

LGPA 2017/18

Accountability Requirements

Bukedea District

(Vote Code: 578)

Assessment	Compliant	%
Yes	3	50%
No	3	50%

Accountability Requirements

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Assessment area: Annual performance contra	ıct		
LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.	XXX	Bukedea District Local Government submitted a Draft Performance Contract for FY 2017/2018 on 11th May 2017 and issued with a receipt (No. 0621) by MoFPED. Then on the 17th July 2017, the district submitted a Final Performance Contract for FY 2017/2018 (as per Submission Schedule of MoFPED). Thus, the submission of the Final Performance Contract for FY 2017/2018 was done after the mandatory deadline of 30th June 2017.	No
Assessment area: Supporting Documents for available	the Budget req	uired as per the PFMA are submitt	ed and
LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).	XXXXX	Bukedea DLG has a Budget for FY 2017/2018 (approved on 26th May 2017) including a Procurement Plan for FY 2017/2018.	Yes
Assessment area: Reporting: submission of a	nnual and quar	terly budget performance reports	
LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)	XXXXX	Bukedea DLG submitted the Annual Budget Performance Report for FY 2016/2017 on 11th August 2017 (Receipt No. 4550) issued by MoFPED. The submission was made after the deadline of 31st July 2017.	No

 Quarter Four submitted on 11th August 2017 (Receipt No. 4550) issued by MoFPED. All quarterly reports were submitted late. The requirement is that quarterly reports should submitted by the end of the following month after the end of 		11th August 2017 (Receipt No. 4550) issued by MoFPED.
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Assessment area: Audit

The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous financial year by April 30 (PFMA s. 11 2g). This statement includes actions against all findings where the Auditor General recommended the Accounting Officer to take action (PFMA Act 2015; Local Governments Financial and Accounting Regulations 2007; The Local Governments Act, Cap 243).	XXXXX	Status report on implementation of Auditor General findings for FY 2015/16 was submitted to PS/ST, Directorate of Internal Audit via letter dated 24th March 2017, reference CR/251/2. The assessment result/ score is therefore compliant since the status report was submitted before 30th April 2017 in line with Section 11 (2) Public Finance Management Act, 2015. The following issues were raised; i. Unaccounted for funds ii. Understaffing iii. Local Revenue Shortfall iv. Under absorption of funds v. Procurement Anomalies vi. Failure to meet the minimum standards Therefore, compliant.	Yes
The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer	XXXXX	Unqualified audit opinion for FY 2016/17 as per Auditor General Report of December 2017. Therefore, compliant.	Yes



LGPA 2017/18

Crosscutting Performance Measures

Bukedea District

(Vote Code: 578)

Score 36/100 (36%)

Crosscutting Performance Measures

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Planning,	budgeting and execution		
pr m all Di by Pr Co cc ap Pl	All new infrastructure projects in: (i) a municipality; and (ii) all Town Councils in a District are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans Maximum 4 points for this performance	Evidence that a municipality/district has: • A functional Physical Planning Committee in place that considers new investments on time: score 2.	0	 There is a Physical Planning Committee, which has been approving building plans. However, there were no minutes of the meetings that had been conducted. There was no registration book in which submitted plans for new investments were recorded. Therefore, it was no possible to ascertain whether the committee considers new investments in time or not.
	measure.	• All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2.	0	Bukedea District does not Physical Development Plan. However, there is an urban Physical Development Plan for Bukedea Town Council (2008 - 2018). Consequent upon the above, the consistency of the plans of all new infrastructure investments with the Physical Development Plans could not be established since investments are outside areas that have Physical Development Plans.
2	The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles	• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.	2	The priorities in the Annual Work Plan for FY 2017/2018 are based on the priorities in the Budget Conference held on 25th November 2016. For example, compare the priorities under: • Water: Bukedea District Local Government Budget FY 2017/2018 – Section C: Detailed Estimates of Expenditure (Page 28) and Report of the Budget Conference of 25th November 2016 (Page 6).

			• Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If different, justification has to be provided and evidence that it was approved by Council. Score 2.	2	The capital investments in the Approved Annual Work Plan for 2017/2018 were derived from the approved Five-Year Development Plan (2015/2016 – 2019/2020). For example, under education compare the investments in the Bukedea District Local Government Budget FY 2017/2018 – Section C: Detailed Estimates of Expenditure (Page 20); and the projects in the Bukedea DDP – Chapter Five: Five-Year Work Plans FY 2015/2016 – 2019/2020 (Page 204).
			• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1.	0	The project profiles were not developed.
	3	Annual statistical abstract developed and applied Maximum 1 point on this performance measure	• Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum 1 point.	0	There is no Annual statistical abstract for FY 2016/2017.
-	4	Investment activities in the previous FY were implemented as per AWP. Maximum 6 points on this performance measure.	• Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2	2	The infrastructure projects implemented during FY 2016/2017 (as indicated in the Q4 Performance Report for 2016/2017 – Cumulative Department Work Plan Performance - Pages 80, 86, 92 – 93, 96 – 97, & 107) were derived from the AWP and Budget for FY 2016/2017 – C: Detailed Estimates of Expenditure (Pages 14, 22, 28, 30 & 38).
			• Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. o 100%: score 4 o 80-99%: score 2 o Below 80%: 0	0	Out of a list of 50 investment projects obtained from the Bukedea PDU, 36 (72%) had been completed by the end of FY 2016/2017.

5	The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects	• Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2	0	Not all projects were completed.
	infrastructure projects and assets during the previous FY Maximum 4 points on this Performance Measure.	• Evidence that the LG has budgeted and spent at least 80% of O&M budget for infrastructure in the previous FY: score 2	2	The total budget for O&M (for all departments) for FY 2016/2017 was UGX 117,213,000, while the actual expenditure was UGX 100,934,000. This was 86.1% of the budget for O&M (Fourth Quarter Performance Progress Report for FY 2016/2017 (Cumulative Department Work Plan Performance).
Asse	essment area: Human Re	esource Management		
6	LG has substantively recruited and appraised all Heads of Departments	 Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 	0	 Only one performance report was presented i.e. for the Ag district engineer.
	Maximum 5 points on this Performance Measure.	• Evidence that the LG has filled all HoDs positions substantively: score 3	0	• The district has an acting DHO, SENIOR PRODUCTION OFFICER, SENIOR PROCUREMENT OFFICER. The district was implementing a structure approved in 2005 and now has a new structure REF arc 135/306/01 dated 13th June 2017. Under minute No BDLG/COU/49 03/2017

