



Local Government Performance Assessment

Butaleja District

(Vote Code: 557)

Assessment	Scores
Accountability Requirements	67%
Crosscutting Performance Measures	57%
Educational Performance Measures	84%
Health Performance Measures	52%
Water Performance Measures	62%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Annual performance contract			
<p>LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.</p>	<ul style="list-style-type: none"> • From MoFPED's inventory/schedule of LG submissions of performance contracts, check dates of submission and issuance of receipts and: <ul style="list-style-type: none"> o If LG submitted before or by due date, then state 'compliant' o If LG had not submitted or submitted later than the due date, state 'non-compliant' • From the Uganda budget website: www.budget.go.ug, check and compare recorded date therein with date of LG submission to confirm. 	<p>Assessment of indicators related to Planning and Accountability requirements was rather difficult owing to the absence of the District Planner, who was out of station on compassionate leave after he had lost his father. The planning unit is staffed with only one staff, the District however, the ICT Officer and the PAS stood in for the Planner but had difficulties in accessing some of the key documents to facilitate the assessment exercise.</p> <p>Regarding compliance with the PFMAA and LG Budget guidelines that require the LGs to have submitted the Annual Performance Contract by 1st August of the coming financial year, Butaleja district was compliant. The Performance Contract was submitted to MoFPED on the 26th of July and was approved by the PS/ST on the 29th of July which was before the expiry of the deadline of 1st August 2018. This was evidence by the MoFPED <i>Report Submission/Status</i> generated at MoFPED on the 28th of August 2018.</p> <p>Due to the absences of the Planner, the ICT Officer and the PAS failed to provide reliable dates that could be compared with the dates provided by the MoFPED, the submission date provided by the PAS and ICT of 10th August 2018 was disregarded by the Assessor as it had no reference source and it fell outside the dates provided by MoFPED. .</p>	Yes
Supporting Documents for the Budget required as per the PFMA are submitted and available			

<p>LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY by 30th June (LG PPDA Regulations, 2006).</p>	<ul style="list-style-type: none"> • From MoFPED's inventory of LG budget submissions, check whether: <ul style="list-style-type: none"> o The LG budget is accompanied by a Procurement Plan or not. If a LG submission includes a Procurement Plan, the LG is compliant; otherwise it is not compliant. 	<p>Butaleja district was complaint the LG PPDA regulations,2006, that require LGs to submit Budget estimates accompanied with a Procurement Plan.</p> <p>According to the MoFPED <i>Report Submission/Status</i> generated at MoFPED on the 28th of August 2018, Butaleja district submitted budget estimates together with a Procurement Plan on the 26th of July 2018, and was approved on the 29th of July 2018. That submission dates provided by the PAS and the ICT Officer of the 12th September 2018 were disregarded by the Assessor as they were not referenced and fell far outside the dates confirmed by MoFPED, indicated above.</p>	<p>Yes</p>
------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------

Reporting: submission of annual and quarterly budget performance reports

<p>LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)</p>	<p>From MoFPED's official record/inventory of LG submission of annual performance report submitted to MoFPED, check the date MoFPED received the annual performance report:</p> <ul style="list-style-type: none"> • If LG submitted report to MoFPED in time, then it is compliant • If LG submitted late or did not submit, then it is not compliant 	<p>Butaleja district was not Compliant with the LG budget Preparation Guidelines as per PFMA Act 2015, which requires LGs to have submitted the Annual Performance Report for the previous year by the 31st of July.</p> <p>Due to the absence of the Planner from office, the ICT Officer and PAS who stood in for the Planner, could not adduce any evidence (either in form of hard copy of the Q4 report that could have indicated the Report generation date, or an online submission date retrieved via the PBS system) to confirm that the Annual performance report was submitted to MoFPED.</p> <p>The MoFPED <i>Report Submission/Status</i> generated at MoFPED on the 28th of August 2018 did not indicate that Butaleja had submitted the Annual Performance Report by the time the status report was printed (on the 28th of August) implying that Butaleja district could have submitted late after the 28th of August which was after the expiry of the deadline of 31st July.</p>	<p>No</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------

