

Local Government Performance Assessment

Bushenyi District

(Vote Code: 506)

Assessment	Scores
Accountability Requirements	33%
Crosscutting Performance Measures	60%
Educational Performance Measures	64%
Health Performance Measures	72%
Water Performance Measures	50%

Accontability Requirements 2018

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Annual performance contract			
LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.	• From MoFPED's inventory/schedule of LG submissions of performance contracts, check dates of submission and issuance of receipts and:	The LG submitted the Annual Performance Contract 2018/19 on 31st/7/2018 in accordance to the PFMA 2015. this was seen from the PBS reportsat the LG planning unit and WWW.budget.go.ug	Yes
	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.		
Supporting Documents for the Bu	Idget required as per the	PFMA are submitted and available	
LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY by 30th June (LG PPDA Regulations, 2006).	 From MoFPED's inventory of LG budget submissions, check whether: 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. 	The LG submitted a Budget that did not includes a Procurement Plan for the FY 2018/19. The procurement plan was submitted on 6/09/2018 as seen from the PBS reports at the LG planning unit. This was attributed to challenges of producing/attaching the procurement plan and inadequate training on the use of the PBS by the district planning unit.	No

			No
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)	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: • 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	The LG submitted the Annual Performance Report for the previous FY 2017/2018 on the 22/08/2018 using the PBS. Notably all the submissions were out of time in accordance to the PFMA 2015, this was attributed to system failures and inadequate training on the use of the PBS by the district staff.	No

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).	From MoFPED's official record/ inventory of LG submission of quarterly reports submitted to MoFPED, check the date MoFPED received the quarterly performance reports: • 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.	There was evidence that the district submitted all the quarterly budget performance reports. Notably submissions of the quarterly budget performance reports during FY 2017/2018 were out of time, the delays were attributed to system challenges at the district. Besides the district planner had not been trained on the use of PBS. Below are the quarterly submission dates: Quarter Date of submission Reference Quarter 01 30/1/2018 Data LG planning unit www.budget.go.ug Quarter 02 26/4/2018 Data LG planning unit www.budget.go.ug Quarter 03 26/7/2018 Data LG planning unit www.budget.go.ug Quarter 04 22/8/2018 Data LG planning unit www.budget.go.ug	No
Audit			

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 find- ings where the Internal Audi- tor and the Auditor General recommended the Accounting Officer to take action in lines with applicable laws.	From MoFPED's Inventory/record of LG submissions of statements entitled "Actions to Address Internal Auditor General's findings", Check: • 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.	The LG wrote to the PS/ST on the implementation status of audit recommendations for FY 2016/17. The communication dated 13th April 2018 (Ref. Aud.252/8) written by the Principal Internal Auditor contained actions taken on 35 internal audit and 4 external audit recommendations of FY 2016/17. The communication was however received at MoFPED on 13th April 2018, which was beyond the February deadline as required.	No
The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.		The district had an unqualified audit opinion for its FY 2017/18 financial report.	Yes

506 Bushenyi District	Crosscutting Performance Measures 2018		
Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budge	ting and execution		
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 Maximum 4 points for this performance measure.	Evidence that a district/ municipality has: • A functional Physical Planning Committee in place that considers new investments on time: score 1.	The LG had a functional 12 member physical planning committee that was formerly appointed on 9th /8/2018 and considered new infrastructure as seen from the Minutes of the meeting held on 29th /6/ 2018 and build plan register opened on 25th/4/2018 by the Physical Planning Committee. Minutes 10/2018(b) of 5th/9/2018 in the current FY of the also show functionality of the committee. The committee is chaired by the CAO and the Physical Planner as the secretary.	1
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 Maximum 4 points for this performance measure.	• Evidence that district/ MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD score 1.	No evidence was found to minutes of the Physical Planning Committee being submitted to MoLHUD. This was attributed to the fact that the committee was only appointed recently (9th /08/2018) and has not been trained on its functions and roles.	0

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 Maximum 4 points for this performance measure.	• All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0	The LG did not have a physical development plan as such no consistency could be assessed. This was attributed to lack of budgetary allocations to the department for physical planning.	0
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 Maximum 4 points for this performance measure.	• Action area plan prepared for the previous FY: score 1 or else 0	The LG did not have action area plans prepared for the previous FY. This was attributed to lack of budgets.	0

	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 Maximum 5 points on this performance measure.	• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.	There is evidence that priorities in the AWP for the FY 2018/19 were based on the outcomes in the budget conference 2018/19. From a random sample of projects in the AWP and the profiles, there is alignment for instance ;construction of 1 twin house at Kibaazi HC111 pg 61, 62(AWP), Latrine construction and rehabilitation pg 69 (AWP), pg 30 (BFP), Construction of a seed secondary school at Kiyaga parish pg 68 (AWP), Construction of staff houses pg 66 (AWP), Construction of GFS at Kakoni in Kyamuhunga S/C pg 36 (BFP) , Design of a new GFS at Kigondo in Kakanzi s/c pg 37 (BFP)	2
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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	 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 	There is evidence that the capital investments in the approved Annual Work Plan for the current FY 2018/2019 are derived from the approved Five-Year Development Plan pg 96, pg 100, pg 101, pg 104.	1
budget conferences and	approved by the Council. Score 1.		
have project profiles			
Maximum 5 points on this performance measure.			

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 Maximum 5 points on this performance measure.	 Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2. 	Project profiles were developed in the prescribed formats in the planning guidelines and attached in the revised 5 year development plan 2015/16 -2019/2020. However there was no evidence that the TPC discussed investments profiles in the AWP as per LG Planning guidelines. The planning unit attributed this to an oversight on its part.	0
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 score 1.	The statistical abstract was compiled in march 2018 and presented to the TPC on 10/4/2018 under min TPC 9/4/2018 with disaggregated gender data at pg 13, 18.	1

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	There was evidence that Infrastructure projects implemented by the LG in the previous FY 2017/2018 were derived from the Annual Work Plan and Budget approved by the LG Council as referenced; construction of 5 stance VIP latrines pg 23 of the annual budget, Piped what supply at Rutooma pg 103 (AWP), construction of Kabumburi HC OPD pg 47 (AWP)	2
Investment activities in the previous FY were implemented as per AWP. Maximum 6 points on this performance measure.	 Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. 0 100%: score 4 0 80-99%: score 2 0 Below 80%: 0 	 From the AFA and annual performance report there is evidence that projects below implemented in the FY 2017/18 were completed as per work plan by the end of the FY. Construction of 5 stance latrines Construction of Rutoma GFS OPD construction at Kabumburi Rehabilitation of 2 shallow wells, 4 spring and kyamuhunga GFS. Supply of 3 seater mini desks in Nyabubare and kyamuhunga T/C, Completion of maternity ward at kyamuhunga HC111. 	2
The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects during the previous FY Maximum 4 points on this Performance Measure.	• Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2	From the budget and annual performance there is evidence that projects in the last FY were completed within approved budget plus or minus for instance, construction of 5 stance latrines at Runyinya P/S, Kitabi P/S, Kizinda P/S, Nyarugote P/S, Buhimba P/S, Construction of OPD at Kabumbuli, supply of 3 seater twin desks, completion of marternity ward at kyamuhunga HC 111.	2

The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects during the previous FY Maximum 4 points on this Performance Measure.	• Evidence that the LG has budgeted and spent at least 80% of the O&M budget for infrastructure in the previous FY: score 2	 There LG had prepared and costed the assets register and provided a Budget for O&M in FY 2017/2018 of UGX 53,579,000. From AFA the actual expenditure on O&M during the FY was UGX 50,412,522 giving 94 %. However there was no evidence that O &M was spent on infrastructural activity identified in the assets register. 	0
Human Resourc	e Management		
LG has substantively recruited and appraised all Heads of Departments Maximum 5 points on this Performance Measure.	• Evidence that the LG has filled all HoDs positions substantively: score 3	 The district still has some positions in acting capacity these are the municipal engineer, the principal Community development officer, and principal commercial officer. Which is 33.3% Ref is made to the approved structure ref.ARC 135/306/01 	0
LG has substantively recruited and appraised all Heads of Departments Maximum 5 points on this Performance Measure.	• Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2	 The heads of department were appraised with reference to their personnel files Deputy town clerk appraised on 14/7/2018, Ag community development officer appraised on 4/7/2018, senior assistant town clerk appraised on 6/7/2018, senior physical planner appraised on 4/7/2018, senior human resource appraised on 4/7/2018, principal treasure appraised 3/7/2018, procurement officer 4/7/2018, principle education officer 15/8/2018, AG senior engineer 14/7/2018, 	2

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 % of staff submitted for recruitment have been considered: score 2	 CAO's submissions ref CR/ 156/1/1 Dated 4/8/2017 Minutes of the 84th meeting of Bushenyi DSC held from 18th – 20th june 2018. Minute no 27/2018 Minutes of the 83rd meeting of Bushenyi DSC held from 23rd – 25th may 2018 min no 15/2018 Minutes of the 78th meeting of the DSC held from 25th – 29th September 2017, min no 11/ 2017 All positions submitted for recruitment were considered 100%. 	2
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 % of positions submitted for confirmation have been considered: score 1	 CAO's submissions Ref.CR./159/1 Dated 5th /4/2017 CAO's submissions Ref. CR/159/1 CAO's Submissions Ref. CR/159/1 Dated 13th/9/2017 Minutes of the 82nd meeting of BDSC held from 19th – 20th April 2018. Min no 03/2018 Minutes of the 80th meeting of BDSC held from 23rd – 24th November 2017 min no 34/2017 Minutes of 78th meeting of BDSC min no 15 / 2017 ie 15.1 to 15.23, minute no 16/2017 6.1 Minutes of 76th meeting of BDSC held on 11th july 2017. Min no 01/2017 ie 01.44, min no 02/2017 02.44 The staffs submitted for confirmation were considered 100%. 	1

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 % of positions submitted for disciplinary actions have been considered: score 1 	 CAO's submissions ref no CR/157/1 Date 21/8/2017 Minutes of the 81st meeting of the BDSC held on 19/12/2017. Min no 47/2017 47.1 Min no 48/2017 48.1 – 48.12 Min no 50/2017 50.1 Min no 52/2017 52.1 Minutes of the 77th meeting of BDSC held 20th – 21st july 2017 min no 06/2017 All the disciplinary actions have been considered 	1
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	• The staff recruited accessed the pay roll within two months as per the hard copies of pay roll,except for the HRO who used her case as a learning ref that is 40/50 which is 98%	0
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 that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2 	Most staff that retired in the previous financial year were not able to access the pension pay roll. only 2 were able to access the pay roll out of the 19. therefore 89.4% were not able to access the pension pay roll in two months	0