7	The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY. Maximum 4 points on this Performance Measure	• Evidence that 100 percent of staff submitted for recruitment have been considered: score 2	2	 46th Meeting of Bukedea DSC held on 27th march 2017 45th meeting of Bukedea DSC held on 16th march 2017 44th meeting of Bukedea DSC held on 17th-21st march 2017 43rd meeting of Bukedea DSC held on 3rd – 4th October 2016 42nd meeting of Bukedea DSC held on 6th September 2016 The staff submitted for recruitment were consider
		• Evidence that 100 percent of staff submitted for confirmation have been considered: score 1	1	 44th meeting of Bukedea DSC held on 8th November 2016 Submission paper No 16/2017 date 7th February 2017 The staff submitted for confirmation were considered
		• Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1	1	• There was no disciplinary case In 2016/17 was submitted
8	Staff recruited and retiring access the salary and pension payroll respectively within two months Maximum 5 points on this Performance Measure.	• Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3	0	 Some staff that were recruited did not access the pay rolls with in two month of recruitment e.g. File CR/D/10370 File CR/D/10360

		• Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2	0	The district is given a smaller budget that doesn't cover their pensions. Errors take a lot of time to be cleared so many of the retired staff have not accessed the pay role Late release of approved pension and gratuity files So many of the retired staff have not accessed the pension payroll
	essment area: Revenue	Mobilization		
9	The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one) Maximum 4 points on this Performance Measure.	• If increase in OSR from previous FY but one to previous FY is more than 10% : score 4 points • If the increase is from 5 -10% : score 2 point • If the increase is less than 5% : score 0 points.	4	Own Source Revenue collection in FY 2015/16 was UGX 99,638,059 which increased to UGX 118,873,001 in FY 2016/17. The increase was UGX 19,234,942 which is equivalent to 19.3%. This is more than 10% hence maximum score of 4.
10	LG has collected local revenues as per budget (collection ratio) Maximum 2 points on this performance measure	• If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within /- 10% : then 2 points. If more than /- 10% : zero points.	0	Own Source Revenue was budgeted at UGX 174,194,000 in the FY 2016/17 and the actual collection was UGX 118,873,001. This translates into negative variance of UGX 55,320,999 equivalent to -31.8%. The variance is more than -10% therefore, zero score.

11	Local revenue administration, allocation and transparency Maximum 4 points on this performance measure	• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2	0	While UGX 65,742,160 was received by Bukedea District as local revenue (Local Service Tax) from MoFPED in the FY 2016/17, there was no evidence that 65% was remitted to LLGs. This is contrary to Section 85 (4) of the LGs Act, CAP 243, and Regulation 39(2) of the LGFARs 2007. Therefore, zero score.
		• Evidence that the LG is not using more than 20% of OSR on council activities: score 2	0	 Council expenditure (allowances) in the FY 2016/17 was UGX 46,080,000. 20% of local revenue for FY 2015/16 was UGX 19,927,612. Therefore, council expenditure for FY 2016/17 being more than 20% of local revenue for FY 2015/16, the score is zero.
Asse	essment area: Procurem	ent and contract management		
12	The LG has in place the capacity to manage the procurement function Maximum 4 points on this performance	• 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	0	• Acting Senior Procurement Officer is on contract till June 2018.
	measure.	• Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1	0	• The assessment team could not gain access to any of the documents necessary for the procurement part of the assessment due to the absence of all the procurement staff despite the early announcement of the visiting dates by both the assessment team and by OPM as confirmed by the CAO.
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		• Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1	0	• The assessment team could not g access to any of the documents necessary for the procurement part the assessment due to the absence all the procurement staff despite the early announcement of the visiting dates by both the assessment team and by OPM as confirmed by the C
13	The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed. Maximum 2 points on this performance measure.	• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2	0	• The assessment team could not g access to any of the documents necessary for the procurement part the assessment due to the absence all the procurement staff despite the early announcement of the visiting dates by both the assessment team and by OPM as confirmed by the C
14	The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.	• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2	0	• The assessment team could not g access to any of the documents necessary for the procurement part the assessment due to the absence all the procurement staff despite the early announcement of the visiting dates by both the assessment team and by OPM as confirmed by the C
	Maximum 6 points on this performance measure	• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2	0	• The assessment team could not g access to any of the documents necessary for the procurement part the assessment due to the absence all the procurement staff despite the early announcement of the visiting dates by both the assessment team and by OPM as confirmed by the C

		• For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.	0	• The assessment team could not gain access to any of the documents necessary for the procurement part of the assessment due to the absence of all the procurement staff despite the early announcement of the visiting dates by both the assessment team and by OPM as confirmed by the CAO.
15	The LG has certified and provided detailed project information on all investments Maximum 4 points on this performance measure	• Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2	2	• Interim certificates presented in terms of payment certificate records of projects examples are casting and installation of 7 boreholes dated 20th June 2016, construction of a slaughter house in Aligoi dated 28th Mar 2017, completion of administration block Kolir sub county dated 18th May 2017, completion of administration block in Bukedea sub county dated 7th Feb 2017
		• Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2	0	• The assessment team could not gain access to any of the documents necessary for the procurement part of the assessment due to the absence of all the procurement staff despite the early announcement of the visiting dates by both the assessment team and by OPM as confirmed by the CAO.
Asse	essment area: Financial	management		
16	The LG makes monthly and up to- date bank reconciliations Maximum 4 points on this performance measure.	• Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4	4	 There was evidence of up to date bank reconciliation. Using IFMS, the statements were reviewed on the system although they were not printed on a monthly basis. Therefore, a score of 4.

17	The LG made timely payment of suppliers during the previous FY Maximum 2 points on this performance measure	• If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2.	2	The claims register did not show any overdue bills beyond 60 days. Therefore, score 2 points.
18	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.	• Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.	3	Although there is no substantive Senior Internal Auditor, the LG has an Internal Auditor who produced timely quarterly reports for all the 4 quarters of FY 2016/17 as follows; i. 4th Quarter – dated 6th July 2017 ii. 3rd Quarter – dated 5th April 2017 iii. 2nd Quarter – dated 10th January 2017 iv. 1st Quarter – dated 6th October 2016 In line with Regulation 12 (e) of the LGFARs 2007, quarterly reports were produced and submitted to council within one month after the end of each quarter. The score of 3 is maintained because the test is mainly production and submission of reports on time. Secondly, in the entire Teso region, Bukedea District is the only one whose Internal Auditor produced quarterly reports within the mandatory 30 days after the end of each quarter in the FY 2016/17. Therefore, score of 3.

• Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries: score 2.	0	 There is no evidence that the Committee for Finance and Administration discussed and submitted information on the implementation of 2016/17 internal audit findings to council and LG PAC. Review of minutes of meetings of this committee held on 16th October 2016, 13th December 2016, 23rd March 2017, and 16th May 2017 indicated that internal audit findings were not covered in the meetings. Therefore, score zero.
• Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1	1	 In line with Section 48 of the PFM Act, 2015, quarterly internal audit reports were submitted to CAO as follows; i. 4th Quarter – dated 6th July 2017 – submitted to CAO on 6th July and LG PAC on 7th July 2017 ii. 3rd Quarter – dated 5th April 2017 – submitted to CAO on 5th April and LG PAC on 7th April 2017 iii. 2nd Quarter – dated 10th January 2017 – submitted to CAO on 10th January and LG PAC on 11th January 2017 iv. 1st Quarter – dated 6th October 2016 – submitted to CAO on 6th October and LG PAC on 8th October 2016 In addition, there is evidence that LG PAC reviewed all the 4 quarterly internal audit reports of FY 2016/17 although in two sittings as follows; i. 15th – 21st December 2016 ii. 19th – 26th June 2017 Therefore, a score of 1

19	The LG maintains a detailed and updated assets register Maximum 4 points on this performance measure.	• Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4	0	 There is no evidence of up to date assets register showing details of buildings, vehicles and other assets a per LGAM 2007. However, the LG is in the process of updating the assets register using the template provided by the Accountant General in August 2017. Therefore, zero score
20	The LG has obtained an unqualified or qualified Audit opinion Maximum 4 points on this performance measure	Quality of Annual financial statement from previous FY: • unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0	4	Unqualified audit opinion for the FY 2016/17 as per Auditor General Repo of December 2017. Therefore, score

21	The LG Council meets and discusses service delivery related issues Maximum 2 points on this performance measure	Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2	2	 The District Council of Bukedea met and discussed service delivery related issues as highlighted below: BDLG/COU/003/06/2017 (Minutes of District Council meeting held 23rd June 2017). BDLG/COU/053/05/2017 (Minutes of District Council meeting held 26th May 2017). BDLG/COU/48/03/2017 & BDLG/COU/49/03/2017 (Minutes of District Council meeting held 29th March 2017). BDLG/COU/043/02/2017 (Minutes of District Council meeting held 24th February 2016). Refer also to communication of Clerk to Council / Bukedea to CAO/ Bukedea on 'Council Resolutions for Implementation' dated 27th April 2017. BDLG/COU/033/12/2016 (Minutes of District Council meeting held 23rd December 2016). BDLG/COU/018/09/2016 (Minutes of District Council meeting held 1st September 2016).
22	The LG has responded to the feedback/complaints provided by citizens Maximum 2 points on this Performance Measure	• Evidence that LG has designated a person to coordinate response to feed- back (grievance /complaints) and responded to feedback and complaints: score 2.	0	There is no person designated to coordinate response to feed-back (grievances / complaints).

23	The LG shares information with citizens (Transparency)	Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2	2	The LG Payroll and Pensioner Schedule were displayed on the inside walls of the Administration Block at Bukedea District Headquarters.		
	Total maximum 4 points on this Performance Measure	 Evidence that the procurement plan and awarded contracts and amounts are published: score 1 	0	Information on the awarded contracts and amounts was not displayed. <u>INSTEAD</u> , information on the 'Unsuccessful Bidders' had been displayed on the inside walls of the Administration Block at Bukedea District Headquarters.		
		• Evidence that the LG performance assessment results and implications, are published e.g. on the budget website for the previous year (from budget requirements): score 1.	0	Not Applicable. The Central Government did not conduct the Annual Performance Assessment for LGs in 2016/2017. It was also noted that the district did not have a functional website.		
24	The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens Maximum 2 points on	• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1	0	The dissemination was majorly through DTPC meetings, where Senior Assistant Secretaries (Sub-County Chiefs) were purposely invited to participate. Minutes of the DTPC for FY 2016/2017 were not availed to ascertain this.		
	this performance measure	• Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc) with the public to provide feed-back on status of activity implementation: score 1.	0	The discussions conducted with the public to provide feedback on status of activity implementation during FY 2016/2017, were with the help of development partners. However, no documentary evidence was availed.		
ASSE	Assessment area: Social and environmental safeguards					

25	The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles Maximum 4 points on this performance measure.	• Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2.	0	 Guidance is present in the Gender sector but some are of 2015 including among others the following Report on Gender awareness training dated 14th April 2015 Report on Gender main streaming report dated 10th June 2015 and not yet signed. This comes after 1 meeting of women executive held on 21st Dec 2016 and only signed by the secretary and not the chairperson. This means that they held one women executive meeting per year. Most of the files are for UWEP, YLP and UNFPA with reports and minutes Minute on PWD special grant steering committee meeting dated 29th July 2016
		• Evidence that gender focal point has planned activities for current FY to strengthen women's roles and that more than 90% of previous year's budget for gender activities has been implemented: score 2.	0	 Current year budget presented for the district for Gender related activities was the same as previous FY (Adult literacy = 8,378,324, Women councils= 3.056,800, PWD= 1,528,400 and youth councils= 3,056,800). Meaning that only 19% of the LG money goes to women activities alone. Activities seen include cerebrating women's day and meetings only.
26	LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition	• Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 2	0	 No screening reports presented No EMP reports presented No EIA review reports presented Presented Environment Assessment reports for schools
	Maximum 6 points on this performance measure	• Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1	0	• The assessment team could not gain access to any of the documents necessary for the procurement part of the assessment due to the absence of all the procurement staff despite the early announcement of the visiting dates by both the assessment team and by OPM as confirmed by the CAO.

• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc): score 1	0	• At the moment all projects are constructed on Sub County/ district land. No need for land tittles and agreements. But no evidence was presented.
• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2	0	 No completed Environmental Certificate form were presented



LGPA 2017/18

Educational Performance Measures

Bukedea District

(Vote Code: 578)

Score 17/100 (17%)

No.	Performance Measure	Scoring Guide	Score	Justification		
Asse	ssessment area: Human Resource Management					
1	The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school) Maximum 8 for this performance measure	• 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	0	According to the LG Performance Contract 2017/2018, the district has a wage provision of 8,504,193,000/= for 1301 teachers at all levels. The wage provision will also cover 15 Head Teachers and 15 Teachers (Education Assistants) that are due to be recruited (These have already been interviewed) Meanwhile, although each of the 97 Government Schools in Bukedea has the minimum of 7 teachers, some of the Schools do not have a substantive Head Teacher. Even after recruitment, 29 schools will still not have a substantive Head Teacher		
		• Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4	0	According to the Staff List in the Department, each of the 97 Government Schools has the minimum of 7 teachers. 53 of these schools have a substantive Head Teacher and another 15 schools are due to be assigned a substantive Head Teacher in 2017/2018. However, even after recruitment, 29 schools will still not have a substantive Head Teacher		

