2018. DEO forwarded for payment on 05/06/2018 and approved for payment on 06/06/2018. Payment was done on 06/06/2018</p>	<p>3</p>
<p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by 15th of July for consolidation: score 4 	<p>While all the four (4) consolidated Quarterly Reports were available (hard copies at seen at the Planning Unit), evidence adduced by the Principal Planner indicated that the Education sector submitted the Q 4 report for consolidation at the Planning Unit on the 18/07/2018 which was after the expiry of the deadline of 15/07/2017.</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"> • Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year <ul style="list-style-type: none"> o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 o If all queries are not responded to score 0 	<p>There is a communication from the CAO to the District Internal Auditor regarding Quarter 4 report for the FY 2017/18 where all affected departments submitted responses to the CAO. This communication is dated 23/07/2018. Under the sector, the sub accountants were to be instructed to give a hand in the preparation of books account within their areas of operations. The DEO was to meet the Head Teachers to harmonize the relationship between sub accountants and the head teachers.</p>	<p>2</p>
<p>Social and environmental safeguards</p>			
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines <ul style="list-style-type: none"> on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills, etc.: Score 2 	<p>Meetings of DEO with H/Ts and SMCs dated 13/4/18 for dissemination of guidelines on gender issues, SMC appointments, hygiene, senior woman and man, and sensitization on environmental issues meeting held on 15/3/18.</p>	<p>2</p>

<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2 	<p>Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools.</p> <p>Meetings of DEO with H/Ts and SMCs dated 13/4/18 for dissemination of guidelines on gender issues, SMC appointments, hygiene, senior woman and man, and sensitization on environmental issues meeting held on 15/3/18.</p>	<p>2</p>
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the School Management Committee meets the guideline on gender composition: score 1 	<p>The SMC composition in schools followed the issued guidelines that is, at least two females on the committee, e.g.;</p> <ul style="list-style-type: none"> -Namirembe Day & Boarding P/S SMC has 13 members including 3 females. -Nakisenye P/S SMC has 13 members including 5 females. -Namengo Girls P/S SMC has 12 members including 6 female. -Namengo Boys P/S SMC has 13 members including 3 female. -Kakule P/S has 13 members including 5 female. <p>At all the sampled schools' notice boards their names are publicized.</p>	<p>1</p>

<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 1: 	<p>Meeting with H/Ts by the DEO's office as dissemination of guidelines on environmental issues, land, waste disposal management by the EO on 15/3/18.</p> <p>Screening forms for the 5 stance pit latrine signed by EO and CDO on 23/3/17 at Nansanga P/S.</p> <p>Screening forms for the staff house 4 in one at Naboa P/S signed by both EO and CDO on 23/3/17.</p> <p>Kadimukoli P/S 2 classroom block screening form signed by both EO and CDO on 16/3/17</p>	<p>1</p>
<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all school infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: Score 1 	<p>Evidence of site visits before approval out lining mitigation procedures were in screening forms signed by EO and CDO in the projects below;</p> <p>Screening forms for the 5 stance pit latrine signed by EO and CDO on 23/3/17 at Nansanga P/S.</p> <p>Screening forms for the staff house 4 in one at Naboa P/S signed by both EO and CDO on 23/3/17.</p> <p>Kadimukoli P/S 2 classroom block screening form signed by both EO and CDO on 16/3/17.</p>	<p>1</p>
<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 1 	<p>The EO and CDO signed certificates of completion for projects to confirm environmental and social issues for the projects have been mitigated eg;</p> <p>For the 5 stance pit latrine at Nansanga P/S signed by EO and CDO on 11/1/18.</p> <p>For the staff house 4 in one at Naboa P/S signed by both EO and CDO on 25/1/18.</p> <p>Kadimukoli P/S 2 classroom block certificate of completion were signed by both EO and CDO on 25/1/18.</p>	<p>1</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			