<p>LG has submitted the quarterly budget performance report for all the four quarters of the previous FY by end of the FY; PFMA Act, 2015).</p>	<p>From MoFPED's official record/ inventory of LG submission of quarterly reports submitted to MoFPED, check the date MoFPED received the quarterly performance reports:</p> <ul style="list-style-type: none"> • If LG submitted all four reports to MoFPED of the previous FY by July 31, then it is compliant (timely submission of each quarterly report, is not an accountability requirement, but by end of the FY, all quarterly reports should be available). • If LG submitted late or did not submit at all, then it is not compliant. 	<p>Butaleja district was not Compliant with the LG budget Preparation Guidelines as per PFMA Act 2015, which requires LGs to have submitted the Quarterly Budget Performance Report for the previous year by the 31st of July.</p> <p>Due to the absence of the Planner from office, the ICT Officer and PAS who stood in for the Planner, could not adduce any evidence (either in form of hard copy of the Q4 report that could have indicated the Report generation date, or an online submission date retrieved via the PBS system) to confirm that the Annual performance report was submitted to MoFPED.</p> <p>The MoFPED <i>Report Submission/Status</i> generated at MoFPED on the 28th of August 2018 did not indicate that Butaleja had submitted the Annual Budget Performance Report by the time the status report was printed (on the 28th of August) implying that Butaleja district submitted late after the 28th of August which was after the expiry of the deadline of 31st July.</p>	<p>No</p>
<p>Audit</p>			

<p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General and the Auditor General's findings for the previous financial year by end of February (PFMA s. 11 2g). This statement includes actions against all findings where the Internal Auditor and the Auditor General recommended the Accounting Officer to take action in lines with applicable laws.</p>	<p>From MoFPED's Inventory/record of LG submissions of statements entitled "Actions to Address Internal Auditor General's findings",</p> <p>Check:</p> <ul style="list-style-type: none"> • If LG submitted a 'Response' (and provide details), then it is compliant • If LG did not submit a 'response', then it is non-compliant • If there is a response for all –LG is compliant • If there are partial or not all issues responded to – LG is not compliant. 	<p>The District submitted the status of implementation of the auditor general's recommendations for the previous financial year</p>	<p>Yes</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.</p>		<p>The LG is compliant as it had an unqualified opinion for the FY 2017/18 as per the report of the Auditor General.</p>	<p>Yes</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a district/ municipality has:</p> <ul style="list-style-type: none"> • A functional Physical Planning Committee in place that considers new investments on time: score 1. 	<p>In general terms, Butaleja district Physical Development Planning Unit is grossly underfunded and therefore cannot play its rightful mandated especially developing physical development plans for the new growth areas and for the district at large. For example in the Previous FY, physical development Planning was allocated a mere 5 million, while in the current FY its only about 8 million shillings.</p> <p>Butaleja district has a functioning Physical Development Planning Committee that considers new investments on time.</p> <p>The 10 member committee was appointed by the CAO on 3/07/2017 as per appointment letters referenced thus CR/156/16. Members of the Physical Development Planning Committee comprise of :</p> <ul style="list-style-type: none"> - The Chief Administrative Officer (Chairperson) - Physical Planner (Secretary) - Natural Resources Officer - Town Clerk Busolwe T/C - Town Clerk Butaleja T/C - Town Clerk Butaleja T/C - District Community Dev. Officer - District Engineer - Water Engineer <p>The Committee met 4 times during the previous FY to among other issues discussed, appraised investments for both Government and private investors. The committee met on the following dates:</p> <p>Meeting of 13/09/2017 which reviewed the implementation level of Nabiganda detailed plan as per minute number 06/09/2017. Discussed developments in the district as per minute number 5/09/2017.</p> <p>Meeting of 9/11/17 discussed building plans as per minute number 06/11/2017 and also discussed the Action plans for Bugosa Town Council.</p>	<p>1</p>