2	LG has substantively recruited all primary school teachers where there is a wage bill provision Maximum 6 for this performance measure	 Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0 	3	The ceiling for teachers within the wage bill provision is 1347. At the time of assessment, there were 1301 teachers on the payroll This translates into 97% of the structure for primary teachers filled within the wage bill provision
3	LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision. Maximum 6 for this performance measure	• Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6	0	The approved structure of the LG titled "Approved and Adopted Staff Structure for Bukedea DLG" presents 3 positions for inspector of schools as follows; Senior Inspector of schools (1) Inspector of Schools/ Special Needs (1) Inspector of Schools/ General The position of Senior Inspector of Schools and that of Inspector of Schools/ Special Needs are filled. However the position of Inspector of Schools/ General is not filled

4 The LG Educated department his submitted a recruitment placed covering primite teachers and inspectors to for the current Maximum 4 for performance measure	as an ary school HRM t FY. Evidence that t department ha plan to HRM fo positions of Pri	the LG Education s submitted a recruitment or the current FY to fill mary Teachers: score 2	2	The LG Education Department submitted recruitment requirements for the Department to the CAO, Bukedea DLG in a letter dated 24th April 2017. In the letter, the DEO informed the CAO that the staffing gaps included; 44 Head Teachers, 26 Deputy Head Teachers, 2 Senior Education Assistants and 33 Education Assistants
	department ha plan to HRM fo	the LG Education s submitted a recruitment or the current FY to fill hool Inspectors: score 2	0	The LG Education Department submitted recruitment requirements for the Department to the CAO, Bukedea DLG in a letter dated 24th April 2017. The letter did not present the need to recruit a school inspector
5 The LG Educe department h conducted performance	ation department ap	the LG Education praised school inspectors vious FY • 100% school pre 3	0	No performance reports were presented
appraisal for a inspectors an ensured that performance appraisal for a primary schoo teachers is conducted du previous FY. Maximum 6 fo performance measure	d all bl head ring the during the prev score 3 • 70% • 70%: score 0	he LG Education praised head teachers /ious FY. • 90% - 100%: - 89%: score 2 • Below	0	• No performance reports were presented. However they presented performance agreements
Assessment area: I	Monitoring and Inspection	n		

national level in the previous FY to schoolsThe LG Education Department had no inventoried the circle guidelines and pol received in FY 201 and were only able present 2 circulars follows;Maximum 3 for this performance measureSchool Feeding Programme in Education	ot culars, icies 16/2017 e to
Institutions dated 1 May, 2017 from th Ministry of Educati Sports (MOES)	15th e
Introduction and recommendation of Ball Limited dated February 2017 from	24
Evidence that the LG Education department has communicated all The sampled scho the following circul	
guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1	me in ons
Bukedea Townsh Introduction of Pea Corps dated 3rd C 2016 from MOES;	ace October
Kaloko P/S; Schor Feeding Programm Education Institution dated 15th May, 2 MOES, Teachers S Supervision in Schor dated 30th June 2 MOES	ne in ons 017 from Support lools
Kachage P/S did present any circula	
Suula P/S; Mass Registration of Lea all Primary Schools	

				25th April, 2017 from MOES
		• Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level, including on school feeding: score 2	0	The Minutes from meetings with Head Teachers were not availed at the time of assessment so the dissemination of guidelines, policies and circulars in these meetings could not be ascertained
7	The LG Education Department has effectively inspected all private and public primary schools Maximum 12 for this performance measure	• Evidence that all private and public primary schools have been inspected at least once per term and reports produced: o 100% - score 12 o 90 to 99% - score 10 o 80 to 89% - score 8 o 70 to 79% - score 6 o 60 to 69% - score 3 o 50 to 59% score 1 o Below 50% score 0.	0	Quarter 1 (Term 2/3) report dated 6th October 2016. 104 schools were inspected; Quarter 2 (Term 3) report dated 17/10/2016 (focused on Monitoring Learning Achievements), 97 schools were inspected; Quarter 4 (Term 2) report dated 30th June, 2017. 97 schools were inspected The report for Term 1 was not provided at the time of assessment. This translates into 49% (drawn from 97 Government aided Schools and 56 Private Schools)

8	LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations	 Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4 Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry 	0	There were no minutes to show that post inspection meetings are held at departmental level The LG did not present any evidence that they had made submissions of school inspection reports to
	Maximum 10 for this performance measure	 of Education and Sports (MoES): Score 2 Evidence that the inspection recommendations are followed-up: score 4 	0	DES There were no clear follow- up actions on the recommendations from inspections by the district and the schools
9	The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES Maximum 10 for this performance measure	• Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5	0	The list of schools in the Education Department is consistent with OBT 2017/2018 as far as the Government schools are concerned but inconsistent with EMIS The data in the Department and OBT 2017/2018 list 97 Government schools while EMIS data lists 96 Government Schools in the LG In addition, the data in the Department lists 56 Private Schools while EMIS data lists 26 Private Schools

10	The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council Maximum 4 for this performance measure	• Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etcduring the previous FY: score 2	2	The Standing Committee of Social Services (Education, Health, Production, and Community Based Services) met and discussed service delivery issues during FY 2016/2017 as below: • Minutes of the Committee meeting held on 17th May 2017 (under Minute BDLG/SEC/024/05/2017). • Minutes of the Committee meeting held on 23rd March 2017 (under Minute BDLG/SEC/017/03/2017). • Minutes of the Committee meeting held on 9th December 2016 (under Minute BDLG/SEC/010/12/2016). • Minutes of the Committee meeting held on 13th October 2016 (under Minute BDLG/SEC/004/09/2016).
		• Evidence that the education sector committee has presented issues that requires approval to Council: score 2	2	The Standing Committee of Social Services (Education, Health, Production, and Community Based Services) met and made recommendations for presentation to the District Council as indicated below: 'Recommendations to Council for the Sector of Social Services (Education, Health, Production, and Community Based Services) on 24th February 2017'.

11	Primary schools in a LG have functional SMCs Maximum 5 for this performance measure	Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0	0	 There was a file in the office of DEO that had Minutes of SMC meetings in schools. However the 5 sampled schools indicated that some of the schools are either not holding the mandatory 3 meetings or they are not submitting the minutes to the DEO's office. Angagan P. S. did not have a single set of minutes from their SMC in 2017 Koutulai P. S. had only 2 sets of minutes from their SMC in 2017 Komelekes P. S. had only 2 sets of minutes from their SMC in 2017 Christ the King Akakaat P. S. did not have a single set of minutes from their SMC in 2017 Kamutur P. S. had only one set of Minutes for 2017.
12	The LG has publicised all schools receiving non-wage recurrent grants Maximum 3 for this performance measure	• Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3	3	At the time of assessment, the LG had publicised all schools receiving non- wage recurrent grants for 2017/2018 on the notice board in the Education Department Also, the schools that were sampled, had posted the grants in the office of the Head Teacher