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 (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. 	Local revenue performance for FY 2017/18 was Shs 335,229,004. Local revenue performance for FY 2016/17 was Shs 324,054,814. The increase was Shs 11,174,190, which was 3.4%, which was less than 5%.	0
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 score 2. If more than +/- 10 %: Score 0.	Local revenue original budget for FY 2017/18 was Shs 507,372,577. This amount however contained Shs 140,000,000 which was anticipated to be realised from the sale of district assets such as cars. These funds were not realised as the sale did not materialise. Thus when this is netted off, the actual original budget becomes Shs 367,372,577. Local revenue realised for the same year 2017/18 was Shs 335,229,004. The difference was Shs 32,143,573, which was 8%. This was well within the +/-10% range.	2
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	According to Bushenyi DLG Trial Balance for FY 2017/18, Shs 85,976,446 was collected for Local Service Tax. However, due to cashflow challenges, no proportion of this amount was remitted to LLGs during the financial year. An examination of the LG's financial statements and accounting records confirmed that no amount was remitted to LLGs during FY 2017/18.	0

Local revenue administration, allocation and transparency Maximum 4 points on this performance measure.	• 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	For the year ended FY 2017/18, Bushenyi DLG spent the following amounts on Council out of local revenue: Allowances for Council Shs 26,816,000 Allowances for Standing Committees Shs 8,925,149 Totalling Shs 35,741,149. OSR collected in the previous year i.e. FY 2016/17 was Shs 324,054,814. The proportion of this expenditure to the previous year OSR was 11%, which was well below the 20% limit.	2
Procurement an The LG has in place the capacity to manage the procurement function Maximum 4 points on this performance measure.	 evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2 	 There WAS Evidence that Bushenyi DLG had the position of a Senior Procurement Officer substantively filled under DSC Min. No. 32/2009 (i), Acceptance Letter Dated 06/03/ 2009 and Referenced CR/156/4/1. There WAS Evidence that Bushenyi DLG had the position of Procurement Officer substantively filled under DSC Min. No 24/2018 (1), Acceptance Letter Dated 03/07/2018 and Referenced CR/156/4/1. 	2

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	 There WAS Evidence that TEC Produced and Submitted Reports to the Contracts Committee for the previous FY (2017/2018 FY) as exemplified by the following projects: Completion of Maternity Ward at KYAMUHUNGA Health Centre III in Kyamuhunga Town Council under DDEG (BUSH/506/WRKS/2017-18/00009). TEC Min Date: 10/January/2018. Supply and Installation of Culverts at NSIMBI CROSSING in Bumbaire Sub-county under Uganda Road Fund (BUSH/506/WRKS/2017-18/00010). TEC Min Date: 10/January/2018. Embankment Reconstruction of KAFUNJU, BURUNGIRA AND NYEIBINGO in Ruhumuro Sub-county under Government of Uganda Funds (BUSH/506/WRKS/2017- 18/00003). TEC Min Date: 06/September/2017. Construction of RUTOOMA Gravity Flow Scheme (GFS) Phase II in Ibaare Sub-county under Rural Water and Sanitation Grant (BUSH/506/WRKS/2017-18/00001). TEC Min Date: 30/August/2017. Construction of 5 Stance Lined VIP Latrines in 6 Schools under SFG (BUSH/506/WRKS/2017-18/00002). TEC Min Date: 06/September/2017. 	1
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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	 There WAS Evidence that Bushenyi District Contracts Committee considered recommendations of the TEC and provided justifications for any deviations from those recommendations as exemplified by the following projects: Completion of Maternity Ward at KYAMUHUNGA Health Centre III in Kyamuhunga Town Council under DDEG (BUSH/506/WRKS/2017-18/00009). DCC Min Date: 11/January/2018, Meeting No. 007. Supply and Installation of Culverts at NSIMBI CROSSING in Bumbaire Sub-county under Uganda Road Fund (BUSH/506/WRKS/2017-18/00010). DCC Min Date: 11/January/2018, Meeting No. 007. Embankment Reconstruction of KAFUNJU, BURUNGIRA AND NYEIBINGO in Ruhumuro Sub-county under Government of Uganda Funds (BUSH/506/WRKS/2017- 18/00003). DCC Min Date: 08/September/2017, Meeting No. 002. Construction of RUTOOMA Gravity Flow Scheme (GFS) Phase II in Ibaare Sub-county under Rural Water and Sanitation Grant (BUSH/506/WRKS/2017-18/00001). DCC Min Date: 08/September/2017, Meeting No. 002. Construction of 5 Stance Lined VIP Latrines in 6 Schools under SFG (BUSH/506/WRKS/2017-18/00002). DCC Min Date: 08/September/2017, Meeting No. 002. Construction of 5 Stance Lined Latrine at Multipurpose Hall under DDEG (BUSH/506/WRKS/2018-19/001). DCC Min Date: 15/August/2018, Meeting No. 004. Extension of KAKONI and RUTOOMA Gravity Flow Scheme (GFS) under Government of Uganda Funds (BUSH/506/WRKS/2018-19/003). DCC Min Date: 06/September/2018, Meeting No. 006. Construction of 6 Blocks of 5 Stance Lined Latrines under Government of Uganda Funds (BUSH/506/WRKS/2018-19/001). DCC Min Date: 06/September/2018, Meeting No. 006. Construction of 6 Blocks of 5 Stance Lined Latrines under Government of Uganda Funds (BUSH/506/WRKS/2018- 19/002). DCC Min Date: 06/September/2018, Meeting No. 006. 	1
The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.	• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and	 (a) There WAS Evidence that the procurement and Disposal Plan for the current year (2018/2019 FY) covered all infrastructure projects in the approved annual work plan and budget as exemplified by the following procurements that were indicated both in the Procurement Plan and in the approved annual work plan and budget for the current FY (2018/2019 FY): Construction of 5 Stance Lined Latrine at Multipurpose Hall under DDEG (BUSH/506/WRKS/2018-19/001). (Page 49 – 	2

Maximum 2 points on this performance measure.	points on this evidence that the performance LG has made	 Bushenyi DLG Approved Budget Estimates for FY 2018/2019, Vote 506, 048282 Rehabilitation of Public Buildings, 312101 Non Residential Buildings AND was also indicated as No. xi on Page 2 in Bushenyi DLG Procurement Plan for FY 2018/19 Dated 11/July/2018, Signed by CAO and Received by PPDA Regional Office in Mbarara on 13/July/2018). Extension of KAKONI and RUTOOMA Gravity Flow Scheme (GFS) under Government of Uganda Funds (BUSH/506/WRKS/2018-19/003). (Page 51 – Bushenyi DLG Approved Budget Estimates for FY 2018/2019, Vote 506, 098184 Construction of Piped Water Supply System, 312104 Other Structures AND was also indicated as No. i on Page 3 in Bushenyi DLG Procurement Plan for FY 2018/19 Dated 11/July/2018, Signed by CAO and Received by PPDA Regional Office in Mbarara on 13/July/2018).
		- Construction of 6 Blocks of 5 Stance Lined Latrines under Government of Uganda Funds (BUSH/506/WRKS/2018- 19/002). (Page 37 – Bushenyi DLG Approved Budget Estimates for FY 2018/2019, Vote 506, 078181 Latrine Construction and Rehabilitation, 312101 Non Residential Buildings AND was also indicated as No. i on Page 4 in Bushenyi DLG Procurement Plan for FY 2018/19 Dated 11/July/2018, Signed by CAO and Received by PPDA Regional Office in Mbarara on 13/July/2018).
		- Construction of 2 Stance VIP Latrines in Ruhumuro and Bitooma Sub counties under Government of Uganda Funds (BUSH/506/WRKS/2018-19/004). (Page 89 – Bushenyi DLG Approved Budget Estimates for FY 2018/2019, Vote 506, 088155 Standard Pit Latrine Construction (LLS), 291001 Transfers to Government Institutions AND was also indicated as No. i on Page 16 in Bushenyi DLG Procurement Plan for FY 2018/19 Dated 11/July/2018, Signed by CAO and Received by PPDA Regional Office in Mbarara on 13/July/2018).
		(b) There WAS Evidence that the LG made procurements in previous FY (2017/2018 FY) as per plan (adherence to the procurement plan) for the previous FY (2017/2018 FY) as exemplified by the following procurements that occurred in the Procurement Plan, in the Annual Work Plan and Budget and in Referenced Procurement Files for the previous FY (2017/2018 FY):
		- Completion of BITOOMA OPD at Kabumburi in Bitooma Sub-county under DDEG (BUSH/506/WRKS/2017-18/00008). (Page 18 – Bushenyi DLG Approved Budget Estimates for FY 2017/2018, Vote 506, Output 088180 Health Centre Construction and Rehabilitation, 312101 Non Residential Buildings AND was also indicated as No. iii on Page 3 in Bushenyi DLG Procurement Plan for FY 2017/18 Dated 11/July/2017, Signed by CAO and Received by PPDA Regional Office in Mbarara on 13/July/2017).
		- Supply and Installation of Culverts at NSIMBI CROSSING in Bumbaire Sub-county under Uganda Road Fund

(BUSH/506/WRKS/2017-18/00010). (Page 28 – Bushenyi DLG Approved Budget Estimates for FY 2017/2018, Vote 506, Output 048158 District Roads Maintenance (URF), 263367 Sector Conditional Grant AND was also indicated as No. iii on Page 2 in Bushenyi DLG Procurement Plan for FY 2017/18 Dated 11/July/2017, Signed by CAO and Received by PPDA Regional Office in Mbarara on 13/July/2017).

Embankment Reconstruction of KAFUNJU, BURUNGIRA AND NYEIBINGO in Ruhumuro Sub-county under Government of Uganda Funds (BUSH/506/WRKS/2017-18/00003). (Page 27 – Bushenyi DLG Approved Budget Estimates for FY 2017/2018, Vote 506, Output 048151 Community Access Roads Maintenance (LLS), 263367 Sector Conditional Grant AND was also indicated as No. i and No. ii on Page 1 and No. iii on Page 2 in Bushenyi DLG Procurement Plan for FY 2017/18 Dated 11/July/2017, Signed by CAO and Received by PPDA Regional Office in Mbarara on 13/July/2017).

- Construction of RUTOOMA Gravity Flow Scheme (GFS) Phase II in Ibaare Sub-county under Rural Water and Sanitation Grant (BUSH/506/WRKS/2017-18/00001). (Page 28 – Bushenyi DLG Draft Budget Estimates for FY 2017/2018, Vote 506, Output 098184 Construction of Piped Water Supply System, 312104 Other Structures AND was also indicated as No. i on Page 3 in Bushenyi DLG Procurement Plan for FY 2017/18 Dated 11/July/2017, Signed by CAO and Received by PPDA Regional Office in Mbarara on 13/July/2017).