		<p>Meeting of 15/01/2018, discussed the roles of Town Agents and Law Enforcement Officers including the need to regularly inspect projects.</p> <p>Meeting of the 17/05/ 2018, discussed issues including review of building plans including approving a residential house for Isogoli Henry at Butaleja sub county. The plan was approved within 30 days. Submitted on 19/04/18 and approved 17/05/201.</p>	
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that district/ MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD score 1. 	<p>There was no evidence provided by the Physical Planner to confirm that the district submitted any copies of the Physical Planning Committee meeting minutes. Indeed when the Assessor checked the minutes registration book at the MoLHUD on the 29th of July 2018, there was no record of Butaleja having submitted any minutes.</p> <p>The Assessor reiterated the need for the LGs to share minutes of the meetings of the Physical Planning committee with the MoLHUD as it is a requirement. However, the Assessor also appreciated the fact that there was limited budgetary allocation to the Physical development unit during the previous financial year .</p>	<p>0</p>

<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> • All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0 	<p>Butaleja district has not yet developed a Physical Development Plan and therefore the infrastructure investments are not appraised in consistency with a district wide physical development plan. However, investments that are considered by the Town Councils that have valid Physical Development Plans, the approved plans are consistent with the physical development plans; for example, investments in Nabiganda Town Council. However, investments outside the town councils are not appraised against any Physical Development plan but rather the suitability to the environment and location.</p>	<p>0</p>
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> • Action area plan prepared for the previous FY: score 1 or else 0 	<p>No Action Area Plans were developed for new Growth Areas during the previous financial year.</p>	<p>0</p>

<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2. 	<p>While a Budget Conference was held on the 20/10/2017, and a conference report was produced, there was no trace of the minutes of the Budget Conference. Too, the report was so summarised that the discussions (if any) of the investment priorities in the current FY could not be traced in the report. Accordingly there was no concrete evidence seen by the Assessor to confirm that the priorities were discussed at the Budget Conference.</p>	<p>0</p>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------

<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If differences appear, a justification has to be provided and evidence provided that it was approved by the Council. Score 1. 	<p>Investments in the current work plan were derived from the 5 (five year) Development Plan (DDP). An extract of the capital investments from the DDP was made and was compared with the Capital investments in the AWP and the projects were seen to be the same as indicated in the summarised analysis below:</p> <p>DDP projects in the Education sector (page 12 of the DDP)</p> <ul style="list-style-type: none"> - Construction of 64 Classrooms - Construction of 40-4 stance Latrines - Installation of 60 lightening Arrestors -Procurement of 1880 desks <p>Page 64 of the AWP 2018/19 details the same projects at different sites including construction of 4 classrooms. The only exception was the construction of a seed school at Nakwasi which was a central government directive through the ministry of Education and the re-roofing of 1 classroom block at Butalejja Secondary Schools after the roof was blown off by a windstorm.</p> <p>DDP projects in the Health sector (page 12 of the DDP)</p> <ul style="list-style-type: none"> - Construction of 36 staff houses - Construction of 10 OPD blocks - Procurement of Printer and Scanner <p>The same projects are detailed on page 65 of the annual Work Plan</p>	
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--

<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> • Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2. 	<p>Project Profiles were developed for all infrastructure projects during the DDP development process and were attached to the DDP on pages 212-236, there was evidence provided to confirm that the profiles were discussed at any TPC meeting held on the 12/02/2018 under minute number 04/12/2017. However, a review of the file for project Profiles for the 2018/19 investments, available in the district Planner's office only contained or projects woks (road maintenance, drilling and construction of boreholes and fore latrine construction. The profiles for the health sector projects had not yet been printed and filed. The Possessor urged the ICT officer to ensure that the profiles for the health sector projects are also printed and filed accordingly.</p>	<p>2</p>
<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> • Annual statistical abstract, with gender-disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum score 1. 	<p>Statistical abstracts were compiled with gender dis-aggregated data and are contained in the Statistical Abstracts booklet available in the district Planner's office. Evidence was adduced to the Assessor to confirm that the abstracts were presented to the TPC meeting that sat on 2/07/2017 and discussed under minute number 04/10/2017 and were used for resource allocation and decision making.</p>	<p>1</p>
<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance</p>	<ul style="list-style-type: none"> • 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 	<p>Except for the fencing of the DHO's office that were were not able to ascertain that it had been provided for in the approved work plan the rest of the projects as detailed below were in the approved works plan and Budget estimates.</p> <p>i. Reviewed the construction of a 2 stance lined pit latrine with a bathroom at Namulo H/C II contracted by Bangoma Investments Ltd. Budget was shs. 15,000,000 (Pg 15 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract price was shs.11,455,624 and amount</p>	<p>2</p>

measure.