<p>LG has substantively recruited primary health care workers with a wage bill provision from PHC wage</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY</p> <ul style="list-style-type: none"> • More than 80% filled: score 8 • 60 – 80% - score 4 • Less than 60% filled: score 0 	<p>The Budaka DLG HD had substantively recruited to the tune of 68%:</p> <ol style="list-style-type: none"> 1. The fully substantively recruited and filled were 202 (68% i.e. according to the HD's staffing and deployment lists). 2. The Budaka DLG HD's Staffing Norm for the HWs was 297 but those filled only 202 (with no attempts made at filling the vacant according to the above-mentioned details). 3. The HD and HRM provided evidence of attempts to fill/recruit and confirmed that they attracted all (now part of the 202). According to the HD's records reviewed by the assessor, no other News Paper advertisements were seen to fill the remaining vacant positions. 4. The approved health sector staffing structure is based on CAO's letter to PS/MoPS dated 20th/7/2017 (Ref: ARC135/306/01) on the submission of the Approved Staff Establishment for Budaka DLG and TC for the FY 2018/19. 5. The above means that the total effort works to 202 out of the 297 which works out at 68% filled only. 6. The DLG had IPFs with a PHC wage bill provision amounting to UGX 2,079,431,000 for the FY 2018/19, this was meant to cater for 202 according to the PBS records on staffing levels (e.g. see Pg 14 Narrative Work plan Revenues and Expenditure (under the section on Health)). 7. Also there were some mismatches in the information on staffing, especially inconsistencies between the HD and HF level records. For example, the Budaka HC IV reported having 40 staff while the HD report 38 staff only (i.e. 2 staff extra). <p>ID Type of HF No. Norm Filled Vacant</p> <p>1 DHO 1 11 9 2</p> <p>2 Hospital N/A - - -</p> <p>3 HC IV 1 50 38 12</p> <p>4 HC III 11 209 136 73</p> <p>5 HC II 3 27 19 8</p> <p>Total 16 297 202 95</p>	
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<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/re- quest to HRM for the current FY, covering the vacant positions of primary health care workers: score 6</p>	<p>The HD submitted a comprehensive recruitment plan for FY 2018/19. All staffing records offered signs that suggested evidence consistency of the actual figures on the filled and vacant positions seen as follows:</p> <ol style="list-style-type: none"> 1. The DHO provided proof in form of a submission letter of the Recruitment Plan to the PHRO (dated 29th March 2018). The letter refers to RHITES-E. 2. There were 3 other ADHO letters Ref: CR/218/1 (dated 14th/12/2017, 30th/10/2017 and 19th/3/2018) all on Recruitment on Replacement. 3. The PBS print out (undated Staff Recruitment Plan) reflected recruitment plan records that covered 13 vacant positions under health (those to be filled under the HD). 	<p>6</p>
<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"> o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0 	<p>The District has 15 government owned health units. Appraisal files of 13 of the 15 health in-charges were seen, all the 13 (87% of all health in-charges) were appraised for the period 2017/18. Below is a presentation of appraisal status of a sample of two health in-charges:</p> <ol style="list-style-type: none"> a) Musede Stephen: Katira HC III appraised by SAS Katira Sub-County on 18th July 2018 b) Wogabaga Kiboma John: Budaka HC IV Appraised by DHO on 27/08/2018 	<p>4</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"> 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 	<p>The HD records on staffing/deployment levels were only marginally comparable with those stated within the sampled HFs. Some fairly minor discrepancies or inconsistencies were evident when it came to what the HD and HF levels documented as the filled HF positions (see table):</p> <ol style="list-style-type: none"> For some HFs the staff deployment was not in accordance with the positions as seen in HD's official records. For Budaka HC IV the HD records indicated that it had 38 staff yet the HF's records showed 40 fully-filled portfolios. To account for the differences in the accuracy of the parallel records, the HD attributed it to HFs forgetting to consider staff on study leave or on annual leave, et cetera. <p>ID</p> <p>HF's Deployed HWs FY 2017/18</p> <table border="1"> <thead> <tr> <th>HF Records</th> <th>HD Records</th> <th>Norm</th> </tr> </thead> <tbody> <tr> <td>1 Budaka HC IV</td> <td>40</td> <td>38</td> </tr> <tr> <td>2 Butove HC II</td> <td>3</td> <td>7</td> </tr> <tr> <td>3 Namengo Mission HC II/PNFP</td> <td>14</td> <td>19</td> </tr> <tr> <td>4 Sapiri HC III</td> <td>13</td> <td>14</td> </tr> </tbody> </table>	HF Records	HD Records	Norm	1 Budaka HC IV	40	38	2 Butove HC II	3	7	3 Namengo Mission HC II/PNFP	14	19	4 Sapiri HC III	13	14	<p>0</p>
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<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"> 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 	<p>There was mixed evidence from the sampled HFs that the DHO/HD was effective when it came to communicating all the circulars, guidelines and policies issued by the national level for the FY 2017/18 (see table). There was only evidence that the sampled HFs had access to some assorted circulars, guidelines and policies from the national level (i.e. did not receive all or 100% of those issued). Indeed, there were both apparent and reported challenges in the mode of communication and documentation between and within the HD and HFs when it came to these documents:</p> <ol style="list-style-type: none"> First, as signals for commitment towards "effective communication" and investment of efforts towards supporting CME, there was absence of systematic records of the total number of circulars, guidelines and policies that had been received from the national level. However, there was some evidence of proper records on those distributed. Even going by their 	<p>0</p>

own records alone, there was no documented evidence that the DHO had communicated all the circulars, guidelines and policies received from the center (i.e. in the spirit of ensuring “effective communication” and promoting CME).

2. Secondly, going by the records secured at the HD and HF levels, the HD acknowledged receiving 13 circulars, guidelines and policies secured from the national level. However, those sent to higher and lower level HFs were reportedly far less (an average of 7, hence 6 less circulars, guidelines and policies). Also, HD’s records indicated that the list of those received excluded “MoH Guidelines for LG Planning for the Health Sector”, “MoH Sector Grant and Budget Guidelines FY 2018/19” as well as “MoH Policy Strategies for Improving Health Service Delivery 2016-2021”.
3. Third, at a HD level, for the documents sent via Whatsapp, it was difficult to retrieve credible information with respect to the total number of circulars, guidelines, policies and standards received by the HD in the FY 2017/18. For example, the DHO received A MoH circular from the Ag. Director General Health Services (to all DHOs) Ref: ADM/175356/03 (dated 13th/6/2018 on Hepatitis B Control Programme in Bugisu Region and selected districts of Central and Western Uganda. The circular was not among those captured on the HD’s list of circulars, guidelines and policies received from the national level. The challenge had to do with weak documentation of Incoming circulars, guidelines and policies. The HD had its own official records of those they were able to dispatch/ distribute to HFs (13 altogether covered in forms that served as logbooks or registers of those dispatched). The uneven documentation of receipts and better documentation of those distributed made it difficult to secure more systematic records of those got and those sent. It should be easier to retrieve information with respect to what circulars, guidelines and policies the HD received and those sent in FY 2017/18 (i.e. a complete record of what they were). Incoming versus outgoing communication through use of logbooks. This would be the most systematic way by which to achieve effective record keeping but one that requires intervention. As a result, the HD’s rough records indicated that it had gotten in the region of 13 circulars, guidelines and policies altogether but the average of those distributed of 7 is low. This inconsistency and mismatch is a sign of weak documentation.

		<p>4. Forth, at a HF level, while it was often difficult for HFs to establish when exactly they had received what circular, guideline or policy, on the whole the sampled HFs possessed an average of (only) 7 circulars, guidelines or policies issued in the FY 2017/18 (see table). When you compare with the HD's rough records, it is clear that the HD got in the region of 13 circulars, guidelines and policies altogether. The fact that the HFs got about 7 circulars, guidelines and policies suggests that the DHO had sent less than 100% of whatever it had received (an indication of laxity or records with mixed/uneven accuracy).</p> <p>ID</p> <p>No. Issued to HFs (FY 2017/18) DHO Visits</p> <p>1 Budaka HC IV 9 6</p> <p>2 Butove HC II 8 2</p> <p>3 Namengo Mission HC II/PNFP 4 1</p> <p>4 Sapiri HC III 7 0</p> <p>Average 7 2</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"> 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 	<p>In line with the quest to support effective communication and promote CME, it was clear that the DHO attempted to explain some of the issued circulars, guidelines and policies by the national level in FY 2017/18). The assessor reviewed the following relevant HD documents:</p> <ol style="list-style-type: none"> At HD level, some records indicated that the DHO explained some circulars, guidelines and policies. For example, the Minutes of DHT Monthly Meetings (dated 14th/5/2018) page 3 number 4 where the DHO commented on change of HAART combination for pregnant mothers (i.e. from TDF+3TC+EFV to TDF+3TC+DTG). Also, the Minutes of DHT Monthly Meetings (dated 15th/6/2018) pages 1-2 where the DHO commented on Rotavirus vaccination briefs. At HF level, for the FY 2017/18, only 1 out of 4 sampled HF Visitors Books demonstrated evidence of DHO, DHT or HD visits explaining selected circulars, guidelines and policies. 	3
<p>The LG Health Department has effectively provided support supervision to</p>	<p>Evidence that DHT/MHT has supervised 100% of HC IVs and</p>	<p>The HD compiled evidence for support supervision but rather inadequately, to the extent that it was not easy to gauge its efficiency and effectiveness when it came to its operations in the FY 2017/18. However,</p>	3