 13 The LG Education department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure 	• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30: score 4	0	 PDU presented only 2 procurement requests from the Education Department as follows; Construction of 2 Classrooms at Kachage P/S at 72,000,000/= submitted on 2nd May 2017, which is a late submission Supply of a brand new motorcycle to Education Department at 13,700,000/= (PDU could not trace the file and therefore the submission date was not picked)
14The LG Education department has certified and initiated payment for supplies on timeMaximum 3 for this performance measure	• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points	3	There are no delays in certification, recommendation, and payment of suppliers in the education sector for example, some of the major contracts in the sector during FY 2016/17 were handled as follows; i. Name of Contractor – KAKS Enterprises Ltd a. Nature of Contract – Construction of a 2 classroom Block with an Office at Kachange Primary School b. Award date – 10th November 2016 c. Contract amount – UGX 64,837,696 d. Payment request – 11th January 2017 e. Certificate – 16th January 2017 f. Payment approval – 16th January 2017

				 g. Payment date – 18th January 2017 ii. Name of Contractor – KAKS Enterprises Ltd a. Nature of Contract – Construction of a 2 class room Block with an Office at Kachange Primary School b. Award date – 10th November 2016 c. Contract amount – UGX 64,837,696 d. Payment request – 13th February 2017 e. Certificate – 23rd March 2017 f. Payment approval – 13th March 2017 g. Payment date – 10th April 2017
				Therefore, a score of 3.
Asse	 The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure 	 Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by mid- July for consolidation: score 4 	0	The Education Department submitted the Annual Performance Report for 2016/2017 (as well as all four quarterly reports) to the Planner. Planner provided 'hands-on support' to the department at the end of each quarter, to work on the OBT Baby Files, and thereafter integrate the departmental files into the Master OBT. However, the dates of provision of the 'hands-on support' could not be ascertained, and as such it could not be established whether the submission was by mid-July 2017.

16 LG Educa acted on Audit recomme any) Maximum performat measure	Internal ndation (if 4 for this	• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points o If all queries are not responded to score 0	2	2nd Quarter FY 2016/17 internal audit report raised the following queries and were equally resolved as follows; • Spike Investments Limited – UGX 2M for fuel deposit. There was no fuel consumption receipts – FUEL CONSUMPTION STATEMENT NO. 1113 WAS SUBSEQUENTLY SUBMITTED AS ACCOUNTABILITY. • O.A.A Construction Ltd – UGX 22,661,205 for construction of Okunguro Parents P.S. There was no acknowledgement receipt. THE RECEIPT WAS SUBSEQUENTLY SUBMITTED FOR ACCOUNTABILITY PURPOSES.
Assessment an	ea: Social an	implementation of all audit findings for the previous financial year: score 2 points o If		SUBMITTED FOR ACCOUNTABILITY PURPOSES. • Mowm Construction

Assessment area: Social and environmental safeguards

1	17	LG Education Department has disseminated and promoted adherence to gender guidelines Maximum 5 points	• Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc: Score 2	0	There was no evidence of dissemination of guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills
	for this performance measure	• Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2	0	There is no evidence of issue and explanation of guidelines on how to manage sanitation for girls and PWDs in primary schools.	

• Evidence that the School Management Committee meet the guideline on gender composition: score 1	0	The requirement of the gender composition as per the 2nd Schedule of the Education Act 2008 is at least 2 women on the Foundation Body which has a total of 6 people. The sampled schools in Bukedea DLG were; Bukedea P/S, Bukedea Township P/S, Kaloko P/S, Kachage P/S and Suula P/S Bukedea Township P/S is a Community School with 4/13 women on its SMC. This particular School does not have a Foundation Body. Bukedea P/S has 2 women and 4 men on the Foundation Body of its SMC while Kaloko P/S and Suula P/S have 3 women and 3 men on the Foundation Body of their SMCs. This is in line with the gender composition guideline of SMCs However, Kachage P/S has only 4 people on the Foundation Body of their SMC. Three (3) of these are men and 1 is a woman. This contravenes both the composition in numbers of an SMC Foundation Body and the gender composition guideline of SMCs
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18	LG Education department has ensured that guidelines on environmental management are disseminated Maximum 3 points for this performance measure	• Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc): score 3:	0	There is no evidence of issue of guidelines on environmental management to the schools by the Education Department in collaboration with the Environment Department
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LGPA 2017/18

Health Performance Measures

Bukedea District

(Vote Code: 578)

Score 31/100 (31%)

No.	Performance Measure	Scoring Guide	Score	Justification			
Asse	Assessment area: Human resource planning and management						
1	LG has substantively recruited primary health workers with a wage bill provision from PHC wage Maximum 6 points for this performance measure	Evidence that LG has filled the structure for primary health workers with a wage bill provision from PHC wage for the current FY • More than 80% filled: score 6 points, • 60 – 80% - score 3 • Less than 60% filled: score 0	6	• DHO office presented a Human resource status report for Bukedia health sector 2017. The report indicates that 84% of the staff have been recruited. The report presented has all facilities and their staffing levels.			
2	The LG Health department has submitted a comprehensive recruitment plan to the HRM department Maximum 4 points for this performance measure	Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers: score 4	0	No recruitment plan presented to this assessment as an evidance.			
3	The LG Health department has ensured that performance appraisal for health facility in charge is conducted Maximum 8 points for this performance measure	Evidence that the health facility in-charge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0	0	 The bukedea health centre iv in charge's performance report was not seen. File no CR/D/10308 			

4	T G d h h a s t t b F M t	The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted ogether with the budget in the current =Y. Maximum 4 points for his performance measure	• Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4	0	No evidence presented to this assesment for justification
A	ssess	sment area: Monitoring	and Supervision		
5	T c e p is	The DHO has effectively communicated and explained guidelines, policies, circulars ssued by the national evel in the previous	• Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3	3	A communication dated 13th July 2016 was issued by the District Health officer to all In charges of health facilities regarding policy guidelines on test treat and track (3Ts) for Malaria treatment
	FY to health facilities Maximum 6 for this performance measure	• Evidence that the DHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3	0	No evidence presented of any kind of meeting held with health facility in- charges and among others to explain the guidelines, policies, circulars issued by the national level	
6	T E s d	The LG Health Department has effectively provided support supervision to district health services Maximum 6 points for	Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3	3	• Reports presented three reports as follows; Q2 dated 29/12/2016 for October-December 2016 (17 facilities visited), Q3 Jan-March 2017 dated 30 march 2017 (14 facilities Visited) and Q4 April-June report, dated 30th June 2017 and supervision of Bukedia HCIV was done.
		his performance neasure			