- paid is shs.10,309,365 and balance is shs. 1,146,259.
- ii. Repair of DHO's Office fence by DAMRO Investments Ltd. contracted sum was shs. 6,870,420 and paid shs. 6,467,049 balance was shs. 340,371. NOT SEEN IN THE DISTRICT BUDGET
 - iii. Construction of a 2 in on staff housing unit at Bunawale H/C by Muweko Enterprise Ltd. Budget was shs. 89,000,000 (Pg 16 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum is shs. 87,575,618 and amount paid was shs. 77,179,149 the balance outstanding is shs. 10,396,469
 - iv. Construction of a generator cage DHO's Office by Namudira Multi- Net Ltd was budgeted at shs. 8,301,000 (Pg 16 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contracted at shs. 8,198,923 and paid shs. 7,368,156 balance outstanding is shs. 830,767
 - v. 2 Classroom block with office constructed at Bugosa P/S budgeted at shs. 61,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract price is 60,137,343 , paid 55,786,481 balance is 4,350,862
 - vi. 2 classrooms with office at Bunghaji P/S Budget is shs. 61,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 59,411,909 paid 55,808,741 balance 3,603,168
 - vii. 2 classrooms with office at Kapisa P/S budgeted at shs. 61,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum is 61,000,000 and amount paid is 55,961,205 balance is 5,038,795
 - viii. 2 classrooms with office constructed at Bubuhe P/S at a budget of 46,080,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 60,770,077 paid 54,480,320 balance is 6,289,757
 - ix. 8 classrooms with office constructed at Mulagi P/S budgeted at shs. 61,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18).contract sum 60,711,000 paid 56,021,709 balance 4,689,291
 - x. Completion and retention paid for the classrooms at Mulanga budgeted at shs. 9,133,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18).
 - xi. Construction of 2 stance pit latrine at Wangule P/S 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 6,991,712 amount paid 6,583,334 balance 408,378
 - xii. Construction of 2 stance pit latrine at Dube Rock P/S 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 7,000,000 amount paid 6,598,895 balance 401,105
 - xiii. Construction of 2 stance pit latrine at Bukedi College 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 7,000,000 paid 6,251,002 balance 748,998
 - xiv. Construction of 2 stance pit latrine at Bunawale P/S 7,000,000 (Pg 20 off the Butaleja District Local

Government Fiscal Budget FY 2017/18). Contract sum 7,000,000 paid 6,260,259 balance 739,741

xv. Construction of 2 stance pit latrine at Busaba Islamic P/S 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 7,000,000 amount paid 6,637,579 balance 362,421

xvi. Construction of 3 stance pit latrine at Magambo P/S 10,500,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract price 10,441,230 paid 9,828,384 balance 612,846

xvii. Construction of 2 stance pit latrine at Lwamboga P/S 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 7,000,000 paid 6,260,259 balance 739,741

xviii. 16 boreholes drilled in various areas shs. 347,288,000 (Pg 26 off the Butaleja District Local Government Fiscal Budget FY 2017/18). East Africa Boreholes Ltd drilled 8 boreholes at a cost of shs. 169,072,000 and paid shs. 150,929,502. Balance is shs. 18,142,498 . Icon Projects contracted the construction of the other 8 boreholes at a contract sum of shs. 168,152,000. Voucher of shs. 152,852,895 was seen dated 19/06/2018

xix. Water quality testing for 50 water sources at shs. 6,374,000 (Pg 26 off the Butaleja District Local Government Fiscal Budget FY 2017/18).

xx. 25 boreholes assed and rehabilitated at shs. 98,450,000 (Pg 26 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Tebex Superior Services contracted at shs.96,015,000 and paid 90,254,100 balance 5,760,900