- Construction of 5 Stance Lined VIP Latrines in 6 Schools under SFG (BUSH/506/WRKS/2017-18/00002). (Page 23 – Bushenyi DLG Approved Budget Estimates for FY 2017/2018, Vote 506, Output 078181 Latrine Construction and Rehabilitation, 312102 Residential Buildings AND was also indicated as No. i on Page 3 in Bushenyi DLG Procurement Plan for FY 2017/18 Dated 11/July/2017, Signed by CAO and Received by PPDA Regional Office in Mbarara on 13/July/2017).

Supply and Installation of Culverts in KYAMUHUNGA Town Council, NYABUBARE Sub county and Stone Pitching in BUTARE Trading Center under DDEG (BUSH/506/WRKS/2017-18/00006 Lot 2). (Page 28 – Bushenyi DLG Approved Budget Estimates for FY 2017/2018, Vote 506, Output 048156 Urban Unpaved Roads Maintenance (LLS), 263367 Sector Conditional Grant AND was also indicated as No. iii on Page 2 in Bushenyi DLG Procurement Plan for FY 2017/18 Dated 11/July/2017, Signed by CAO and Received by PPDA Regional Office in Mbarara on 13/July/2017).

prepared bid documents, maintained contract registers and procurement activities files	• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/ infrastructure by August 30: score 2	 For current FY (2018/2019), there WAS Evidence that the LG prepared 80% of the bid documents for all investment/infrastructure by August 30. ACTUAL Bid Preparation Dates were NOT available. The Assessor made a calculation based on the respective Dates of Approval and Dates of Issue of Individual Bid Documents and found that 100% of Bid Documents for 2018/2019 FY were Approved and Issued BEFORE August 30, 2018. The Calculation made by the Assessor was based on the following Projects and the respective Dates on which the Projects Bid Documents were approved by Bushenyi DLG Contracts Committee and the respective Dates on which the Projects Bid Documents were issued by PDU: Construction of 5 Stance Lined Latrine at Multipurpose Hall under DDEG (BUSH/506/WRKS/2018-19/001). The Project Bid Document was Approved during a meeting of Bushenyi DLG Contracts Committee that was held on 26/07/2018, DCC Min. No. 012/CC/2018/2019. The Project Bid Document was issued by PDU on 27/07/2018. Extension of KAKONI and RUTOOMA Gravity Flow Scheme (GFS) under Government of Uganda Funds (BUSH/506/WRKS/2018-19/003). The Project Bid Document was held on 01/August/2018, DCC Min. No. 019/CC/2018/2019. The Project Bid Document was issued by PDU on 06/August/2018. Construction of 6 Blocks of 5 Stance Lined Latrines under Government of Uganda Funds (BUSH/506/WRKS/2018-19/002). The Project Bid Document was Approved during a meeting of Bushenyi DLG Contracts Committee that was held on 01/August/2018, DCC Min. No. 018/CC/2018/2019. The Project Bid Document was Approved during a meeting of Bushenyi DLG Contracts Committee that was held on 01/August/2018, DCC Min. No. 018/CC/2018/2019. The Project Bid Document was Approved during a meeting of Bushenyi DLG Contracts Committee that was held on 01/August/2018, DCC Min. No. 018/CC/2018/2019. The Project Bid Document was Approved during a meeting of Bushenyi DLG Contracts Committee that was held on 01/August/2018, DCC Min. No. 018/CC/2018/2019. The Project Bid Docume	2
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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 an updated contract register and has complete procurement activity files for all procurements: score 2	For previous FY (2017/2018 FY), there WAS Evidence that the LG had an Updated Contracts Register and had Completed Procurement Activity Files for all procurements as exemplified by the following: - An Updated Contracts Register was seen by the Assessor at Bushenyi DLG PDU with a Starting/Opening Procurement Entry Titled 'Construction of 5 Stance Lined Latrines in Primary Schools', Register No. 01 Dated 25/09/2017 and Referenced 'BUSH/506/WRKS/2017-18/00002', Contract Value: 145,214,340 UGX, Contractor: Be Camel Uganda Limited and an Ending/Closing Procurement Entry Titled 'Supply of Fish Related Items', Register No. 22 Dated 13/06/2018 and Referenced 'BUSH/506/SUPLS/2017- 18/00008', Contract Value: 10,000,000 UGX, Contractor: Kabahura Farmers Limited.	2
		- Referenced and Completed Procurement Activity Files for all procurements were seen by the Assessor at the PDU.	

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 previous FY (2017/2018 FY), there WAS Evidence that the LG adhered to Procurement Thresholds as exemplified by the following procurements: Completion of Maternity Ward at KYAMUHUNGA Health Centre III in Kyamuhunga Town Council under DDEG (BUSH/506/WRKS/2017-18/00009). Contract Amount: 37, 966, 500 UGX. Verified Procurement Method: Selective Bidding. Bid Invitation Letter Dated 19/December/2017, Referenced CR 105/2 and Signed by Head PDU. Supply and Installation of Culverts at NSIMBI CROSSING in Bumbaire Sub-county under Uganda Road Fund (BUSH/506/WRKS/2017-18/00010). Contract Amount: 10, 740, 360 UGX. Verified Procurement Method: Selective Bidding. Bid Invitation Letter Dated 19/December/2017, Referenced CR 105/2 and Signed by Head PDU. Embankment Reconstruction of KAFUNJU, BURUNGIRA AND NYEIBINGO in Ruhumuro Sub-county under Government of Uganda Funds (BUSH/506/WRKS/2017-18/00003). Contract Amount: 97, 080, 680 UGX. Verified Procurement Method: Open Domestic Bidding. Date of Advertisement: 08/August /2017, Ref Pepper Newspaper, Page 6. Construction of RUTOOMA Gravity Flow Scheme (GFS) Phase II in Ibaare Sub-county under Rural Water and Sanitation Grant (BUSH/506/WRKS/2017-18/00001). Contract Amount: 226, 748, 221 UGX. Verified Procurement Method: Open Domestic Bidding. Date of Advertisement: 08/August /2017, Red Pepper Newspaper, Page 6. Construction of 5 Stance Lined VIP Latrines in 6 Schools under SFG (BUSH/506/WRKS/2017-18/00002). Contract Amount: 145, 214, 340 UGX. Verified Procurement Method: Open Domestic Bidding. Date of Advertisement: 08/August /2017, Red Pepper Newspaper, Page 6. Supply and Installation of Culverts in KYAMUHUNGA Town Council, NYABUBARE Sub county and Stone Pitching in BUTARE Trading Center under DDEG (BUSH/506/WRKS/2017-18/00002). Contract Amount: 145, 214, 340 UGX. Verified Procurement Method: Selective Bidding. Bid Invitation Letter Dated 16/April/2018, Referenced CR/105/2 and Signed by Head PDU. Completion	

The LG has certified and provided detailed project • Evidence that all works projects implemented in the previous FV were appropriately certified – interim and completion certificates for all projects based on technical supervision as exemptified by the following projects: • Renovation and Expansion of Administration Block at measure Maximum 4 points on this performance asure • Renovation and Expansion of Administration Block at memory the following projects: • Renovation and Expansion of Administration Block at RWENTUHA Town Council (BUSH/506/WRKS/2017- 18/00011). Interim Certificate No. 01, Issued on 25/06/2018, Certified by Superintendent of Works. • Renovation and Expansion of Administration Block at RWENTUHA Town Council (BUSH/506/WRKS/2017- 18/00011). Interim Certificate No. 02, Issued on 30/06/2018, Certified by Superintendent of Works. • Renovation and Expansion of Administration Block at RWENTUHA Town Council (BUSH/506/WRKS/2017- 18/00011). Interim Certificate No. 03, Issued on 01/09/2018, Certified by Superintendent of Works. • Supply and Installation of Culverts in KYAMUHUNGA Town Council, NYABUBARE Sub county and Stone Pitching in BUTARE Tracing Center under DDEG (BUSH/506/WRKS/2017-18/00006 Lot 2). Interim Certificate No. 01, Issued on 29/06/2018, Certified by Superintendent of Works. • Supply and Installation of Culverts in RWENTUHA and KYAMUHUNGA Town Councils under Government of Uganda Funds (BUSH/506/WRKS/2017. 18/00004). Payment Certificate, Prepared by District Mater Officer, Endorsed by CAO on 24/10/2017. • Construction of RUTOOMA Gravity Flow Scheme (GFS) Phase II in bbaare Sub-county under Rural Water and Sanitation Grant (BUSH/506/WRKS/201718/00001). Payment Certificate, Prepared by District Water officer, Endorsed by CAO on 2	a
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		 Embankment Reconstruction of KAFUNJU, BURUNGIRA AND NYEIBINGO in Ruhumuro Sub-county under Government of Uganda Funds (BUSH/506/WRKS/2017- 18/00003). Interim Certificate No. 01, Issued on 08/02/2018, Certified by Superintendent of Works. Completion of Maternity Ward at KYAMUHUNGA Health Centre III in Kyamuhunga Town Council under DDEG (BUSH/506/WRKS/2017-18/00009). Interim Certificate No. 01, Issued on 20/04/2018, Certified by Superintendent of Works, Approved by CAO. Supply and Installation of Culverts at NSIMBI CROSSING in Bumbaire Sub-county under Uganda Road Fund (BUSH/506/WRKS/2017-18/00010). Interim Certificate No. 01, Issued on 09/03/2018, Certified by Superintendent of Works, Approved by CAO on 12/03/2018. 	
The LG has certified and provided detailed project information on all investments Maximum 4 points on this performance measure	• 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	There was NO Evidence that all works projects for the current FY (2018/2019 FY) were clearly labeled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration since NOT even a single works project for the current FY (2018/2019 FY) had commenced construction by the time the Assessor visited the LG.	0
Financial manag	jement		
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	Bushenyi DLG runs 8 bank accounts including the TSA. As on date of this assessment on 10th and 11th September 2018, bank reconciliations for FY 2017/18 were all complete. Reconciliation for TSA was up to 20th August and for the rest of the accounts up to 31st July 2018.	4