		Evidence that DHT has supervised lower level health facilities within the previous FY: • If 100% supervised: score 3 points • 80 - 99% of the health facilities: score 2 • 60 - 79% of the health facilities: score 1 • Less than 60% of the health facilities: score 0	3	• Reports presented three reports as follows; Q2 dated 29/12/2016 for October-December 2016 (17 facilities visited), Q3 Jan-March 2017 dated 30 march 2017 (14 facilities Visited) and Q4 April-June report, dated 30th June 2017 for supervision of Kabarwa HCIII, Kangole HCIII, Kochera HCII, Bukedia HCIV, Kashumbala HCIII, Koboli HCII, Apopong HCII, Nalugai HCII, Kachumbala HCII(NGO) Busana HCII, Kolir HCIII, Akuoro HCII, St Jude Maternity Home, Kidongole and Malera HCIII
7	The Health Sub- district(s) have effectively provided support supervision to lower level health units Maximum 6 points for this performance measure	Evidence that health facilities have been supervised by HSD and reports produced: • If 100% supervised score 6 points • 80 - 99% of the health facilities: score 4 • 60 - 79% of the health facilities: score 2 • Less than 60% of the health facilities: score 0	0	This assessment visited Bukedia HCIV which is a HSD and reported that they did not make support supervision to other heath facilities.
8	The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up Maximum 10 points for this performance measure	• Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4	4	No evidence presented as a stand alone meeting held to discuss reports and making recommendations. However , the 3 quarterly reports indicated that the DHT discussed some of the gaps in facilities, identified solutions/recommendations at different levels in the units. These include issues that are not followed up in facilities such as Vaccine control books which are not regularly updated. The Team resolved to establish outreach sites within Parishes, carry out recruitment of District Cold chain assistants and incorporate all vaccinators to be VHTs among other recommendation.
		• Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6	0	No evidence of follow ups presented

9	The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH Maximum 10 for this performance measure	• Evidence that the LG has submitted accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports and OBT: score 10	0	4 OBT quarterly reports were presented but the reports photocopied did not have information extracted from HMIS. This means that OBT reports not consistently reported as an extract from HIMIS.reports
Asse	essment area: Governan	ce, oversight, transparency and	accounta	ability
10	The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council Maximum 4 for this performance measure	• Evidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2	2	The Standing Committee of Social Services (Education, Health, Production, and Community Based Services) met and discussed service delivery issues during FY 2016/2017 as below: • Minutes of the Committee meeting held on 17th May 2017 (under Minute BDLG/SEC/024/05/2017). • Minutes of the Committee meeting held on 23rd March 2017 (under Minute BDLG/SEC/017/03/2017). • Minutes of the Committee meeting held on 9th December 2016 (under Minute BDLG/SEC/010/12/2016). • Minutes of the Committee meeting held on 13th October 2016 (under Minute BDLG/SEC/004/09/2016).

			• Evidence that the health sector committee has presented issues that require approval to Council: score 2	2	The Standing Committee of Social Services (Education, Health, Production, and Community Based Services) met and made recommendations for presentation to the District Council as can be established from: • 'Recommendations to Council for the Sector of Social Services (Education, Health, Production, and Community Based Services) on 24th February 2017'.
Committees and Hospital Board are operational/functioning HUMCs/Boards (established, meetings held and discussions of budget and resource issues): • If 100% of	Th M Cu Hu op	Management Committees and Hospital Board are operational/functioning	and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues): • If 100% of randomly sampled facilities: score 5 • If 80-99% : score 3 • If 70-79%: : score 1 • If less	0	functioning HUMC. The names of members were proposed but not yet appointed and therefore the health facility had no appointed management committee at a time of this
wage recurrent grants publicised all health facilities receiving PHC non-wage 0 displayed on walls . This assessme did not find any display of PHC fu	Th al wa M pe	all health facilities receiving PHC non- wage recurrent grants Maximum 3 for this performance measure	publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards: score 3	0	board . A number of documents are displayed on walls . This assessment did not find any display of PHC funds on such improvised points where the District is displaying its official

The LG Health department has submitted procurement requests, complete with all technical requirements, to PDU	• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2	2	Health department presented a copy of procurement workplan for FY 2017/18 prepared on 28th march 2017 and submitted to PDU on 29/March 2017
that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2	0	Procurement request for theatre bio- fridge was submitted 27 November 2017 worth 17M as a first request for Bukedia HCIV. This was done after quarter 1 of the current FY
The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS Maximum 8 points for this performance measure	 Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time: 100% - score 8 70-99% - score 4 Below 70% - score 0 	0	DHO office presented procurement plans for 2017-18 but insisted that the DHO office does not participate in developing the plans, claiming that it is a push system and assisted by NMS
The LG Health department has certified and initiated payment for supplies on time Maximum 2 for this performance measure	• Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points	2	There were no contracts in health sector during FY 2016/17. Most activities involved trainings, sensitization and review meetings. Therefore, score 2 points.
	 department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS Maximum 8 points for this performance measure The LG Health department has certified and initiated payment for supplies on time Maximum 2 for this 	The LG Health department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budgetsubmitted procurement requests and budget on time by April 30 for the current FY: score 2Maximum 4 for this performance measureEvidence that LG Health department has supported all health facilities to submit health supplies procurement plan to NMS- Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMSMaximum 8 points for this performance measure- Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMSThe LG Health department has supported all health facilities to submit health supplies procurement plan to NMSMaximum 8 points for this performance measure- Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2The LG Health department has certified and initiated payment for supplies on time- Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2	The LG Health department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budgetsubmitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget2Maximum 4 for this performance measureEvidence that LG Health department request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 20The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS• Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS• Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time: • 100% - score 8 • 70-99% - score 4 • Below 70% - score 00The LG Health department has certified and initiated payment for supplies on time• Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 22

17 LG Health department has acted on Internal Audit recommendation (if any) Provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation to the internal audit query score 4 • If the sector has no audit query score 4 • If the 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 • if sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0 2 2 2 2 2 2 2 3 <th>16</th> <th>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure</th> <th>• 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</th> <th>0</th> <th>The Health Department submitted the Annual Performance Report for 2016/2017 (as well as all four quarterly reports) to the Planner. Planner provided 'hands-on support' to the department at the end of each quarter, to work on the OBT Baby Files, and thereafter integrate the departmental files into the Master OBT. However, the dates of provision of the 'hands-on support' could not be ascertained, and as such it could not be established whether the submission was by mid-July 2017.</th>	16	The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure	• Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4	0	The Health Department submitted the Annual Performance Report for 2016/2017 (as well as all four quarterly reports) to the Planner. Planner provided 'hands-on support' to the department at the end of each quarter, to work on the OBT Baby Files, and thereafter integrate the departmental files into the Master OBT. However, the dates of provision of the 'hands-on support' could not be ascertained, and as such it could not be established whether the submission was by mid-July 2017.
Assessment area: Social and environmental safeguards		has acted on Internal Audit recommendation (if any) Maximum 4 for this performance measure	provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0	2	 report raised the following queries which were subsequently resolved as follows; Ikodet Stephen (DHO) – UGX 2,172,000 for 2nd quarter support supervision. There was no accountability and support supervision activity report. ATTENDANCE SHEETS, RECEIPTS AND SUPERVISION REPORT DATED 26TH OCTOBER 2016 WERE SUBSEQUENTLY SUBMITTED FOR ACCOUNTABILITY PURPOSES. Mauso Apollo – UGX 660,000 – delivery of financial reports. There was no evidence of delivery. ACCOUNTABILITY RECEIPTS AND PROOF OF REPORT DELIVERY TO MINISTRY OF HEALTH DATED 11TH JANUARY 2017 WERE SUBMITTED FOR ACCOUNTABILITY.