<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. o 100%: score 4 o 80-99%: score 2 o Below 80%: 0 	<p>Obtained the projects monitoring report and this was matched with payments as per the draft financial statements and noted that majority of the investment projects were completed as per work plan by the end of the financial year. All these projects had the retention fees outstanding. These projects are between 80-99% achievement and include:</p> <ul style="list-style-type: none"> i. Reviewed the construction of a 2 stance lined pit latrine with a bathroom at Namulo H/C II contracted by Bangoma Investments Ltd. Budget was shs. 15,000,000 (Pg 15 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract price was shs.11,455,624 and amount paid is shs.10,309,365 and balance is shs. 1,146,259. ii. 25 boreholes assed and rehabilitated at shs. 98,450,000 (Pg 26 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Tebex Superior Services contracted at shs.96,015,000 and paid 90,254,100 balance 5,760,900 iii. Construction of 2 stance pit latrine at Bunawale P/S 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 7,000,000 paid 6,260,259 balance 739,741 iv. Construction of 2 stance pit latrine at Busaba Islamic P/S 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 7,000,000 amount paid 6,637,579 balance 362,421 v. Construction of 3 stance pit latrine at Magambo P/S 10,500,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract price 10,441,230 paid 9,828,384 balance 612,846 vi. Construction of 2 stance pit latrine at Lwamboga P/S 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 7,000,000 paid 6,260,259 balance 739,741 	<p>2</p>
<p>The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects during the previous FY</p>	<ul style="list-style-type: none"> • Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2 	<p>A review of information contained in the Annual budget performance report (as part of the Q4 report submitted to MoFPED and the Annual Final Accounts confirmed that the projects were completed within the approved budgets.</p> <p>Projects looked at were:</p> <ul style="list-style-type: none"> i. Construction of a 2 in on staff housing unit at Bunawale H/C by Muweco Enterprise Ltd. Budget was shs. 89,000,000 (Pg 16 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum is shs. 87,575,618 and amount paid was shs. 77,179,149 the balance outstanding is shs. 10,396,469 	<p>2</p>

Maximum 4 points on this Performance Measure.

- ii. Construction of a generator cage DHO's Office by Namudira Multi- Net Ltd was budgeted at shs. 8,301,000 (Pg 16 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contracted at shs. 8,198,923 and paid shs. 7,368,156 balance outstanding is shs. 830,767
- iii. 2 Classroom block with office constructed at Bugosa P/S budgeted at shs. 61,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract price is 60,137,343 , paid 55,786,481 balance is 4,350,862
- iv. 2 classrooms with office at Bunghaji P/S Budget is shs. 61,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 59,411,909 paid 55,808,741 balance 3,603,168
- v. 2 classrooms with office at Kapisa P/S budgeted at shs. 61,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum is 61,000,000 and amount paid is 55,961,205 balance is 5,038,795
- vi. 2 classrooms with office constructed at Bubuhe P/S at a budget of 46,080,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 60,770,077 paid 54,480,320 balance is 6,289,757
- vii. 8 classrooms with office constructed at Mulagi P/S budgeted at shs. 61,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18).contract sum 60,711,000 paid 56,021,709 balance 4,689,291
- viii. Completion and retention paid for the classrooms at Mulanga budgeted at shs. 9,133,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18).
- ix. Construction of 2 stance pit latrine at Wangule P/S 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 6,991,712 amount paid 6,583,334 balance 408,378
- x. Construction of 2 stance pit latrine at Dube Rock P/S 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 7,000,000 amount paid 6,598,895 balance 401,105
- xi. Construction of 2 stance pit latrine at Bukedi College 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 7,000,000 paid 6,251,002 balance 748,998
- xii. Construction of 2 stance pit latrine at Bunawale P/S 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 7,000,000 paid 6,260,259 balance 739,741
- xiii. Construction of 2 stance pit latrine at Busaba Islamic