<p>district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>district hospitals (including PNFPs receiving PHC grant) at least once in a quarter: score 3</p>	<p>ID Date No. of Supervision Visits 17/18 Comments</p> <p>1 HC IV 1 PNFPs</p> <p>Q1 26th/9/2017 1 out of 1 1 out of 1 Full coverage of all.</p> <p>Q2 13th/12/2017 1 out of 1 1 out of 1 Full coverage of all.</p> <p>Q3 22nd/3/2018 1 out of 1 1 out of 1 Full coverage of all.</p> <p>Q4 11th/6/2018 1 out of 1 1 out of 1 Full coverage of all.</p> <p>According to HD records:</p> <ol style="list-style-type: none"> 1. The DHT covered 100% (once in a quarter) of the higher HFs (1 HC IV) and the 1 PNFP (i.e. covered 100% for Budaka HC IV (i.e. 1 out of 1 HC IVs) and 100% for Namengo HC II/PNFP (i.e. 1 out of 1 PNFP all for quarters Q1, Q2, Q3 and Q4 – see table). 2. There were no pointers of errors of omission or commission in the coverage and documentation of support supervision for the said HFs (see table). <p>According to HF records:</p> <ol style="list-style-type: none"> 1. Budaka HC IV support supervision is documented between series 873402 and 873406 (i.e. from 3rd/8/2017 to 7th/6/2018) for the FY 2017/18. However, on close scrutiny, this appears inadequate considering that the HF is relatively closer to the HD. It is possible that there could be a documentation gap where support supervision is done but not recorded. 2. Namengo Mission HC II/PNFP support supervision is documented between series 872801 and 872806 (i.e. from 18th/12/2017 to 23rd/5/2018) for the FY 2017/18. Again, on close scrutiny, this appears inadequate considering that the HF is a PNFP in clear need of hands-on support and relatively close to the HD as well as the HSD. <p>ID HF SUPPORT SUPERVISION VISITS (FY 2017/18)</p> <table border="1"> <thead> <tr> <th>HF</th> <th>DHO</th> <th>DHT</th> <th>HSD</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>1 Budaka HC IV</td> <td>6</td> <td>8</td> <td>N/A</td> <td>14</td> </tr> <tr> <td>2 Namengo Mission HC II /PNFP</td> <td>0</td> <td>7</td> <td>N/A</td> <td>7</td> </tr> <tr> <td>Total</td> <td>6</td> <td>15</td> <td>-</td> <td>21</td> </tr> </tbody> </table>	HF	DHO	DHT	HSD	Total	1 Budaka HC IV	6	8	N/A	14	2 Namengo Mission HC II /PNFP	0	7	N/A	7	Total	6	15	-	21
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2 Namengo Mission HC II /PNFP	0	7	N/A	7																		
Total	6	15	-	21																		

<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT/MHT has ensured that HSD has supervised lower level health facilities within the previous FY:</p> <ul style="list-style-type: none"> • If 100% supervised: score 3 • 80 - 99% of the health facilities: score 2 • 60% - 79% of the health facilities: score 1 • Less than 60% of the health facilities: score 0 	<p>Support supervision for FY 2017/18 covered 89.3% (i.e. falling between the mark of 80-99%) of the lower-level HFs. Based on the contents cum records derived from the availed 4 quarterly support supervision reports the following figures were captured and used (see table):</p> <ol style="list-style-type: none"> 1. The coverage of lower-level HFs for all the 4 quarters for the FY 2017/18, the HD only registered a numbers of 50 HFs only. 2. The total numbers of expected or required visits for 100% coverage of lower-level HFs for all the 4 quarters for the FY 2017/18 48 would be 56 HFs altogether is (i.e. for 11 HC IIIs and 3 HC II). 3. The above works out at 89.3% (i.e. with a numerator of 50 only as the visits that materialized and a denominator of 56 expected visits altogether; multiply with 100%). <p>ID Date Support Supervision Visits Comments</p> <p>5 HC IIIs 1 HC II</p> <p>Q1 26th/9/2017 9 out of 11 3 out of 3 Full coverage (6 of 6)</p> <p>Q2 13th/12/2017 11 out of 11 3 out of 3 Full coverage (6 of 6)</p> <p>Q3 22nd/3/2018 11 out of 11 3 out of 3 Full coverage (6 of 6)</p> <p>Q4 11th/6/2018 8 out of 11 2 out of 3 Partial coverage (5 of 6)</p> <p>The other records presented the following evidence (see table):</p> <ol style="list-style-type: none"> 1. The HF visits by the DHO are far fewer than those of the DHT. However, the function of the HSD was reportedly in use. 2. There is coverage of several HFs for the 4 quarters. However the proportion of the HFs covered for lower-level HFs by the DHT is below 100% (i.e. the fact that it is at 89.3% only). <p>ID</p> <p>HF's OFFICIALVISITS (FY 2017/18) Total</p> <p>DHO DHT HSD</p> <p>1 Budaka HC IV 6 8 N/A 14</p>	<p>2</p>
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		<p>2 Butove HC II 1 7 3 11</p> <p>3 Namengo Mission HC II/PNFP 0 9 3 12</p> <p>4 Sapiri HC III 2 9 5 16</p> <p>Total 9 33 11 53</p>	
<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that all the 4 quarterly reports have been discussed and used to make recommendations (in each quarter) for corrective actions during the previous FY: score 4 	<p>The HD provided evidence of the existence of the required 4 out of 4 quarterly reports for FY 2017/18 (see table):</p> <ol style="list-style-type: none"> All the 4 quarterly reports were made available, signed and stamped (see table). The reports discussed the issues and results arising from support supervision with respect to most HFs. All the 12 DHT monthly meetings minutes (for FY 2017/18) were made available, fully signed and stamped – i.e. 6th/7/2017, 9th/8/2017, 14th/9/2017, 12th/10/2017, 29th/11/2017, 21st/12/2017, 18th/1/2018, 14th/2/2018, 23rd/3/2018, 20th/4/2018, 14th/5/2018 and 15th/6/2018. There were 4 of the 12 DHT meetings that discussed the results arising from the 4 quarterly support supervision reports (see table). <p>ID Q Reports DHT Monthly Meetings Minutes Discussing Q Reports</p> <p>Q1 26th/9/2017 12th/10/2017 Agenda 9 MIN 9/DHT/10/20017 (pg.2 &9)</p> <p>Q2 13th/12/2017 21st/2/2017 Agenda 4, MIN 4/12/2017 (pg.1-2)</p> <p>Q3 22nd/3/2018 20th/4/2018 Agenda 4, MIN 4/4/2018 (pg.2, 3)</p> <p>Q4 11th/6/2018 15th/6/2018 (Agenda 4, MIN 4/6/2018 (pg.1-2).</p>	4
<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</p>	<ul style="list-style-type: none"> Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6 	<p>Both the quarterly support supervision reports (as well as DHT Minutes) and HF support supervision logbooks indicated evidence of discussion of relevant support-supervision issues emerging from quarterly support supervision and monitoring visits, results, and/or reports. For the former, it was reported that the aim of the DHT discussion was to pave the way for better follow up of emerging issues with proper actions focused on specific corrective measures (see table).</p>	6