18	Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities. Maximum 4 points	• Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2	0	No HUMC at Bukedia HCIV that was sampled
		• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2	0	 No evidence presented by DHO regarding issued guidelines on how to manage sanitation in facilities
19	The LG Health department has issued guidelines on medical waste management Maximum 2 points	• Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal : score 2 points.	2	A circular issued on 9th December 2016 to all health facilities with a heading Waste management in Health Units was presented as an evidence to justify that the DHO office /LG issued guidelines on waste management. The circular was emphasising adherence to standards of waste management



LGPA 2017/18

Water & Environment Performance Measures

Bukedea District

(Vote Code: 578)

Score 39/100 (39%)

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Plannir	ng, budgeting and execution		
1	The DWO has targeted allocations to sub- counties with safe water coverage below the district average. Maximum score 10 for this performance measure	• Evidence that the LG Water department has targeted sub- counties with safe water coverage below the district average in the budget for the current FY: score 10	0	• The AWP and Budget for water and sanitation for the current financial year2017/2018 obtains district safe water coverage average as 70%. However, the same document falls short of establishing safe water coverage per Sub County. As such it wasn't feasible to justify if Bukedea district water office was targeting to increase safe water access to sub counties with less than district average safe water access.

2	The LG Water department has implemented budgeted water projects in the targeted sub- counties (i.e. sub- counties with safe water coverage below the district average) Maximum 15 points for this performance measure	• Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15	15	 According to Fourth quarter progress report for the previous financial year 2016/2017 safe water coverage per sub county was as seen here under; Malera S/C 51% Bukedea s/c 68% Kachumbala s/c 69% Kolir s/c 88% Kidongole s/c 70% The AWP and Budget for the previous financial year has evidence that the LG Water department had implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous financial year. For example; In the AWP district water and sanitation conditional grant (DWSCG), 06 deep boreholes drilling (hand pump) were implemented at estimated unit cost of 24,500,000/=. This resulted into cumulative total cost of 147,000,000/=. Two deep boreholes were targeted per Sub County with lower safe water coverage below the district average. Namely; Malera s/c, Bukedea s/c, and Kachumbala s/c. This demonstrates that Bukedea district local government, water department planned to increase safe water access to sub counties below district safe water average. In addition, under DDEG, Bukedea DLG implemented 04 new boreholes in sub counties with lower safe water coverage below the district average.
Asse	essment area: Monito	ring and Supervision		
3	The LG Water department carries			 According to 4th Quarter progress report for the previous financial year
	out monthly monitoring and			2016/2017 a number of water and sanitation projects were implemented

supervision of project investments in the sector Maximum 15 points for this performance measure Evidence that the LG Water department has monitored each of WSS facilities at least annually. • If more than 95% of the WSS facilities monitored: score 15 • 80 - 95% of the WSS 3 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

both hardware and software components. Namely; 10 new deep bore holes were implemented in the sub counties of Malera, Kidongole, Kachumbala, Kolir and Bukedea under DWD.

This was evidenced by report on deep borehole sitting, drilling and test pumping in Bukedea DLG under DWSCG FY 2016/2017 dated 12/12/2016

• 07 spring wells were implemented in sub counties of Kachumbala, Kidongole, Kolir and Bukedea.

This was evidenced by completion report of protected spring wells in Bukedea DLG under PAF for FY 2016/2017 dated 12/1/2017

• 09 deep boreholes were rehabilitated in sub counties of Kolir, Malera, Kachumbala, Kidongole, and Bukedea.

This was evidenced by report on deep borehole rehabilitation under PAF dated 20/2/2017

• A number of software activities were also planned and implemented as follows;

- District water and sanitation advocacy meeting

- District water and sanitation coordination committee meeting

- Training of WSCs
- Extension staff meeting

However, the fore mentioned software activities weren't authentic since monitoring and supervision reports had no official stamp and duly signed.

Yet they constitute a half of water and sanitation activities. This puts the percentage of water projects implemented and monitored in the district in the range of 50% -59% since

				all the software projects weren't authentic yet monitoring and supervision of the software component is as important as the hard ware component in WES programming and execution.
4	The LG Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE Maximum 10 for this performance measure	• Evidence that the LG has submitted accurate/consistent data for the current FY: o List of water facility which are consistent in both sector MIS reports and OBT: score 10	0	• There was no evidence that Bukedea D LG submitted accurate/consistent data for the current FY (2017/2018) since no list of water facilities were obtained to ascertain consistence in both sector MIS reports and OBT reports obtaining at MoWE.
Asse	The LG Water department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4	0	• While procurement submission reports existed as per the sector annual work plan and budget from DWO that cover all investment items were submitted on time (by April 30), this could not be independently verified by cross checking submissions to DPU since the procurement officer wasn't available to attend to the assessor or any other person to provide procurement files at DPU.

6	The DWO has appointed Contract Manager and has effectively managed the WSS contracts	• If the DWO prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2	0	• The DWO had no contract management plan to guide monthly site visits for the different WSS infrastructure projects as constructed per the BOQs / specifications hence a sample of 5 WSS projects wasn't taken to validate the findings from the files/ records.
	Maximum 8 points for this performance measure	• If water and sanitation facilities constructed as per design(s): score 2	2	• According to the completion reports obtained at DWO the water and sanitation projects were constructed as per the design. Namely; Gwaramot community borehole, Kachonga community borehole, Kayembe community borehole and Kachabule community bore hole.
		 If contractor handed over all completed WSS facilities: score 2 	2	• Handover reports were obtained at the DWO for all the completed WSS projects. For example hand over report of completion 09 deep borehole in different sub counties namely, Bukedea, Malera, Kachumbala, Kolir aand Kidongole dated 6/01/2017 exists at DWO
		 If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2 	2	• The DWO appropriately certified all WSS projects and filed completion reports as exemplified by completion certificate dated for the construction of 07 spring wells funded by DWSCG constructed by Aso contractors and suppliers ltd , date of completion 6/1/2017