The LC mede		Duebers i DLC resuments reviewed about that there were a	0
The LG made timely payment of suppliers during the previous FY	 If the LG makes timely payment of suppliers during the previous FY no overdue bills 	Bushenyi DLG payments reviewed show that there were a number of instances where the district paid beyond the mandatory 2 months limit. This is in consideration of the terms and conditions of the contracts the LG made with its different suppliers of goods and services. Examples include:	
Maximum 2 points on this performance	(e.g. procurement bills) of over 2 months: score 2.	Payment of Shs 3,019,126 to Total (U) Ltd for supply of IFMIS generator fuel. Invoicing 22/06/18 and payment 22/06/18 (0 days).	
measure		Payment of Shs 740,000 to MUCA ICT (U) Ltd for repairs on the photocopier. Invoicing 14/05/18 and payment 17/06/18 (1 month 3 days).	
		Payment of Shs 1,010,899 to Loba Stationers Ltd for supply of stationery. Invoicing 21/06/18 and payment 19/06/18 (-2 day)	
		Payment of Shs 599,720 to BIBS (U) Ltd for servicing of IFMIS generator. Invoicing 19/06/18 and payment 24/06/18 (5 days).	
		Payment of Shs 750,000 to Total (U) Ltd for supply of IFMIS generator fuel. Invoicing 21/11/17 and payment 11/12/17 (20 days).	
		Payment of Shs 676800 to Gift Niloba Restaurant for supply of meals to district staff. Invoicing 15/11/17 and payment 28/11/17 (13 days).	
		Payment of Shs 810,000 to Basokakwavula Motor Spares for repair of district motor vehicles. Invoicing 13/07/18 and payment 28/09/18 (2 months 15 days).	
		Payment of Shs 450,000 to Shell Malindi (U) Ltd for supply of IFMIS generator fuel. Invoicing 10/10/17 and payment 0712/17 (1 month 27 days).	
		Payment of Shs 2,183,000 to Crane Computers (U) Ltd for supply of a desktop computer for internal audit. Invoicing 14/02/18 and payment 21/02/18 (7 days).	
		Payment of Shs 588,000 to BIBS Engineering Ltd for servicing the IFMIS generator. Invoicing 14/11/17 and payment 22/02/18 (3 months 8 days).	

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: 1 point. LG has produced all quarterly internal audit reports for the previous FY: score 2. 	• Bushenyi District has a substantively appointed Principal Internal Auditor in the names of Tumwesigye Santiano, per his appointment letter Ref. CR/156/4/5, dated 03/03/2014, written by the CAO (Based on DSC Minute No. 05/2014 (1)).	1
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.	• The LG produced all the internal audit reports for the 4 quarters of FY 2017/18. Quarter 1 report is dated 31/10/17, quarter 2 dated 31/01/18, quarter 3 dated 31/04/18 and quarter 4 dated 31/07/18.	2

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 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.	Internal audit reports contain a tracker of previous unresolved audit recommendations. Council discussed the findings in audit reports and DPAC reports on 31/08/18 and 04/09/18, per Presentation to Council, Ref. COU/214/12.	2
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 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.	The Internal Audit department delivery book shows that for FY 2017/18, Quarters 1-4 Internal Audit reports were delivered to District Chairman, RDC, Secretary Finance, DPAC Chairman, CFO, Auditor General Office Mbarara and CAO on the following dates: Quarter 1 on 21/10/17, Quarter 2 on 31/01/18, Quarter 3 on 28/04/18 and Quarter 4 on 07/09/18. As per DPAC minutes, the DPAC meeting on 22/12/17 discussed 3rd and 4th quarter reports of FY 2016/17. The DPAC meeting on 18/05/18 discussed 1st and 2nd quarter internal audit reports for FY 2017/18.	1
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 	The district has an assets register that is formatted as required by the accounting manual. It contains some of the most recent government donated assets such as the Road Unit. However, government donated assets don't have attached values, as well as buildings and land which need valuation. This state of affairs could be improved if the LG made an effort to obtain current market values for the assets.	0

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	The district had an unqualified audit opinion for its FY 2017/18 financial report.	4
Governance, ove	ersight, transparency	and accountability	
The LG Council meets and discusses service delivery related issues Maximum 2 points on this performance measure	 Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2 	 The LG Council met chaired by the speaker and discussed service delivery related issues from monitoring and sector committee reports in the minutes 34/2017/18 in the meeting dated 8th /2/2018. However, the council did not discuss/ include D/PAC reports and performance assessment reports. From the council minutes the D/PAC report received by council in the period under assessment were differed by the speaker who chaired council. There was evidence that the CAO presented issues from TPC to DEC as seen in the TPC minutes 10/4/2018 on disbursement to YLP/groups, TPC 23/5/2018 on sector performance reports and the DDP performance. However there was no evidence from the council minutes that the 	2

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 1.	Ms Busisis jovans the information assistant was appointed to coordinate grievances/complaint by the CAO in a letter dated 5th/9/2018. There is evidence of feed back to complaints on face book page Bushenyi district local government. For instance feedback on the breast feeding programme and creation of a breast feeding corners at the district administration.	1
The LG has responded to the feedback/ complaints provided by citizens Maximum 2 points on this Performance Measure	• 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	 The LG had specified the underlying systems and there was evidence that the systems were effective; Suggestions and complaints boxes placed at the entrance of the administration building. At the time of assessment the complaints officer was registering complaints from the box. A baraza was conducted by the office of the RDC at Ruhumuro S/C together with the OPM. Aimed at sensitising the community on what the district does by sector and how services can be accessed. The report was with the RDC. The district and NITTA ran a website www.bushenyidistrict.cu.ug since July 2018 Radio talks were actively used to respond to complaint as a way of feedback. Reference, a show on crane FM dated 13/5/2018 on road reserves, report dated 10/8/2018 on breast feeding on BFM, Notice boards, various displays were seen on quarterly performance dated 7/7/2018 & 1/11/201 	1
The LG shares information with citizens (Transparency) Total maximum 4 points on this Performance Measure	Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2	The LG had displayed on the notice board at the entrance of the administration block pensions and salaries payrolls for the month of august, 624 pensioners and 1786 active staff.	2

The LG shares information with citizens (Transparency) Total maximum 4 points on this Performance Measure	• Evidence that the procurement plan and awarded contracts and amounts are published: score 1.	There was no evidence that the LG had displayed procurement plan and awarded contracts on the PDU notice board at entrance of the administration block. This was attributed to the expiry of the time frame for the award notices.	0
The LG shares information with citizens (Transparency) Total maximum 4 points on this Performance Measure	• 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.	There was no evidence that the LG performance assessment results and implications were displayed by the CAO on the administration notice board.	0
The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens Maximum 2 points on this performance measure	• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1	There was no evidence that the CAO and planner had communicated and explained guidelines in the TPC meeting or even displayed policy guidelines for LLG staff.	0

The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens Maximum 2 points on this performance measure	• 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.	There was evidence from a baraaza report dated 13/01/2017, radio programmes and notice boards of LG providing feed back on status of implementation of activities.	1
Social and envir	onmental safeguards		

The LG has mainstreamed gender into their activities	• Evidence that the LG gender focal person and CDO have provided	There WAS Evidence that the LG gender focal person provided guidance and support to sector departments to mainstream gender into their activities as exemplified by the following:	
and planned activities to strengthen women's roles	guidance and support to sector departments to mainstream gender,	- The Assessor saw Bushenyi DLG Report on District Technical Planning Committee Meeting that was held on 20/06/2018 at District Council Hall. The Report contained a Presentation on Gender Mainstreaming that was made by	
Maximum 4 points on this	vulnerability and inclusion into their	Community Based Services Department and was signed by Senior Community Development Officer.	
performance measure.	activities score 2.	- The Assessor saw Bushenyi DLG Local Action Plan (LAP) on Gender Based Violence for the period 2018 – 2021 Dated June 2018, Facilitated by Reproductive Health Uganda (RHU) and SONKE Gender Justice.	
		- The Assessor saw Bushenyi DLG Report of Women Interest Groups Training Conducted in Different Sub counties in the District from 28th – 30th May 2018, Written and Signed by CDO/Youth Livelihoods Focal Person.	
		- The Assessor saw Bushenyi DLG Report on YLP Training for District Stakeholders held on 2nd August 2017, Written and Signed by CDO.	
		- The Assessor saw Bushenyi DLG Minutes of District HIV/AIDS Coordination Committee Meeting held on 10/04/2018 in the District Boardroom, Recorded by SCDO/District HIV Focal Person. The Minutes had an Annex Titled 'Presentation on Gender Mainstreaming and GBV to the District HIV/AIDS Coordination Committee (DAC) Meeting held on 10/04/2018 in the District Boardroom' Signed by Senior Community Development Officer.	
		- The Assessor saw Bushenyi DLG Report on Youth Training Conducted in Different Sub counties in the District from 20th – 23rd June 2018 Dated 25/June/2018.	
		- The Assessor saw Bushenyi DLG Annual Report on Gender Mainstreaming and Gender Based Violence Plan Implementation for 2017/2018 FY Dated 13/July/2018, Written by Senior Community Development Officer.	

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/	- There WAS Evidence that gender focal point had planned activities for current FY (2018/2019 FY) to strengthen women's roles. The Assessor saw Bushenyi DLG Approved Annual Work Plan for FY 2018/2019 with the following planned activities under Community Based Services Section: Gender Mainstreaming in Sector Development Plans – Page 91, Output 108107 Gender Mainstreaming (2,980,000 UGX); Women Groups Mobilized, Formed, Trained, Verified and Approved for Benefitting from UWEP Funds in all LLGs – Pages 95 and 96, Output 108114 Representation on Women Councils (15,971,000 UGX); PWDs and Older Persons Facilitated for Operations – Page 93, Output 108110 Support to Disabled and the Elderly (18,578,000 UGX); Youth Groups Mobilized, Identified, Formed, Verified, Approved for YLP Loans – Pages 92 and 93, Output 108109 Support to Youth Councils (23,105,000 UGX).
	vulnerability/ social inclusion has been implement-ted: score 2.	- There was NO Evidence that more than 90% of previous year's budget for gender activities was implemented since Allocations that were made for Gender Activities for FY 2017/2018 were utilized at 69% Level according to computation based on validated Expenditure Vouchers that were retrieved from the Accounts Department by the Gender Focal Point Person.

			4
LG has established and maintains a functional	• Evidence that environmental screening or EIA where appropriate,	There WAS Evidence that environmental screening or EIA where appropriate, was carried out for activities, projects and plans as exemplified by the following:	1
system and staff for environmental and social	are carried out for activities, projects and plans and mitigation	- The Assessor saw Bushenyi DLG Environmental Screening Report of Projects that were implemented in 2017/2018 FY Dated 30/05/2017 Addressed to CAO and Signed by District Environment Officer.	
impact assessment and land acquisition Maximum 6 points on this performance	budgeted for: score 1	- The Assessor saw Bushenyi DLG District Social and Environmental Management Plan for Projects that were implemented in 2017/2018 FY Dated 26/10/2017 and Signed by District Environment Officer. The Projects included Construction of Rutooma Gravity Flow Scheme (GFS) and Construction of 5 Stance VIP Lined Latrines in 6 Primary Schools in the District.	
measure		- The Assessor saw Bushenyi DLG Environmental and Social Mitigation Certification Form for Construction of Rutooma Gravity Flow Scheme (GFS) in Ibaare and Bumbaire Sub counties Dated 21/03/2018, Cost of Mitigation: 751,000 UGX, Certified by District Environment Officer.	
		- The Assessor saw Bushenyi DLG District Social and Environmental Management Plan for Projects under CAIIP 3 Dated 18/06/2018 and Signed by District Environment Officer. The Projects included Construction of Three Coffee Huller Machines in Ibaare, Bitooma and Ruhumuro Sub counties.	
		- The Assessor saw Bushenyi DLG Report on Monitoring of Government Projects in the District Dated 03/04/2018, Referenced ENV 213/1 and Signed by District Environment Officer.	