followed up

Maximum 10 points
for this performance
measure

ID HD Recommendation Follow up

1 Budaka DLG HD Issue of irregular staff attendance to duty (e.g. in Kamonkoli HC III) led to recommendations such as the staff to face the disciplinary committee and to be cautioned (15th/6/2018 DHT meeting) The assessor saw 3 DHO letters (all dated 26th/6/2018), subj: Caution and addressed to the Laboratory Assistant, Enrolled Nurse and Clinical Officers of Kamonkoli HC III.

ID HF Recommendation Follow up

2 Budaka HC IV Procure notice boards to display vital HF information (see logbook 873465 on the 23rd/1/2018). Physically verified new notice boards purchased and fixed in the In-charges Office, the Records Room and the General Ward.

3 Butove HC II Validate immunisation data (see Improvised logbook page 48, date 8th /5/2018). Seen Vaccines and Injection Materials Control Book (HMIS Form 017d) Serial Number 019) shows gaps filled (e.g. Manufacturer, Batch Number, Expiry Date, etc.).

4 Namengo Mission HC II/PNFP Midwives must ensure that mothers are tested on first (1st) visits (seen logbook 872804, date 15th/2/2018). Seen Integrated Antenatal Register (HMIS Form 017, opened 1st/7/2017 – columns and rows between 20th and 22nd November 2017 indicate records of 5 out of 5 1st timers tested etc)

5 Sapiri HC III Update stock cards regularly (see logbook 872607, date 22nd/11/2017). Seen Box File on Stock Cards (HMIS Form 015) with updated records (e.g. fully filled info on Artesunat Injection as seen between 10th/9/2018 and 8th/10/2018)

On the discussion of support supervision quarterly reports, the following are worth noting:

1. First, evidence was shaky for the HD relying on discussions of support-supervision quarterly reports (findings and results) to generate actionable recommendations in each quarter that are followed up with specific corrective activities or actions. The scanty evidence at HD level was surprising but equally surprising was that HFs were more readily inclined to give indications of actions emerging from support-supervision (as seen in their logbooks and based on discussions with the in-charges of sampled HFs).
2. Secondly, the DHT met 12 out of 12 mandatory times, an indication that the DHT was functional but meetings discussion of support-supervision results and reports not deliberately, directly, fully

and systematically documented to maximum effect.

3. Third, 4 DHT minutes discussed 4 quarterly reports but the HD confided that documentation of the 2 related documents needed to improve (e.g. to better cite or quote HF-specific needs, emerging priority issues, corresponding pages where a DHT refers to a specific quarterly report, et cetera).
4. Forth, according to HD records at the commencement of the assessment (8th/10/2018), the assessor accessed 5 DHT minutes. At the end of the assessment (10th/10/2018), the assessor accessed a batch of other 7 other DHT minutes. Altogether, the assessor saw 12 out of 12 DHT monthly meetings for FY 2017/18.
5. Fifth, and in summary, in part because of weak documentation methods, both the HD and the sampled HFs struggled to wade through their records to pick out what support-supervision issues and recommendations had been followed up with corrective action, While all sampled HFs (100%) benefited from DHT support supervision and all had pieces of evidence (e.g. in the supervision logbooks) to confirm that the DHT made recommendations and with further evidence of follow up on the advice on corrective actions to be implemented in the FY 2017/18), picking evidence of the actual follow up actions often proved difficult (tedious and time consuming). Again, while the monthly DHT meetings discussed quarterly support-supervision reports/results, the HD staff often struggled to prove what meeting discussed what quarterly report as well as the recommendation followed up with specific corrective actions, et cetera. The most commonly reported operational gap had to do with the limited funding to the HD to support total and integrated documentation of support supervision and monitoring operations at HD and HF levels. The critical gaps are linked to weak documentation, including limited awareness, low capacity as well as dysfunctional systems for evidence storage and retrieval, etc).

<p>The LG Health department has submitted accurate/consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> o List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10 	<p>There was accurate and consistent data and reports on the 14 HFs receiving PHC funding (as per MoH formats). NB: Through a separate arrangement, the DLG/HD was supporting 2 other HFs (i.e. Mugiti HC III and Nansanga HC III). The following was evident in the records:</p> <ol style="list-style-type: none"> 1. The 14 HFs had been posted both on the DLG and HD's Notice Boards covering the 14 HFs receiving PHC funding for the FY 2017/18. 2. The 14 HFs posted on the notice board and in the HD's files were all reflected in the MoH HMIS Excel spreadsheet. NB: Their reporting rate was adequate (i.e. above 100% HMIS reporting rate arising because of bringing aboard other HFs). 3. The 14 HFs were covered in the PBS FY 2018/19/Vote 571 (pg 24 under the District LG Approved Budget Estimates/Work Plan). 	<p>10</p>
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Governance, oversight, transparency and accountability