	 Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 	• Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points	3	There are no delays in certification and recommendation for payment although, some delays were registered when it came to payment of suppliers/contractors during FY 2016/17. For example, 2 sampled contracts implemented during the year revealed as follows; i. Name of Contractor – Mastak Investments Ltd a. Nature of Contract – Rehabilitation of 9 boreholes in different Sub-counties of Bukedea DLG b. Award date – 19th December 2016 c. Payment request – 7th February 2017 d. Certificate date – 21st February 2017 e. Payment date – 11th April 2017 ii. Name of Contractor – KLR Uganda Limited a. Nature of Contract – Drilling of 4 boreholes in Bukedea DLG b. Contract date – 12th September 2016 c. Contract amount – UGX 73,099,650 d. Payment request – 24th November 2016 f. Payment approval – 17th December 2016 f. Payment approval – 17th December 2016 f. Payment date – 20th June 2017 • Therefore, contracts were certified and recommended for payment in time. This earned the LG a score of 3.
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8	The LG Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 5 for this performance measure	• Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5	0	The Water Department submitted the Annual Performance Report for 2016/2017 (as well as all four quarterly reports) to the Planner. Planner provided 'hands-on support' to the department at the end of each quarter, to work on the OBT Baby Files, and thereafter integrate the departmental files into the Master OBT. However, the dates of provision of the 'hands-on support' could not be ascertained, and as such it could not be established whether the submission was by mid-July 2017.	
9	LG Water Department has acted on Internal Audit recommendation (if any) Maximum 5 for this performance measure	• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 5 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0	3	2nd Quarter FY 2016/17 internal audit report raised the following queries which were subsequently resolved as follows; • K.L.R (U) Ltd – UGX 80,965,500 for drilling borehole. There was no acknowledgement receipt. RECEIPT NO 1072 DATED 16TH DECEMBER 2016 WAS SUBSEQUENTLY SUBMITTED AS ACCOUNTABILITY • Honest Wells – UGX 17,945,500 for borehole sinking. There was no acknowledgement receipt. RECEIPTS FOR ACCOUNTABILITY WERE SUBSEQUENTLY SUBMITTED AS ACCOUNTABILITY. Therefore, score 3.	
Asse	Assessment area: Governance, oversight, transparency and accountability				

10	The LG committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council Maximum 6 for this performance measure	• Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3	3	 The Works and Technical Services, and Natural Resources Committee met and discussed service delivery issues during FY 2016/2017 as below: Minutes of the Committee meeting held on 17th May 2017 (under Minute BDLG/SEC/022/05/2017). Minutes of the Committee meeting held on 27th March 2017 (under Minute BDLG/SEC/017/03/2017). Minutes of the Committee meeting held on 2016 (under Minute BDLG/SEC/011/12/2016). Minutes of the Committee meeting held on 8th September 2016 (under Minute BDLG/SEC/004/09/2016).
		• Evidence that the water sector committee has presented issues that require approval to Council: score 3	3	The Works and Technical Services and Natural Resources Committee met and made recommendations for presentation to the District Council as may be ascertained from : • 'Standing Committee Recommendations for Works and Technical Services / Natural Resources presented to Council on 24th February 2017'.
11	The LG Water department has shared information widely to the public to enhance transparency	• 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	0	• There was no information on AWP, budget and Water Development grant releases and expenditures on notice boards displayed as per the PPDA Act
	Maximum 6 points for this performance measure			

		 From DWO water and sanitation progress reports, a sample of 5 WSS projects were observed to establish if they were clearly labelled indicating the name of the project, date of construction, the contractor and source of funding. However, all the visited WSS projects weren't properly labelled. For example: Malera HC 111 community borehole 		
		Funded by : DLG		
		Contractor: not indicated		
		Date of completion 1/12/21016		
		- Bukedea prisons bore hole		
		Source of funding: MOWE		
		Date of completion 25/5/2017		
 All WSS projects are clearly 		Contractor: not indicated		
labelled indicating the name of the project, date of	0			
construction, the contractor and		- Bukedea p/s borehole		
source of funding: score 2		Funded by TDA		
		Rehabilitated by: COU TEDDO		
		No completion date:		
		- Oswapai community borehole		
		Contractor : Kumi General Enterprises		
		11/12/2016		
		Source of funding: not mentioned		
		- Bukedea township P/S		
		Not labelled at all		
		Since inscription was not followed through as per the assessment manual, this justifies the score		

		• Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2	0	• No information on tenders and contract awards indicating contractor name /contract and contract sum was displayed on the District notice boards				
C V N fo	Participation of communities in WSS programmes Maximum 3 points for this performance measure	• If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1	0	 Community application files were obtained however not for the current financial year 2017/2018 as seen here under; Kamangomeri village Application for borehole Dated 21/10/2016 Akoe-Etome village Application for borehole Dated 21/10/21016 Kachabule village Application for borehole Dated 26/10/2016 Kotia village Application for spring well Dated 07/7/2016 				
		• Number of water supply facilities with WSCs that are functioning evidenced by collection of O&M funds and carrying out preventive maintenance and minor repairs, for the current FY: score 2	0	• No community meeting minutes showing number of water supply facilities with WSCs that are functioning evidenced by collection of O&M funds and carrying out preventive maintenance and minor repairs, for the current FY 2017/2018				
Assess	sment area: Social a	and environmental safeguards		Assessment area: Social and environmental safeguards				

13	The LG Water department has devised strategies for environmental conservation and management	• Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2	0	• No evidence to show that environmental screening (as per templates) for all projects and EIAs (where required) was conducted for all WSS projects and reports are in place at DWO and ENR office.
	Maximum 4 points for this performance measure	• Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1	0	• No evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past financial year.
		• Evidence that construction and supervision contracts have clause on environmental protection: score 1	0	• No evidence that construction and supervision contracts have clause on environmental protection as per environmental protection critical requirements
14	The LG Water department has promoted gender equity in WSC composition.		3	• According to 4th quarter progress report for the previous financial year 2016/2017, there was evidence that at least 50%WSCs are women as per the sector critical requirements. A sample of five water source points justifies this namely;
	Maximum 3 points for this performance measure	 If at least 50% WSCs are women as per the sector critical requirements: score 3 		 Kabarwa HC111 borehole males-3 while women-04 Malera HC 111 borehole males-3 while women-04
				- Kachumbala (obur) borehole men-3 while women-4
				 Odoot-Etome community borehole men-3 while women-4 Akou-Etome community borehole men-3 while men-4

15	Gender- and special-needs sensitive sanitation facilities in public places/RGCs.			• From a sample of 5 public sanitation facilities it was clear that they don't have adequate access and separate stances for men, women and PWDs as seen here under;
	Maximum 3 points for this performance measure	• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3	0	 Bukedea HC IV meets all conditions Malera HC 111 doesn't meet conditions Malera secondary school doesn't meet conditions Malera p/s doesn't meet conditions Kaloko p/s doesn't meet conditions.