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 the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1	 There WAS Evidence that the LG integrated environmental and social management plans in the contract bid documents as exemplified by the following: Construction of 5 Stance Lined VIP Latrines in 6 Schools under SFG (BUSH/506/WRKS/2017-18/00002). Bill of Quantities Dated 28/August/2017, Environmental Mitigation Measures, Budget: 120,000 UGX. Rehabilitation of 2 Springs, 4 Shallow Wells and KYAMUHUNGA Gravity Flow Scheme (GFS) under Rural Water and Sanitation Grant (BUSH/506/WRKS/2017-18/00004). Bill of Quantities Dated 07/08/2017, Environmental Management Activities, Budget: 696,000 UGX. Construction of RUTOOMA Gravity Flow Scheme (GFS) Phase II in Ibaare Sub-county under Rural Water and Sanitation Grant (BUSH/506/WRKS/2017-18/00001). Bill of Quantities Dated 28/08/2017, Environmental Management Activities, Budget: 545,000 UGX. 	1
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 all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc): score 1	There was NO Evidence that all projects were implemented on land where the LG had proof of ownership by way of a land title or agreement with land owners. None of the projects sampled had a copy of a land title or a land agreement on their appropriately and adequately referenced Procurement Files in the PDU or in the Lands Office.	0

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 all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1	There was NO Evidence that all completed projects had Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer.	0
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 the contract payment certificated includes prior environmental and social clearance (new one): Score 1	There was NO Evidence that Contract Payment Certificates included prior environmental and social clearance.	0

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 officer and CDO monthly report, includes a) completed checklists, b) deviations observed with pictures, c) corrective actions taken. Score: 1 	There was NO Evidence that Environmental Officer and CDO Monthly Report included a) completed checklists b) deviations observed with pictures c) corrective actions taken.	0
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506 Bushenyi Education Performance Measures 2018

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource pla	anning and management		
The LG education de- partment 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	The LG budgeted for a Head teacher and a minimum of 7 teachers for FY 2018/19 to the tune of 7,459,638,000/= for the 1,164 teachers at 127 schools as per approved Performance contract signed by the CAO generated 31/7/2018 (4.43pm)	4
The LG education de- partment 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 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	The LG has deployed a Head teacher and a minimum of 7 teachers per school for the current FY as per list of schools and staff lists. In visited schools, the following obtained; Ncucumo P.S had 1 Head teacher and 7 teachers for the 315 pupils (160M 155F) Kyeizooba P.S had 1 Head teacher and 10 teachers for 510 pupils (260M 250F) Kitabi Girls P.S had 1 Head teacher and 8 teachers for the 424 pupils (200M 224F) Kabingo P.S had 1 Head teacher and 11 teachers for the 661 pupils (312M and 349F)	4

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 	The LG has filled the structure for primary teachers with a wage provision by 1,122 teachers out of the 1,164 teachers representing 96% of the structure.	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	The LG has substantively filled all positions of school inspectors as per staff structure of 1. The Inspectors is Williams Ahabwe.	6
The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY. Maximum 4 for this performance measure	Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of • Primary Teachers: score 2	The LG has submitted a recruitment plan to HRM for the current FY to fill positions of the following; 14 Head teachers, 12 Deputy Head teachers, 87 Senior Education Assistants, and 38 Education Assistants as per letter dated 10/4/2018.	2

The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY. Maximum 4 for this performance measure	Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of • School Inspectors: score 2	There was no need to submit a recruitment plan for inspectors since the structure had already been filled.	2
Monitoring and Insp	ection		
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. Maximum 6 for this performance measure	Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY • 100% school inspectors: score 3	• The inspectors of schools were appraised ie file numbers CR/D/12113 Dated 30th/07/2018 CR/D/12122 Dated 30th/08/2018 CR/D/12122 Dated 04th/07/2018	3

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. Maximum 6 for this performance measure	Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY • Primary school head teachers o 90 - 100%: score 3 o 70% and 89%: score 2 o Below 70%: score 0	• 80% of the primary school head teachers were appraised, some of the sampled files include file no 11847,11741,10216, 11192, 11224,10290,10135,10158,, 12750, 10386,14552,10178,11661,11199, 10907, 10338, 14730.	2
The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools Maximum 3 for this performance measure	• Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1	The LG has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools. In visited schools, Kyeizooba Girls had received the MDD Circular. Kiabi Girls had received the MDD Circular, the Stop Malaria Gudelines, and the training calendar. Kabingo had received the MDD Circular and the Ball Games competition circular. Ncucumo had received the Inspections Tool.	1
The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools Maximum 3 for this performance measure	• Evidence that the LG Education department has 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	The LG held meetings for Head teachers on 22/9/2017 and 13/2/2018 and among others explained and sensitized teachers on the guidelines, policies, circulars issued by the national level under Min 8/2017 and Min 3/2018. 99 Head teachers were in attendance.	2

The LG Education De- partment has effectively inspected all registered primary schools2 Maximum 12 for this performance measure	 Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: 0 100% - score 12 0 90 to 99% - score 10 0 80 to 89% - score 3 0 70 to 79% - score 6 0 60 to 69% - score 3 0 50 to 59 % score 1 0 Below 50% score 0. 	Not all private and public schools have been visited at least once per term and reports produced. A total of 473 inspections were made in previous FY for the 180 schools which required 540 inspections. This represents 87% of the required inspections. In visited schools Ncucumo was inspected on 9/4/2018 and 15/9/2017 implying there was no inspection in Term 2. Kyeizooba was inspected on 27/3/2018, 2/11/2017, and 3/7/2017. Kitabi Girls was inspected on 16/3/2018, 16/10/2017 and 21/6/2017. Kabingo was inspected on 21/3/2018, 14/6/2017, and 31/3/2017. There was no inspection in Term 3.	8
LG Education department has discussed the results/ reports of school inspec- tions, used them to make recommendations for corrective actions and fol- lowed recommendations Maximum 10 for this performance measure	• 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	There is evidence that the Education Department had discussed school inspection reports and used reports to make recommendations for corrective action as reflected in Departmental meetings held on 13/2/2018 Min 1/2018 and on 17/7/2017 Min 14/2017 where the Teachers Inspection Tool and errant teachers were discussed respectively.	4

LG Education department has discussed the results/ reports of school inspec- tions, used them to make recommendations for corrective actions and fol- lowed recommendations Maximum 10 for this performance measure	• Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2	Acknowledgement letters from DES were available at the Department for submissions of inspection reports for terms 2 and 3 dated 22/9/2017 and 3/5/2018 respectively	2
LG Education department has discussed the results/ reports of school inspec- tions, used them to make recommendations for corrective actions and fol- lowed recommendations Maximum 10 for this performance measure	• Evidence that the inspection recommendations are followed- up: score 4.	There is evidence that inspection recommendations are followed up from Head teachers met at visited schools as follows; Ncucumo – Timetabling for infants to be displayed in classrooms, teaacher attendance signatures on sign off at end of school day Kyeizooba – Fencing of school compound, and a talking compound Kitabi Girls – Log-book teacher attendance and daily sign-out, implementation of better sanitation Kabingo – Displaying teacher responsibilities in staff room, and academic meetings with staff by the Head teacher.	4

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 PBS: score 5 	The LG has not submitted accurate / consistent data pertaining to list of schools in the district. The LG has 180 schools (127 public and 53 private) while EMIS data indicates a total of 178 schools.	0
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 submit- ted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and PBS: score 5	The LG has not submitted accurate/consistent enrolment data. The LG has a total of 54,556 pupils while EMIS data indicates a total of 52,511	0
Governance, oversig	ght, transparency and acc	countability	
The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented 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 etc. during the previous FY: score 2	The DEO presented to the Education sector committee his report on 6/9/2017 and under min 27/2017 discussed PLE Mock exams, National Football competition, Music Competitions, and NIRA registration of pupils, among others. On 22/3/2018 the DEO under Min 47/2017/18 presented issues of an additional inspector post in the establishment, fixing of doors and lightening arrestors, as well as school feeding.	2

Primary schools in a LG have functional SMCs Maximum 5 for this performance measure	Evidence that all primary schools have functional SMCs (estab- lished, meetings held, discussions of budget and resource issues and submission of reports to DEO/ MEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80 % schools: score 0	 There is no evidence of functional SMCs for all the 5 sampled schools having held SMC meetings and submitted their SMC minutes to the DEO's office as indicated below; Birimbi Model School had submitted minutes of SMC/PTA meeting held on 23/3/2016. No minutes were available on file for 2017 and 2018. Kihungye P.S had submitted minutes of meeting held on 28/4/2016 and Head teacher's report was presented under min 3/2016 (b). There were no minutes for 2017 or 2018. Kanyakatura had submitted minutes of meeting held 25/3/2016 and Head teacher's report was presented under Min 2/2016. There were no minutes for 2017 or 2018. 	3
		Kashozi P.S had last submitted their minutes of the SMC on 15th June 2012 and the Head teacher's report was presented under Min 8/12. A new SMC led by Laban Berangye had been submitted by the Head teacher on 2/11/2016.	
		In Nyamushundo P.S, no minutes of the SMC were available on file. The last SMC had been approved by the District Education Committee in letter dated 12/4/1999. The last communication from the school is dated 23/4/2015. On the other hand, in visited schools, the three mandatory meetings had been held in all the four (4) schools as follows:-	
		Ncucumo – 12/6/2018, 16/2/2018, and 16/6/2017. There was no meeting for Term 3 in 2017.	
		Kyeizoba – 4/6/2018, 22/2/2018, and 24/10/2017	
		Kitabi Girls – 6/9/2018, 28/4/2018, and 8/12/2017	
		Kabingo – 19/6/2018, 22/2/2018, and 10/11/2017	
		There is a high possibility that Primary Schools do hold the meetings but fail to submit the minutes to the DEO's office.	