<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the 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 	<p>Evidence was adduced by the Clerk to Council to confirm that the Council Committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and the annual performance assessment results. Evidence was adduced in form of minutes of committee meetings as indicated below:</p> <p>Meeting of 22/09/2017 discussed under minute number 04/SS/09/2107, issues including the grant allocations and projects to be implemented during the forthcoming FY, discussed the budget allocation of 60 million shillings from the DDEG grants, the planned activities including the renovation of ceiling at Kameruka HC III, construction of a 4 stance pit latrine at Kameruka at Kerekerene HC III and the procurement of delivery beds, the need for the communities to support the door to door Polio Campaign and appreciated the support from NGOs such as the Sight Savers. Noted that the PHC funds had not yet been released, observed that health workers were reporting late at the facilities and that there were discrepancies in the stocks of medicines delivered at the facilities as compared to the orders made, Need for the DHO to follow up with the MoH and the National Medical Stores.</p> <p>Meeting of 6/12/2017 discussed under minute number 10/SS/12/2017, issues including a review of the half year budget performance, observed that the Polio Campaign had been successfully completed, observed that the cold storage had been well maintained during</p>	<p>2</p>
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the Polio Campaign, observed that the procurement processes for the planned activities had been successfully completed. Noted with concern that Government had not yet completed the OPD at Budaka HC IV.

Meeting of the 17/04/ 2018, under minute number 15/SS/04/2018, discussed among other issues that processes for the construction activities were in progress such as construction of a 4 stance pit latrine at Kerekerene, works on fencing Kamonkoli HC III, procurement of delivery beds, observed that quarterly review meetings were held, VHTs had been trained in Nutrition and Counselling, Sanitation and Hygiene, 3 enrolled nurses had been recruited, and 1 district health officer. Key challenge of lack of transport for the health department was noted and the failure by government to code two health facilities of Nansanga and Mugiti that were gazetted in 2014. This has made the facilities to miss out on allocation of medical supplies from government hence affecting service delivery.

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 health sector committee has presented issues that require approval to Council: score 2

Evidence was adduced by the Clerk to Council to confirm that the Council Committee for health presented issues to Council for approval. The issues were presented during the council meetings indicated below:

Council meeting of the 18/07/2017 under minute number 03/07/BDLG/Cou/2017 reviewed and approved the district structure including for health. Approved the supplementary budget including 40 million shillings for immunisation and 20 million for the Sanitation fund.

Meeting 21/12/2017, under minute number 21/12/BDLG/Cou/2017, approved the recommendation that staff houses should be built at Iki Iki HC III with support from PATH funded by USAID. Endorsed the district participation in the indoor residual spraying to control the spread of Malaria.

Meeting of 3/01/2018 under minute number 31&32/1/BDLG/Cou/2018, mainly resolved issues in the water sector.

Meeting of the 29/03/2018, under minute number, 43/03/BDLG/2018, endorsed the budgetary allocations for the health department of 7.4 billion shillings.

Meeting of 25/05.2018 under minute number 5/5/BDLG/05/2018, noted that a new development partner funded by USAID under the RHITES-E programme had plans to support the district in the area of health particular in HIV&AIDS, TB, Nutrition, Malaria and family planning among other health cross cutting issues. Observed that the indoor spraying exercise had been completed and that new staff had been recruited in the health sector. Reviewed the district health sector Nutrition Action Plan and endorsed it.

<p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 6 points</p>	<p>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> • If 100% of randomly sampled facilities: score 6 • If 80-99 %: score 4 • If 70-79: %: score 2 • If less than 70%: score 0 	<p>According to all the sampled HFs none (0%) had fully functional HUMCs and the average level of functionality was a mere 75% (i.e. each committee only had 3 out of the 4 required HUMC minutes for FY 2017/18 – see table):</p> <ol style="list-style-type: none"> 1. A division of the sum of the said 2 figures by 2 is way below the 60% mark (i.e. $0+75= 75\div 2= 37.5\%$). Therefore, the HD did not meet the HUMC functionality threshold because the average of the sample hovers way below the 60% composite rate. 2. The assessments evidence was not corroborated by HD records because support supervision by DHT was mostly concerned with other preoccupations (hence had not mainstreamed committee functionality in support supervision related analysis and documentation). 3. According to DHO's self-reported evidence, the failure to meet for Q1 was attributed to the HD's late access to guidelines or IPFs (no documented proof offered to the assessor). For example, Budaka HC IV Requisition for Q1 funds (dated 5th/10/2017; code 2.1.3/conduct of HUMC) is after Q1. <p>ID</p> <p>HFs' HUMCs Meetings in FY 2017/18 Functionality</p> <p>1 Budaka HC IV 3 75%</p> <p>2 Butove HC II 3 75%</p> <p>3 Namengo Mission HC II/PNFP 3 75%</p> <p>4 Sapiri HC III 3 75%</p> <p>Average 0/4 HFs (0%) 75%</p>	<p>0</p>
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<p>The LG has publicised all health facilities receiving PHC non-wage recurrent grants</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards: score 4 	<p>While the DLG publicized the list of 14 HFs receiving PHC non-wage recurrent grant inside the HD's walls, all the sampled HFs appeared to face challenges of managing the list:</p> <ol style="list-style-type: none"> At the HF level, only a few had the list in the public areas to allow for public viewing. Those that had the list had posted it in the offices, left it in files or extracted HF-specific info as one to be publicized. At the HD level, the HD notice board had posted the 14-HF list of HFs receiving PHC funding inside the HD office. The HD had not conceived of more pragmatic and systematic ways of publicizing the list of the 7 HFs (e.g. using Whatsapp or in the course of support supervision to encourage HFs to post the list or to influence the DLG to publicize the list on a LG website). These would foster wider transparency and accountability mechanisms. The DHO argued that since the funds go directly from BoU to the HF, the responsibility of posting the information falling under the ambit of the HD's mandate appeared to constitute to added or extra duties either for the DHO or the HD. At a DLG level, the Budaka DLG budget website was yet to publicize the 14-HF list of HFs receiving PHC funding. Indeed, the DLG Main Block Notice Board never posted the list. 	<p>0</p>
<p>Procurement and contract management</p>			
<p>The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the sector has submitted input to procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2 	<p>The DHO submission of input to the procurement plan to the PDU was made belatedly (5th /7/2018) i.e. way after the deadline of 30th/4/2018. The late submission was self-reportedly attributed to the HD receiving guidelines or IPFs rather late (no documented proof offered to the assessor).</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"> Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2. 	<p>The DHO submitted Procurement Form PP1 on the 25th/10/2017, hence submitted rather late (i.e. not by the end of the Q1 for FY 2017/18/ - with an implied deadline of 30th/9/2017). The late submission was self-reportedly attributed to the HD receiving guidelines or IPFs rather late (no documented proof offered to the assessor).</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"> Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4. 	<p>Reviewed payment vouchers in connection with the sector and noted that the DHO timely recommended and certified suppliers request for payment:</p> <p>i. Reviewed payment in respect of fencing of Katira Health Centre by Jesp Water General Suppliers and Construction Ltd. and noted that the request for payment was done on 21/05/2018 and DHO forwarded for payment on 04/06/2018. It was approved for payment on 05/06/2018 and payment was done on 15/06/2018.</p> <p>ii. Reviewed the payment voucher 05/06/218 which was for renovation of the ceiling board at Kameruka maternity ward by Kabwangasi General Traders Ltd. on 12/06/2018 and DHO made recommendation on 12/06/2018. It was approved for payment on 19/06/2018 the same date on which payment was done.</p> <p>iii. Voucher 16/05/2018 which was payment to Semlink International Limited for which a request for payment was done on 10/05/2018 and DHO recommended for payment on 17/05/2018. Approval was done on 22/05/2018 and payment was done 24/05/2018.</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"> Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4 	<p>The Principal District Planner adduced evidence for only the quarter 4 report to confirm that the Health sector submitted all the quarterly reports to the planning unit for consolidation. However, the submission dates for quarter 1, 2, & 3 could not be retrieved. The Quarter 4 report was submitted to the Planning Unit for consolidation on the 12th of July 2018, as per acknowledgement letter of receipt of the report by the Planner. This was before the expiry of the deadline of 15th July 2018.</p>	<p>4</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"> If sector has no audit query: Score 4 If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: Score 2 points If all queries are not responded to Score 0 	<p>Health had issues on accountability but there is no evidence that they responded to the audit queries. Although the Internal Auditor claims accountability was later provided and the query subsequently retired. That evidence is still lacking.</p> <p>From CAO's communication to the District Internal Auditor dated 23/07/2018 the DHO was to streamline the issues pointed out in the audit reports</p>	<p>0</p>
<p>Social and environmental safeguards</p>			