		<p>P/S 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 7,000,000 amount paid 6,637,579 balance 362,421</p> <p>xiv. Construction of 3 stance pit latrine at Magambo P/S 10,500,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract price 10,441,230 paid 9,828,384 balance 612,846</p> <p>xv. Construction of 2 stance pit latrine at Lwamboga P/S 7,000,000 (Pg 20 off the Butaleja District Local Government Fiscal Budget FY 2017/18). Contract sum 7,000,000 paid 6,260,259 balance 739,741</p> <p>It is clearly demonstrated that the above projects were completed within the budget limits.</p>	
<p>The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that the LG has budgeted and spent at least 80% of the O&M budget for infrastructure in the previous FY: score 2 	<p>The Assessor together with the ICT Officer and the PAS reviewed the Annual work plans and budgets to ascertain whether any budgetary allocations were made for Operations and Maintenance for the infrastructure projects in the sectors of water, health and education. In addition, consultations were made with the finance team to check the final accounts and ascertain whether any payments were made for O&M. In all cases, there was no trace of any planned expenditure for O&M.</p> <p>The only trace of O&M expenditure was to do with the renovation of Nalugujo Primary school that was blown off by a wind storm. In any case the force account mechanism was used with approval from DEC and the Ministry of Finance.</p>	<p>0</p>
<p>Human Resource Management</p>			

<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that the LG has filled all HoDs positions substantively: score 3 	<p>The District approved structure (approved by MoPS on 7th June 2017 reference ARC 135/306/01), provides for 10 departments. Of these only 3 are substantively appointed while the 7 are in acting positions. The substantively filled HoDs position are: Deputy CAO; District Health Officer and District Education Officer. Below is presentation of details of 3 of the 7 HoDs in acting positions:</p> <p>a) Hyuha Richard: Community Based Services; substantively appointed as CDO on 26th 08. 2008 under DSC minute no. 40(Xvi)/2008. He was on 16th July 2018 assigned duties of the DCDO by CAO</p> <p>b) Were Lamula: Natural Resources; substantively appointed as senior environment officer on 13th 5. 2015 under DSC minute no. 27/2015, 7 (i). she was on 8th/06/2018 assigned duties of NRO.</p> <p>c) Haumba Isaac: CFO; substantively appointed as Senior Finance Officer under DSC minute No: 45/2009 (iii). He was on 2nd July 2018 assigned duties of CFO by CAO.</p> <p>The reason provided by the District for failure to fill the position was that they have on two occasions advertised and failed to attract qualified candidates. However the accounting officer promised to use provisions within the laws for example accelerated promotion to fill the positions.</p>	<p>0</p>
<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2 	<p>All HoDs were appraised by the CAO (with exception the Trade and Industry which has been operationalized in 2018/19). Below is the presentation of appraisal status of 5 of the 9 appraised HoDs.</p> <p>a) Namukose Minisa Kirya: community based services; performance report for period signed on 24th 07 2018 by CAO seen on file.</p> <p>b) Haumba Isaac: Chief Finance Officer; performance report for period signed on 24th 07 2018 by CAO seen on file.</p> <p>c) Moga Hamis: Works; performance report for period signed on 28th 08 2018 by CAO seen on file.</p> <p>d) Dugo Amina: production; performance report for period signed 24th 07 2018 by CAO seen on file.</p> <p>e) Kalyebi Phillip: District Education Officer; performance report for period signed 7th 07 2018 by CAO seen on file.</p>	<p>2</p>

<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that 100 % of staff submitted for recruitment have been considered: score 2 	<p>33 vacancies were submitted by the CAO to DSC for recruitment in 2017/18. Additionally 19 vacancies were advertised by the Central Government for recruitment of health workers in the District. The DSC met and considered 33 of the 52 submission of vacancies (63%) under the following meetings:</p> <p>a) Meeting of 14,15,19,20 21st Feb 2018 and 7,9,12,13,14,15 March 2018 under DSC minute no: 29/2018</p> <p>b) Meeting of 9,10,11,12 April 2018 under DSC minute no: 30/2018</p> <p>18 vacancies (under submission dated 13th Feb 2018 ref no. CR/213/1 – all Education staff) and 1 vacancy of Senior Assistant Secretary (34%) were not considered.</p>	<p>2</p>
<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that 100 % of positions submitted for confirmation have been considered: score 1 	<p>Only one submission for 46 staff (all teachers) was made on 1st June 2018, none of the 46 staff submitted (0) has been confirmed. This was attributed to late submission (submission made in June close to end of the FY). Additionally the DSC lacks quorum (the term of the previous commission expired on 30th June 2018)</p> <p>The assessor however notes that delays in handling submission for confirmation is becoming a chronic problem in the District for example a submission for confirmation of 170 staff for was made on 10th May 2016 and was only handled in 2017/18.</p>	<p>0</p>