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	The LG has publicised all schools receiving non-wage recurrent grants through posting on the Main public noticeboard. In visited schools, Ncucumo P.S had the non-wage recurrent grants for Term 2 of 1,218,208/= displayed in the general office. In Kyeizoba P.S the non-wage recurrent grants were displayed in the Head teachers office and in the general office. 1,349,127/= had been received or Term 2. In Kitabi Girls P.S the non-wage recurrent grants were displayed in the Head teacher's office. 1,384,693/= had been received for Term 2. In Kabingo P.S the non-wage recurrent grants were displayed in the school had received 1,494,098 for term 1.	3
Procurement and co	ntract management		
The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements, to the Procurement Unit that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	• 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	The sector had only submitted procurement input to Procurement Unit covering all investment items in the approved Sector annual work plan and budget on 10/5/2018	0
Financial management and reporting			

The LG Education department has certified and initiated payment for supplies on time Maximum 3 for this performance measure	• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3.	 Bushenyi DLG Education department FY 2017/18 payments reviewed show that there were instances where the district did not timely certify and pay suppliers. The department had three certified payments in FY 2017/18, which were: Payment of Shs 6,204,983 retention to Reko Hardware & Building Construction for construction of a semidetached staff house at Kigondo P/S. Requisition 20/11/17, certificate 23/11/17 and payment 30/01/18 (2 months 10 days). Payment of Shs 11,067,368 retention for construction of 5 stance VIP latrine in 9 primary schools. Invoice 06/05/18, certificate 28/05/18 and payment 19/06/18 (1 month 13 days). Payment of Shs 10,443,000 to Be-Carmel (U) Ltd for construction of a 5 stance latrine in 5 primary schools. Invoice 02/03/18, certificate: not dated, payment 10/05/18 (3 months 8 days). 	0
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 15th of July for consolidation: score 4	The department had submitted the Annual Performance Report on 22/8/2018	0

LG Education has acted on Internal Audit recom- mendation (if any) Maximum 4 for this performance measure	 Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 o If all queries are not 	 Bushenyi DLG Education department had internal audit queries in FY 2017/18. Though effort was made to respond the queries, there are some which remained by the close of the year. For example Quarter 1 report had a query on non-display of UPE funds accountabilities and non-preparation of financial statements of schools. Quarter 2 reported on Bumbaire Technical Institute unaccounted for funds Shs 1,448,000. Quarter 3 reported on secondary schools lacking strategic plans and Kyabugimbi Secondary School having an expired Board of Governors. Quarter reported on Kyamuhunga Technical Institute having an expired Board of Governors and having unaccounted for funds totalling Shs 33,975,620. 	0
	respond- ed to score 0		
Social and environm	iental safeguards		0
LG Education Department has disseminated and promoted adherence to gender guidelines Maximum 5 points for this performance measure	 Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills, etc.: Score 2 	The LG Education department had disseminated guidelines on gender in a meeting held for senior women teachers on 24/5/2018	2

LG Education Department has disseminated and promoted adherence to gender guidelines Maximum 5 points 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	The LG Education department in collaboration with gender department had issued and explained guidelines on sanitation in a meeting held on 13/2/2018	2
LG Education Department has disseminated and promoted adherence to gender guidelines Maximum 5 points for this performance measure	• Evidence that the School Management Committee meets the guideline on gender composition: score 1	Not all SMCs met the guideline on gender composition of having at least 2 of the 6 members on the SMC representing the Foundation body be female. In visited schools the following females were on the SMCs representing the Foundation body as follows:- Ncucumo – Mrs Julit Ishanga, Mrs Lonnet Naamanaya, and Mrs Winfred Tumwiine Kyeizoba – Mrs Freedom Catherine Kitarisibwa, Rose Nankunda, and Betty Nyinomujuni Kitabi Girls – Mrs Prudence Byambwenu, Mrs Jenipher Ihooza, and Mrs Constance Byabasheija Kabingo had only one female from the Foundation body on the SMC – Mrs Harriet Muhebwa	0
LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with 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 1:	The LG Education department in collaboration with Environment department has issued guidelines on environment management in Head teachers meeting held on 13/2/2018. In visited schools, an environment club has been established at Kyeizoba, tree planting and planting of shrubs has occurred at Kitabi Girls, while fruit trees have been planted at Kabingo P.S. Kabingo had a circular from the CAO Bushenyi directing on planting of trees at all Government institutions dated 30/4/2018.	1

LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with Maximum 3 points for this performance measure	• 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	School infrastructure projects have been screened before approval for construction as per Environmental Screening report submitted to CAO by the Environment Officer dated 30/5/2017.	1
LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with Maximum 3 points for this performance measure	 The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 1 	The Environment Officer and Community Development Officer had visited the sites to check whether mitigation plans are complied with.	1

Health Performance Measures 2018

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planni	ng and management		
LG has substantively recruited primary health care workers with a wage bill provision from PHC wage Maximum 8 points for this performance measure	Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY • More than 80% filled: score 8 • 60 – 80% - score 4 • Less than 60% filled: score 0	 Approved structure is 345, filled positions 254. The staffing level stands at 74% Examined are the following Sources of information; Health department staff establishment list report as at the 1st July 201, the approved structure from Ministry of Public Service (MOPS) and the revised wage bill estimates circular (Ref. HRM 155/222/02, Annex 1B page 1 of 4) from PSST/MOFPED (authored by Kenneth Mugambe) dated 20th March 2018 amounting to UGX.2,322,578,000 provided for the 254 staff positions filled. 	4
The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department Maximum 6 points for this performance measure	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	 Included in the District Recruitment Plan (submitted to MOPS of ref CR: 115/2 dated the 12th March 2018) is the component for the Health Department to fill 3 vacant positions of Health Inspectors for the three newly created Town Councils of KIZINDA, BITOOMA & KYABUGIMBI. A replacement o submission dated the 3/9/2018 for the District Health Educator was made by the DHO CAO to form part of the recruitment plan. 	6

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	Evidence that the all health facilities in- charges have been appraised during the previous FY: 0 100%: score 8 0 70 – 99%: score 4 0 Below 70%: score 0	CR/D/12057 ON 13/07/2018 CR/D/11786 ON 27/06/2018 CR/D/12183 ON 13/07/2018 CR/D/10463 ON 13/07/2018 CR/D/11674 ON 13/07/2018 CR/D/12097 ON 13/07/2018 CR/D/11998 ON 06/07/2018	8
measure			
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. Maximum 4 points for this performance measure	• 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	 The department deployed staff as per the list submitted and this was consistent with the staff found at the health units visited. Evidenced from the staff posting list as of 1st July 2018 and verification of the staffing at the health facilities of: KYEIZOOBA HCIII, KASHAGOSHAGO HCII, RYEISHE HCIII, KYAMUHUNGA HCIII & KYABUGIMBI HCIV visited on the 10th September 2018. The posting were as follows: KYEIZOOBA HCIII 19 KASHAGOSHAGO HCII 4 RYEISHE HCIII 14 KYABUGAMBI HCIV 41 The posting list at the DHO's office corresponded to the staff at the Health Centres visited as per the daily monthly wage/attendance registers and duty Rostas and head counts for those present on duty. 	4
Monitoring and Supervi	sion		

The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities Maximum 6 for this performance measure	• Evidence that the DHO/ MHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3	 The DHO communicated and distributed only one guideline from the MOH on Sector Grant & Budget Guidelines to Local Governments FY 2018/2019. A copy of this guideline was found in all the five(5) health units visited and the distribution list from the DHO's office dated the 8th August 2018. There was no evidence that the other two guidelines (The Ministry of Health Guidelines for Local Government Planning process-health sector supplement-2017; Ministry of Health, sector Grant and Budget Guidelines to Local Government FY 2018/19 & Ministry of Health, Policy Strategies for improving health Service Delivery 2016-2021) from the Health Units with the allegations that the department had not yet received the two guidelines from the MOH. 	0
The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities Maximum 6 for this performance measure	• Evidence that the DHO/ MHO has held meetings with health facility in- charges and among others explained the guidelines, policies, circulars issued by the national level: score 3	 Evidence examined showed that the DHO held one meeting with in-charges on the 22/9/2017 and among the issues discussed were: sector performance under Min 6/2017; Logistics Management for the HMIS Focal person under Minute 5/2017 & the way forward under minute 8/2017 of the meeting. There was no evidence that the guidelines, policies & circulars issued or not issued were explained to the Health Unit In-Charges especially this particular three circulars & policies. (The Ministry of Health Guidelines for Local Government Planning processhealth sector supplement-2017; Ministry of Health, sector Grant and Budget Guidelines to Local Government FY 2018/19 & Ministry of Health , Policy Strategies for improving health Service Delivery 2016/2021) 	0

The LG Health Department has effectively provided support supervision to district health services Maximum 6 points for this performance measure	Evidence that DHT/MHT has supervised 100% of HC IVs and district hospitals (including PNFPs receiving PHC grant) at least once in a quarter: score 3	 The DHT supervised KYABUGAMBI & BUSHENYI HCIVs. Evidence was the support supervision reports and support supervision log books examined at KYABUGAMBI HCIV indicating the DHT carried out support supervision on the 11/7/2017, 11/10/2017 & 28/03/2018. DHT supervised BUSHENYI HCIV on the 13/2/2018(ARINAITWE WILBER), 23/3/2018(DR MWESIGYE EDWARD, GREGORY & TAHEBWA ELIAB) & 17/4/2018 (KYOSIMIIRE BEATRICE) The supervision reports authored by SHABOHURIRA AMBROSE for the 2nd, 3rd & 4th Quarters dated the 14/12/2017, 23/1/2018, 27/4/2018 & 9/7/2018 and 1st Quarter report by MUGANZI SAUL dated the 20/10/2017 The supervision was done by SHABOHURIRA AMBROSE, MUBANGIZI SAUL, TOM, BAREKYE, DR. EDWARD MWESIGYE(DHO), ARINAITWE WILBER, CHARLES, GREGORY 	3
The LG Health Department has effectively provided support supervision to district health services Maximum 6 points for this performance measure	Evidence that DHT/MHT has ensured that HSD has super- vised lower level health facili- ties within the previous FY: • 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	 The Igara East HSD carried out support supervision of 10 HCIIs, 4 HCIIIs & 1 HCIV. The Igara West HSD carried out support supervision on 7 HCIIs & 5 HCIIIs. Supervision done as evidenced in the health facilities of KASHOGASHOGA HCII(done on the 21st June 2018, 15/9/2017, 6/3/2018 & 10/12/2017 by Dr. Sadic BYAMUGISHA); RYEISHE HCIII (15/9/2017, 10/12/2017 & 6/3/2018) & KYEIZOOBA HCIII (15/9/2017, 6/3/2018 & 10/12/2017). These supervisions were done by DR. BYAMUGISHA SADIC, KAMUGISHA EPHRAIM, DR. BYARUHANGA MUSISI NOBERT, LUGOROBI, NAHAMYA SHAMON & KYOSIMIRE MONICA The Igara West HSD carried out support supervision at KYAMUHUNGA HCIII as seen in the quarterly reports dated the 14/12/2017 & 16/1/2018 which supervision was done by; DR. KYANGWA JOSEPH, NANKUNDA DIANA,NAKIMERA JESCA, SR. NINSIIMA STELLA & KYOBUTUNGI HONEST. 	3