<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines (i.e. minimum 30 % women: score 2 	<p>Based on a sample of 4 HFs (see table), only 50.0% of the committees met the gender composition requirement. The average composition based on the assessments sample was 37.6% as the overall average for Budaka DLG (see table). A division of the sum of the said 2 figures by 2 is way below 50% (i.e. $50.0+37.6= 87.6\div 2= 43.8\%$). Therefore, the HD did not meet the gender composition requirement because the average of the sample only hovers below the 50% composite rate (not above, hence failed to meet the requirement marginally). The HD had not commissioned assessments or used the support-supervision function to find out the composition of committees and to address the associated problems.</p> <p>ID Name of HF All Members Female Members %/Female</p> <p>1 Budaka HC IV 9 3 33.3%</p> <p>2 Butove HC II 5 3 60.0%</p> <p>3 Namengo Mission HC II/PNFP 7 2 28.6%</p> <p>4 Sapiri HC III 7 2 28.6%</p> <p>Average Gender Composition 37.6%</p>	<p>0</p>
<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2. 	<p>There was no documented evidence provided by the HD and the HFs that the DHO issued a circular on sanitation, including labeling toilets for men and women. The noteworthy evidence includes the fact that none of the sampled HFs had labeled the toilets appropriately.</p>	<p>0</p>

<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that all health facility infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: Score 2 	<p>All 5 HF infrastructure projects implemented in the FY 2017/17 (e.g. fencing of Katira and Kamonkoli HC IIIs, etc) all had separately filled Environment and Social Screening Form (ESSF). However, there were some evident errors of omission or commission seen in all the 5 forms:</p> <ol style="list-style-type: none"> The EO and CDO did not fill the forms in such ways that identify or specify the possible risks associated with the projects. Consequently, the EO and CDO did not fill the forms in such ways that identify or specify the proposed mitigation plans or measures to address the risks. 	<p>2</p>
<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 2 	<p>The EO and CDO did not compile Site Visit Reports to assess compliance with any mitigation measures meant to address the identified risks. Instead, the tasks was left to the whims of the Head Works to reflect the same in the completion certificates of the projects. None of the certificates did justice to assessing compliance with environmental and social risk mitigation measures.</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"> 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. 	<p>On access to guidelines on segregation of medical waste (either in form of a chart or otherwise) 100% of the sampled HFs displayed the chart (an indication that the HD had issued guidance on the same).</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"> • Evidence that the district Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: <ul style="list-style-type: none"> o If 100 % of the budget allocation for the current FY is allocated to S/Cs below average coverage: score 10 o If 80-99%: Score 7 o If 60-79: Score 4 o If below 60 %: Score 0 	<p>Budaka district has a district average of 82.6% with the sub-counties of Kabuna (75%), Nansanga (74.6%), Naboa (71.2%), Lyama (72.3%), Kaderuna (55.8%), Budaka Town Council (41.45%), Budaka (72.7%), Kidimikoli (81.5%) and Kamonkoli (81.9%) below average. The district did budget for the drilling and construction of 10 deep boreholes and rehabilitation of 15 deep boreholes in the current financial year. Some of the sub-counties with safe water coverage below average were targeted in the budget which include; Budaka (2), Naboa (2), Nansanga (1), Kamonkoli (2) and Kaderuna (2). This accounted for 90% of the total allocations.</p>	7
<p>The district Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the district Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY. <ul style="list-style-type: none"> o If 100 % of the water projects are implemented in the targeted S/Cs: <ul style="list-style-type: none"> Score 15 o If 80-99%: Score 10 o If 60-79: Score 5 o If below 60 %: Score 0 	<p>The district has a safe water average coverage of 84.2% with the sub-counties of Kamonkoli (78%), Kadimikoli (81%), Kabuna (75%), Nansanga (73%), Naboa (71%), Lyama (77%), Kaderuna (47%) and Budaka (69%). According the annual progress report, the LG water department had planned to drill and construct 13 deep boreholes and rehabilitate 7 deep boreholes. The boreholes were to be constructed in Kamonkoli (2), Kadimikoli (2), Kabuna (1), Nansanga (1), Kaderuna (5) and Budaka (1). They were all implemented accounting for 100%.</p>	15

Monitoring and Supervision

<p>The district Water department carries out monthly monitoring of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the district Water department has monitored each of WSS facilities at least annually.</p> <ul style="list-style-type: none"> • If more than 95% of the WSS facilities monitored: score 15 • 80% - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60% - 69% monitored: score 5 • 50% - 59%: score 3 • Less than 50% of WSS facilities monitored: score 0 	<p>In the previous FY 2017/18, the LG water department implemented the drilling & construction of 13 boreholes and the rehabilitation of 22 boreholes the excess of which came from the funds retained from the previous FY and the savings from the low cost contractors.</p> <p>The department did monitor each of WSS facilities as evidenced by some of the monitoring reports below;</p> <ul style="list-style-type: none"> - Monthly activity report for the month of July, 2017. Dated 31st/ July/ 2017. - Monthly activity reports for the month of August 2017. Dated: 31st August, 2017. - Monthly activity reports for the month of September, 2017. Dated: 29th/September, 2017. - Monthly activity reports for the month of October 2017. Dated: 31st October, 2017. - Monthly monitoring reports for the month of January, 2018. Dated: 31st January, 2018. <p>In these reports, it was observed that monitoring of the WSS facilities was done monthly. This therefore accounted for 100%.</p>	<p>15</p>
<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the district has submitted accurate/consistent data for the current FY: Score 5 • List of water facility which are consistent in both sector MIS reports and PBS: score 5 	<p>The LG did submit consistent data for the current FY which include the construction of a 5 stance latrine in RGCs, drilling and construction of 10 deep boreholes and rehabilitation of 15 deep boreholes as evidenced in output 83: Borehole construction and rehabilitation</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"> List of water facility which are consistent in both sector MIS reports and PBS: score 5 	<p>The list of the facilities include;</p> <p>Drilling to be carried out in;</p> <p>Nakabale & Kiryolo II villages in Kaderuna sub-county; Namwamba & Nangeye villages in Naboa sub-county; Namwenda & Nansemenye in Budaka sub-county; Nansanga P/S in Nansanga sub-county; Jami B & Nyanza in Kamonkoli sub-county and Budukulo in Kameruka sub-county.</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 LG water department has submitted procurement request, complete with all technical requirements to PDU that cover all items in the approved sector AWP and budget. This was done on 19/4/18.</p>	<p>4</p>

<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> If the contract manager prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2 	<p>The contract manager for the projects was Mr. Lutaaya Robert the Engineering Assistant who was appointed on 20th July, 2017. The manager did prepare a contract management plan for all the activities that were to be done by the contractors.</p> <p>In the file, minutes of contract management meeting held on 18th February were found</p> <p>There were also reports for the monthly site visits for the different WSS infrastructure. These included;</p> <ul style="list-style-type: none"> - Monthly report for siting and drilling in the month of September 2017 - Monthly report for water activities (Drilling & pump testing) in the month of October 2017 - Monthly report for water activities (casting and installation) in the month of November 2017. - Progress report on the post construction support dated: 12th /10/2017. 	<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"> If water and sanitation facilities constructed as per design(s): score 2 	<p>From the sampled water sources, construction was as per design(s). For example, the boreholes in Nampangala Village, Budaka sub-county, Namukalo village borehole, Idudi Nataalo "B" Village Borehole and Izibanabo Village Borehole were as per stipulated design. They were well protected, had water discharge pit and right pump handle used.</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"> If contractor handed over all completed WSS facilities: score 2 	<p>The contractor did hand over all completed WSS facilities for example;</p> <p>Handover of completed projects of construction of 15 boreholes, FY 17-18.</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"> If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2 	<p>From the files, it was observed that DWO appropriately certified all WSS projects and prepared and filed completion reports. For example;</p> <ul style="list-style-type: none"> - Completion report for borehole rehabilitation Dated: 22nd January, 2018. - Substantial completion certificate for the construction of 15 boreholes by KLR (U) Limited, Dated: 15th March, 2018. - Substantial completion certificate for the rehabilitation of twenty five additional boreholes. Dated: 3rd May, 2018. 	<p>2</p>

The district Water department has certified and initiated payment for works and supplies on time

Maximum 3 for this performance measure

- Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points

A review of the payment requests indicated that the District Water Officer timely recommended and certified suppliers and contractors requests for payment. Examples are as outlined below:

- i. Voucher No. 26/12/17W being payment for the construction of 10 boreholes by KLR (U) Ltd. at shs.143,964,000. Request was done on //12/2017 and the District Water Officer recommended for payment on 11/12/2018. Payment was done on 14/12/2017
- ii. Voucher NO. 01/04/2018 being payment to KLR (U) Ltd. for borehole construction at shs. 76,592,750. Request was done on 01/02/2018 and the water officer initiated and recommended for payment on 21/03/2018. Forwarded to CAO for approval on 22/3/2018 CFO sanctioned payment on 23/3/2018 Approval was done on 26/03/2018 and payment was done on 28/03/2018
- iii. Voucher No. 01/06/2018 being payment to Go-Standard Service Ltd. of shs.8,594,319 for construction of 5 stance line pit latrine at Nansanga Trading Centre. Request was done on 23/05/2018 and the District Engineer recommended for payment on 30/05/2018 and accounts approved for payment on 31/05/2018. Payment was done on 04/06/2018
- iv. Voucher No. 22/01/18 being payment to Budaka District Pump Mechanics of shs.1,083,139 being retention fees. Request was made on 22/01/2018 and the District Water Officer recommended for payment on 22/01/2018. Accounts approved for payment on 23/01/2018 and payment was done on 24/01/2018.
- v. Voucher No. 22/05/2018 being payment for the rehabilitation of boreholes by Budaka District Pump Mechanics Consultancy of shs. 26,512,277. Request was done on 02/05/2018 and th District water Officer recommended for payment on 03/05/2018. . Accounts approved payment on 14/05/018 and payment was done on 14/05/2018.