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 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	• The quarterly support supervision reports were discussed during both the DHT meetings authored by the DHO (Dr EDWARD MWESIGYE) dated the 12/11/2017; 1/ 2/2018; 29/3/2018 & 6/6/2018 for 1st, 2nd, 3rd & 4th Quarters respectively and the meetings with in-charges dated the 22/9/2017, 11/12/2017, 29/3/2018 & 8/6/2018.	4
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 recom- mendations are followed up and specific activities undertaken for correction: score 6 	 The recommendations were followed up and specific activities under taken for correction. These included matters of support supervision, sector performance, Logistic management for HMIS focal person, attendance in health units, cleanliness in the health units, improved diseases surveillance, sanitation & hygiene in the health units. The DHT meetings & reports indicated the recommendations and follow-ups. As well the comments on the supervision log books examined in the Health Units visited showed recommendations made by the DHT and HSD supervisors. 	6

The LG Health department has submitted accurate/ consistent reports/data for health facility lists receiving PHC funding 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 receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10 	 The LG (health department) provided information regarding the list of Health facilities receiving PHC funding consistent with the MOH (health facilities reporting). A list of 29 Health Facilities (one Government HCIV-two private Hospitals, two PNFP HCIIIs, three PNFP HCIIs, 21 Government (LCII & LCIII Health centres) received PHC funding as per the list availed by the DHO's office. The two private hospitals are Ishaka hospital & Comboni delegated Hospital. The two PNFP HCIIs are Ishaka Adventist school of nursing & Bitooma HCIII. The three PNFP HCIIs are Burungira, Katungu & Bushenyi UMSC Kakanju 	10
Governance, oversight,	transparency and acc	ountability	
The LG committee responsible for health met, discussed service delivery issues and presented is- sues that require approval to Council Maximum 4 for this performance measure	• 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	 The Committee on Social Services met four times in the financial year (9/5/2018; 21/1/2018; 22/3/2018 & 6/11/2017 and discussed matters on; sanitation improvements at district hqtrs, motor vehicle for health department, PHC funds releases, drugs & health supplements, epidemic & emergency preparedness, push for a district hospital and concerns with RUSHINYA HCII. The meetings were chaired by Hon Councillor G.B.K. BARINYEKA and the secretaries for the meetings was MUHANGUZI BASIL. 	2
The LG committee responsible for health met, discussed service delivery issues and presented is- sues that require approval to Council Maximum 4 for this performance measure	• Evidence that the health sector committee has pre- sented issues that require approval to Council: score 2	 The Committee on Social Services after meetings presented reports to Council for approval. This was evidenced with submission reports dated the 31/5/2018, 27/3/2018, 7/12/2017, 21/9/2017 & 8/2/2018 by the Chairperson of the Committee (G.B.K. BARINYEKA). 	2

The Health Unit	Evidence that health	All the health facilities visited (KYEIZZOBA HCIII,	6
Management Committees and Hospital Board are	facilities and Hospitals have functional	KASHOGASHOGA HCIII, RYEISHE HCIII, KYAMUHUNGA HCIII & KYABUGAMBI HCIV have HUMCs in place.	
operational/functioning Maximum 6 points	HUMCs/Boards (established, meetings held and discus- sions of	• KYAMUGAMBI HCV HUMC met on the 27/6/2017 and discussed issues as; minute 29/2017/18-financial reports, minute 30/2017/18-budget, minute 31/2017/18- 2018/2019 work-plan, minute	
	budget and resource issues):	32/2017/18-X-ray construction report; on the 1/2/2018 under minute 18/2017/18-financial	
	 If 100% of randomly sampled facilities: score 6 	statements of 2nd Qtr, min 20/2017/18-construction od radiology & minute 21/2017/18-award of gifts; 12/102017 under minute 9/2017/18-budget	
	• If 80-99 %: score	presentation & minute 10/2017/2018- financial statements of first Qtr.	
	• If 70-79: %: score 2	• KASHOGASHOGA HCII HUMC met on the following dates; 8/9/2017 (discussed financial matters0, 21/12/2017 (discussed financial matters(
	• If less than 70%: score 0	9/4/2018(financial matters & VHTs) & 28//2018 (sanitation, staffing, patient turn-up, budget & reactions to budget issues)	
		• KYEIZOOBA HCIII HUMC met on the following dates; 22/5/2018(discussed drug monitoring, staffing & security at the health unit), /3/2018 (discussed review of the annual work plan & outreaches to be attended by members of the committee), 21/8/2017 (discussed report on the usage of PHC funds released) & 1/12/2017 (discussed report on the PHC funds usage & in-charge to write reports on the meetings)	
		• RYEISHE HCIII HUMC met on the following dates 30/4/2018(discussed budget and work plan & financial reports), 6/3/2018 (discussed financial reports, sign post, fruit trees, follow up on beds with DHO), 29/9/2017(discussed financial reports, HUMC photo & replacement of VHT) & 5/12/2017 (discussed financial reports, glass notice board & house for night watchman).	
		• KYAMUHUNGA HCIII HUMC met on the following dates; 28/3/2018 (min 50/17/18 was on financial matters), 13/6/2018 (discussed work plan & budget) & 24/10/2017(min 44/2017 first quarter budget.	

all h rece wag Max	LG has publicised health facilities eiving PHC non- ge recurrent grants kimum 4 for this formance measure	• Evidence that the LG has publicised all health facilities receiving PHC non- wage recurrent grants e.g. through posting on public notice boards: score 4	• The department did publicize the PHC funding to the 29 health units on the notice boards at the district headquarters examined, there was evidence that the lists of units receiving PHC funding were displayed.	4
Proc	curement and contra	act management		
depa subi proc requ with requ that the anni budy	LG Health artment has mitted input to curement plan and uests, complete all technical uirements, to PDU cover all items in approved Sector ual work plan and get	• Evidence that the sector has submitted input to procurement plan to PDU that cover all investment items in the approved Sector an- nual work plan and budget on time by April 30 for the current FY: score 2	 The department did not submit the procurement needs for the current FY 2018/2019 in time. Evidenced from the Annual Work Plans seen from the Planning unit and the PP1 forms signed by the DHO which were dated after the 30th April 2018 evidenced as below: 9/7/2018(repair of OPD at KAJUNJU HCII at UGX.5,000,000; repair of OPD at NOMBE HCII at UGX.5,000,000; repair /completion of OPD extension at KABUSHAHO HCIII, construction of Maternity Ward, water borne toilets & placenta pit at KIBAZI HCIII at UGX.187,000,000; construction of a twin staff house (one fully and the other phase 1) at KIBAZI HCIII at UGX. 173,000,000 & construction of OPD at KIBAZI HCIII at UGX.140,000,000) & on 1/7/2018 of fuel for DHO's office at UGX.4,000,000. This was way after the required deadline of 30th April 2018. 	0
depa subi proc requ with requ that the ann budy	E LG Health artment has mitted input to curement plan and uests, complete all technical uirements, to PDU cover all items in approved Sector ual work plan and get	• Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2.	• During the FY 2017/2018, there were no capital projects to warrant procurement requests.	0

The LG Health department has certified and initiated payment for supplies on time Maximum 4 for this performance measure	• Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4.	Bushenyi DLG Health department had only one certified project in FY 2017/18. The process from certification to invoicing and payment took a total of 1 month and 5 days. The project involved payment of Shs 38,286,657 to Turiyo Construction Co. Ltd for construction of an OPD at Kabumburi HC II in Bitooma S/C. Invoice date 20/03/18, Certification date 09/04/18 and Payment 25/04/18 (1 month 5 days).	4
Financial management	and reporting		
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 depart- ment submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid- July for consolidation: score 4	There was no evidence of the departmental submission of the annual performance report and other quarterly reports to the planning unit. How the LG was using on line reporting and the planner was able to consolidate the Qtr 4 by 22/8/2018 and others as below; Qtr1- 30/1/2018 Qtr 2- 26/4/2018 Qtr 3-26/7/2018	0

LG Health department has acted on Internal Audit recommendation (if any) Maximum 4 for this performance measure	Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query: Score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: Score 2 points • If all queries are not responded to Score 0	 Bushenyi DLG Health Department had internal audit queries in FY 2017/18. Though effort was made to respond the queries, there are some which remained by the close of the year. For example Quarter 1 reported on unaccounted for funds for miscellaneous payments totalling SHs 145,080,236. Quarter 2 reported on unaccounted for funds totalling Shs 142,977,515. There were also audit queries on expired drugs at Kakanju HC III. Quarter 3 reported on unsupported payments totalling Shs 1,048,000. Quarter 4 reported on unsupported payments totalling Shs 38,545,721. 	0
Social and environment	al safeguards		
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 (i.e. minimum 30 % women: score 2 	 The compositions of the HUMCs of the five health units visited is (KYABIGAMBI HCIV (2 female & 7 males), KASHOGASHOGA HCII (1 Females & 3 Males), KYEIZOOBA HCIII (4 females & 4 males) RYEISHE HCIII (3 Females & 1 Males) & KYAMUHUNGA HCIII (3 females & 2 males) Three of the health units met the gender composition as per guidelines and two (KYAMUGAMBI HCIV & KASGOGASHOGA HCII) did not meet. 	0

Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities. Maximum 4 points	• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2.	 Not all the health units visited had their sanitation facilities clearly labelled for both males & females and the privacy was as well observed. The ones that had were; KYAMUGAMBI HCIV, KYEIZOOBA, KYAMUHUNGA HCIII. Both KASHOGASHOGA HCII & RYEISHE HCIII did not have their sanitation facilities separated for men and women. The LG did not formally issue guidelines on how to manage sanitation in health facilities. 	0
LG Health department has ensured that guidelines on environmental management are disseminated and complied with Maximum 4 points for this performance measure	• 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	 In the financial year 2017/2018, there were capital projects (completion of Health HCIII-OPD, completion of KYAMUHUNGA HCIII) for health and therefore there was environment screening forms and environmental screening reports authored by the District Environment Officer (KATAATE VINCENT) of reference NAT 554/3 dated the 31st May 2017. 	2
LG Health department has ensured that guidelines on environmental management are disseminated and complied with Maximum 4 points for this performance measure	• The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 2	Since there were no capital/investment projects under health in the previous year, there was no provision for the District Community development Officer and the District environment officer to carryout site visits.	0

The LG Health department has issued guidelines on medical waste management	• Evidence that the LG has is- sued guidelines on medical waste management, including guidelines	• Guidelines on waste management were distributed to health units as evidenced from the copies of the guidelines seen at the health units visited. The Health units visited displayed the Waste Management Instructions at the Health Units Notice boards.	4
Maximum 4 points	(e.g. sanitation charts, posters, etc.) for construction of facilities for medical waste disposal2: score 4.		