<p>The district Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5 	<p>The Principal District Planner adduced evidence for only the quarter 4 report to confirm that the Water sector submitted all the quarterly reports to the planning unit for consolidation. However, the submission dates for quarter 1, 2, & 3 could not be retrieved. The Quarter 4 report was submitted to the Planning Unit for consolidation on the 11th of July 2018, as per acknowledgement letter of receipt of the report by the Planner. This was before the expiry of the deadline of 15th July 2018.</p>	<p>5</p>
<p>The District Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year <ul style="list-style-type: none"> If sector has no audit query score 5 If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0 	<p>Obtained a document from the District Water Officer, Mr. Nabucha Aloysius dated 14/05/2018 that was copied to the CAO – Budaka submitting accountabilities and responses in respect of the internal audit queries of Quarter 1 and Quarter 3 for the FY 2017/18 and requesting for verification and retirement of the audit query. This followed the management letter provided by the internal audit department dated 7/05/2018 to the CAO Budaka</p>	<p>3</p>
<p>Governance, oversight, transparency and accountability</p>			

<p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3 	<p>Evidence was presented by the Clerk to Council to confirm that the council committee 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.</p> <p>The Evidence included a set of minutes of the committee meetings that were held on the dates indicated below:</p> <p>Meetings convened on the 20/09/2017, 5/12/2017/ and 16/04/2018 and discussed the following issues as per the minutes below:</p> <ul style="list-style-type: none"> - Budget Performance for the Water sector and supervision and monitoring of the rehabilitated water sources, discussed during the meeting of the 20/9/17 under minute number 04/Wks/09/2017. - Scrutinised the DDEG budget allocation to the water sector, reviewed the report about the sanitation and coordination meetings conducted in the community, motorised boreholes connected to the district water system to supply district offices, reviewed progress of rehabilitation of boreholes. Discussed under minute number 9/Wks/12/2017 during the sitting of 5/12/2017. - Reviewed progress of the construction of 15 boreholes at different sites at Nampanga and Budaka sub counties and rehabilitation of 10 boreholes , as per minute number 16/Wks/04/2018 during the sitting of 16/04/2018/
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<p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the water sector committee has presented issues that require approval to Council: score 3 	<p>Evidence presented by the Clerk to Council included a set of recommendations made by the Council committee for water to the various council sittings as indicated below:</p> <p>Meeting of 18/07/2017, under minute number 03/07/BDLG/Cou/17 approved the district staff structure including for the Water department.</p> <p>Meeting of 3/01/2018, under minutes 31&32/1/BDLG/Cou/2018, discussed the issue of the water shortage in the district and adopted the recommendation of the committee to expeditiously repair the broken down boreholes. Also noted and appreciated the efforts of the district Chairperson who had identified a development partner John 414, who had pledged to support the district to repair 114 boreholes. Resolved to recruit a pump mechanic to be responsible for repairing the broken down boreholes. Also cautioned the citizens about the poor sanitation in the district that could lead to cholera outbreak if efforts are not made to improve on sanitation</p> <p>Meeting of the 29/03/2018, under minute number 48/03/BDLG/03/2018, discussed the conflict about the Namatala Wetland that had led to clashes with the Bagwere communities of Budaka and the Banyole communities of Buteleja. Resolved to seek the intervention of the ministry of water and environment to help resolve the conflict.</p>	<p>3</p>
<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2. 	<p>From the notice board, the LG water department has shared information on the AWP, budget and water development grant releases and expenditures.</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"> All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2 	<p>Not all WSS projects were clearly labelled indicating the name of the project, date of construction, the contractor and source of funding, for example;</p> <ul style="list-style-type: none"> Nampangala village, Budaka sub-county, Funder: DWSCG, DWD No 60694, Date: 8th/01/2018 Izibangabo village, Budaka sub-county, dwd 22855, Date: 20th/04/07 Idudi Nataalo "B", DWD 60611, Funded by DWCG, FY 2017/18. 	<p>0</p>
<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2 	<p>From the notice boards, there was information on tenders and contract awards displayed on the district notice board, For instance;</p> <p>Best evaluated Bidder information was displayed as follows;</p> <p>Procurement reference number: Buda571/wrks/2018 – 2019/0003; Subject of procurement: Construction of 10 complete boreholes; Method of procurement: open bidding; Name of provider: M/s Equator Water well Drilling Ltd; Total contract price: Ugx 158,592,000.</p>	<p>2</p>
<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> If communities apply for water/ public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1 	<p>From the files, it was observed that communities had applied for water/public sanitation facilities for the current FY ; For instance;</p> <ul style="list-style-type: none"> Gadumire village , Budaka sub-county applied for a borehole on 9th/3/2018 Jami B village, Kamonkoli sub-county applied for a borehole on 5th/3/2018 Namwamba village in Naboia sub-county applied for a borehole on 9th/3/2018 Nansenyee village in Budaka sub-county applied for a borehole on the 28th/3/2018 	<p>1</p>

<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> Water and Sanitation Committees that are functioning evidenced by either: i) collection of O&M funds, ii) carrying out preventive maintenance and minor repairs, iii) facility fenced/protected, or iv) they have an M&E plan for the previous FY: score 2 <p>Note: One of parameters above is sufficient for the score.</p>	<p>From the sampled facilities it was that the WSCs were not functional as evidenced by the lack of collection of O&M funds, unfenced facilities, poorly constructed soak pits etc.</p>	<p>0</p>
<p>Social and environmental safeguards</p>			
<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2 	<p>From the project file, environmental and social screening was conducted for all WSS projects and reports are in place. For example screening forms were found for;</p> <ul style="list-style-type: none"> - Drilling of borehole at Nacheru village in Kadimikoli sub-county - Drilling of borehole at Wage village in Kaderuna sub-county - Drilling of borehole at Idudi village in Nasanga sub-county - Drilling of borehole at Moru village in Kideruna sub-county. Etc. 	<p>2</p>
<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1 	<p>From the file, follow up support was provided in case of unacceptable environmental concerns in the past FY as observed in the environment and social certification for the higher local government projects dated: 18th/01/2018; 15th/01/2018; 11th /01/2018 etc.</p>	<p>1</p>

<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that construction and supervision contracts have clause on environmental protection: score 1 	<p>The construction and supervision contracts do have a clause on environmental protection cited as section 4.3.3.</p>	<p>1</p>
<p>The district Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> If at least 50% WSCs are women and at least one occupying a key position (chairperson, secretary or Treasurer) as per the sector critical requirements: score 3 	<p>By review of District Software report 2017/2018 all Water User Committee are in place. These committees have at least 50% women and in most WUC's women are members of the executive and occupy key positions.</p>	<p>3</p>
<p>Gender and special needs-sensitive sanitation facilities in public places/ RGCs provided by the Water Department.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3 	<p>Public sanitation facilities had adequate access and separate stances for men, women but not all had rumps for PWDs. For example 5 stance VIP latrine Nansanga Public Rural Growth Centre.</p>	<p>0</p>