506 Bushenyi District

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting a	nd execution		
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 district Water department has targeted sub- counties with safe water coverage below the district average in the budget for the current FY: 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 	 From the DWO Summary of the safe water coverage submitted to Chief administrative officer showing the average safe water coverage of the district 93%) and each of the sub counties was presented and also was compared with computed safe water coverage from MWE. Two sub counties were found to be below the district average of safe water coverage and these included Ruhumuro with 72% and Kyamuhunga with 91%. From the AWP 2018/2019 submitted to MWE it was established that a budget of 209,264,934 m was allocated to water projects and out 209,264,934 m, 74,269,200 m was allocated to the sub county below the district safe water coverage which constitutes 35% of the allocation this include rehabilitation of kyamuhunga GFs in Kyamuhunga sub county 	0
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) Maximum 15 points for this performance measure	 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. o If 100 % of the water projects are implemented in the targeted S/Cs: Score 15 o If 80-99%: Score 10 o If 60-79: Score 5 o If below 60 %: Score 0 	 From the DWO progress reports submitted to MWE on 9/7/2018, It was established that 2 sub counties out of 9 Sub-counties were below the average safe water coverage of the district and these included Ruhumuro 72% and Kyamuhunga 91% it was established that out of 2 sub counties that are below safe water coverage, 1 sub county was targeted. It was also established that a total of 9 Projects were implemented and these included rehabilitation of 4 shallow wells and protection of 2 springs as well as rehabilitation of 1 GFS. out of 9 projects 1 was implemented in the subcounties below the average district safe water coverage Which constitutes 11% 	0

The district Water department carries out monthly monitoring of project investments in the sector Maximum 15 points for this performance measure	Evidence that the district Water department has monitored each of WSS facilities at least annually. If more than 95% of the WSS facilities monitored: score 15 80% - 95% of the WSS facilities - monitored: score 10 70 - 79%: score 7 60% - 69% monitored: score 5 50% - 59%: score 3 Less than 50% of WSS facilities monitored: score 0	 From the Annual work plan of 2017/2018 it was established that 9 projects were planned for and also implemented and supervised and monitored in the same financial year. From the Rutooma GFS file, monthly reports on supervised and monitored projects were available and these included; A monitoring and supervision report on the construction of Rutooma GFS dated 20/3/2018 was compiled. A report on monitoring of Rutooma GFS dated on 20/2/2018/6/2018 was compiled. A supervision report of Rutooma GFS dated on 8/1/2018 was compiled. A report on the supervison of 2springs, 4 shallow wells and Kyamuhunga GFS rehabilitation dated on 23/10/2017 was compiled. 	15
The district 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 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 	From the Work plans and reports obtained from the DWO, that were submitted to MWE on 9/7/2018 and, it was established that the all the water facilities were consistent and accurate. These included Kakoni gfs, Kyamuhunga gfs, Rutooma GFS in Ibaare and Bumbaire subcounties, Design of Kigando GFS	5

The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE Maximum 10 for this performance measure	• List of water facility which are consistent in both sector MIS reports and PBS: score 5	From the MIS data established from the MWE and DWO it was established that water facilities in MIS reports were also in PBS report these included Kakoni gfs, Kyamuhunga gfs, Rutooma GFS in Ibaare and Bumbaire subcounties, Design of Kigando GFS	5
Procurement and cont	tract management		
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 Maximum 4 for this performance measure	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	From the DWO a copy of the district consolidated procurement plan was available and the district water office submitted to PDU on 4/6/2018	0
The district has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	• 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	From the DWO, it was established that there was no contract management plan in place for the projects implemented	0

The district has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	• If water and sanitation facilities constructed as per design(s): score 2	From the sampled projects of Rutooma GFS, Kyamuhunga GFS it was established that the construction were done as per designs with Reserve tank, fenced with Barbed wire, collection tank and a tap at the source, the spring source had collection all in good condition and functioning.	2
The district has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	 If contractor handed over all completed WSS facilities: score 2 	From the DWO in Rutooma GFS It was established that hand over reports were compiled by contractors and these included the construction of shallow wells, construction of 2 springs and rehabilitation of kyamuhunga GFS handed over by Buware Investments Itd dated on 8/1/2018 Hand over report by Tedmark Engineering on construction of Rutooma GFS dated on 25/5/2018	2
The district has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	• If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2	From the copies of certificates obtained from the DWO that were certified by the DWO. This included Rutooma GFS payment certificate no. 1 that was certified on 8/1/2018, payment certificate 2 of Rutooma GFS dated on 20/3/2018, payment certificates of 4 shallow well rehabilitation, 2 springs and kyamuhunga GFS rehabilitation dated on 23/10/2017 and all completion reports were attached.	0

The district Water depart- ment has certified and initi- ated 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	 Bushenyi DLG Water department had three certified projects in FY 2017/18. The payments reviewed show that the district endeavoured to timely certify and recommend suppliers for payment. Examples of payments reviewed include: Payment of Shs 37,909,683 to Buwawo Investments Ltd for rehabilitation of 4 shallow wells, 2 springs and Kyamuhunga Gravity Flow scheme. Requisition 19/10/17, certificate 23/10/17 and payment 30/10/17 (11 days). Payment of Shs 76,839,593 to Tedmack Engineering Works Ltd for construction of Rutooma Gravity Flow scheme. Invoice 19/03/18, certificate 20/03/18 and payment 04/04/18 (15 days). Payment of Shs 35,085,866 to Tedmack Engineering Works Ltd for the same project above. Invoice 19/03/18, certificate 20/03/18, certificate 2	3
Financial managemen	t and reporting		
The district Water department has submitted annual reports (including all quarterly reports) in time to the Plan- ning	• 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	From the planning unit it was established that the water sector submitted all the four qurterly reports to planning unit for consolidation beyond the mid-July as indicated below	0
Unit	consolidation: score 5	Quarter Date of submission Reference	
		Quarter 1 30/1/2018 PBS	
Maximum 5 for this		Quarter 2 26/4/2018 PBS	
performance measure		Quarter 3 26/7/2018 PBS	
		Quarter 4 22/8/2018 PBS	

The District 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 	Bushenyi DLG Water Department had internal audit queries in FY 2017/18. Though effort was made to respond the queries, there are some which remained by the close of the year. For example Quarter 1 reported on unaccounted for funds Shs 826,000 and Shs 1,433,600, both totalling 2,259,600. Quarter 2 reported on unsupported payments for purchase of water Shs 2,520,000 and purchase of fuel Shs 270,000, totalling Shs 2,790,000. Quarter 3 reported on unsupported payments totalling Shs 3,341,500.	0
Governance, oversigh The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council Maximum 6 for this performance measure	t, transparency and accountability • 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	There was evidence the LG committee responsible for water met on the 29th/8/2017 under min 3(b)/2017/18 discussed the district water report.which are service delivery issues.	3

The district 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 water sector committee has presented issues that require approval to Council: score 3	There was evidence that the sector committee had presented issues that required approval in a council sitting of 31/5/2018 under min 53/17/2018 on the sector budget and annual work plans.	3
The district Water department has shared information widely to the public to enhance transparency Maximum 6 points for this performance measure	• The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2.	From the district notice board, it was established that quarterly releases of funds were displayed and these included 73,310,811which was displayed on 2/8/2018 but there were no advocacy meetings held to discuss the above releases	0
The district Water department has shared information widely to the public to enhance transparency Maximum 6 points for this performance measure	• All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2	From the sampled projects of Rutooma GFS it was established that the tank was labeled showing the date, contractor, source of funding	2

The district Water department has shared information widely to the public to enhance transparency Maximum 6 points for this performance measure	• Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2	From the district notice board, it was established that all tenders and contract award for the projects implemented were displayed and these included Extension of kakoni GFS, kyamuhunga and rutooma gfs in Ibaare subcounty and the best evaluated bidder was M/S Buwaaro Investiments limited at a cost of 182,061,492 displayed on 6/92018	2
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 contribu- tions) for the current FY: score 1	From the DWO- Application file, it was established that the village application form of Kyeigombe LC1 requested for shallow well on 20/12/2015 Kakanhu Vocational scholl made an application for a bore hole on 21/6/2018	1
Participation of communities in WSS programmes Maximum 3 points for this performance measure	 Water and Sanitation Committees that are functioning evidenced by either: i) collection of O&M funds, ii(carrying out preventive mainte- nance and minor repairs, iii) facility fenced/protected, or iv) they an M&E plan for the previous FY: score 2 Note: One of parameters above is sufficient for the score. 	From the DWO application file, it was established that the community of kyeigombe LC1 paid for user fee evidence by a stanbic banking slip no. 85134 dated 20/12/2018 of 100,000	2
Social and environme	ntal safeguards		

The LG Water department has devised strategies for environmental conservation and management Maximum 4 points for this performance measure	• 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	From the DWO in the water and sanitation committee file, it was established that they were no screening reports for environmental screening for the projects implemented	0
The LG Water department has devised strategies for environmental conservation and management 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	From the DWO in Rutooma GFS file it was established that a report was compiled on Rutooma GFS scheme by Kataate Vincent the environmental officer	1
The LG Water department has devised strategies for environmental conservation and management Maximum 4 points for this performance measure	• Evidence that construction and supervision contracts have clause on environmental protection: score 1	From the DWO, it was established from the contract for the construction of RutoomanGFS, kyemango and kyakahind in the BOQs ITEM No.22,23,21 which indicated backfilling and cleaning the site, construction of live fence and planting of suitable grass	1
The district Water department has promoted gender equity in WSC composition. Maximum 3 points for this performance measure	• 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	From the DWO, it was established that they were reports showing the composition of WSC and for Rutooma GFS it was established that for tap 1 has 3 women out 5 members where the V/C person, treasure, and secretary are women and tap 3 has 3 women and key positions such as vice chairperson, treasurer are women	3

Gender and special needs-sensitive sanitation facilities in public places/	• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3	I t was established that they were no sanitation facilities constructed for the FY 2017-2018	0
RGCs provided by the Water Department. Maximum 3 points for this performance measure			