<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that 100 % of positions submitted for disciplinary actions have been considered: score 1 	<p>15 cases of disciplinary actions were submitted to the DSC in 2017/18 on 21st Feb 2018 letter ref nos. CR/115/1 and on 6th Apr 2018. All the cases (100%) were considered by the DSC on 11, 12, 13 April 2018 under DSC minute no: 31/2018 a (ii). The resolution of the DSC on those cases included; reinstating officers with severe reprimand and others to be removed from service on guidance of the Solicitor General</p>	<p>1</p>
<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3 	<p>The District recruited 22 new staff in 2017/18 in two tranches i.e. 7th May 2018, 19th March 2018. All the 22 new staff (100%) accessed the payroll within two months after appointment. Below is the presentation for 5 of the 22 new staff recruited.</p> <p>a) Kiirya Twaha appointed on 19th March 2018 and accessed the payroll in May 2018</p> <p>b) Demba David appointed on 19th March 2018 and accessed the payroll in May 2018</p> <p>c) Waholi Deric appointed on 19th March 2018 and accessed the payroll May 2018</p> <p>d) Wasswa Joseph appointed on 7th May 2018 and accessed the payroll in June 2018</p> <p>e) Tino Irene appointed on 7th May 2018 and accessed the payroll in June 2018</p>	<p>3</p>

<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2 	<p>From review of the pensioner's list, it was found out that 18 staff were due for retirement in 2017/18. Of the 18 retiring staff only one person (5%) Odongo George accessed the payroll within two months after retirement. The reason provided for this was that he had prepared his documentation well before retirement thus by the time he retired all his documentations were in order. This implies that if the retiring staff can start preparing their documentations early it possible for them to access the pension payroll on time. Below is the presentation of status of accessing the payroll for five retiring staff:</p> <p>a) Kasule Nabwire Margret due date of retirement 15th/9/2017, accessed the pension payroll in June 2018</p> <p>b) Naddunga Mera Eva due date of retirement 23rd/8/2017, officer has not accessed the pension payroll (file not yet verified by MoES)</p> <p>c) Mwima John due date of retirement 1st/9/2017, officer has not accessed the pension payroll (calculation for pension has just been finalized at MoPS)</p> <p>d) Mwima Musoboka Wilber due date of retirement 25/7/2017 officer has not accessed the pension payroll.</p> <p>e) Odongo George due date of retirement 18/5/2018, accessed the pension payroll in June 2018</p>	<p>0</p>
<p>Revenue Mobilization</p>			
<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> If increase in OSR (excluding one/off, e.g. sale of assets) from previous FY but one to previous FY is more than 10 %: score 4. If the increase is from 5% -10 %: score 2. If the increase is less than 5 %: score 0. 	<p>Total of OSR for FY 2016/2017 Shs. 120,410,820</p> <p>Total of OSR for FY 2017/2018 Shs. 128,990,144</p> <p>The increase in OSR was therefore Shs. 8,579,324</p> <p>Percentage decrease is therefore. 7.1%</p> <p>Extracted the information from the draft financial statements for the FY 2017/2018 and the comparative figures are picked from the annual financial statements for the FY 2016/17</p>	<p>2</p>

<p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10 %: then score 2. If more than +/- 10 %: Score 0. 	<p>Total Local Revenue Planned/Budgeted for FY 2017/2018 Shs. 297,312,000</p> <p>Total Local Revenue collected during FY 2017/2018 Shs. 128,990,144</p> <p>The revenue collection ratio is thus 43.3 %</p> <p>Under the PBS all revenues of lower local governments are aggregated which meant that the District had a budget of shs. 297,312,000 and the revised budget which the District collects on its own is shs. 142,817,000</p>	<p>0</p>
<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2 	<p>Local Revenue collections subjected to sharing with LLGs Shs. 39,870,864 for FY 2017/18</p> <p>Amount of local revenue remitted to LLGs in FY 2017/18 Shs. 4,000,000</p> <p>Status of compliance: 10%</p> <p>From the collection of the LST the District was to send shs.25,916,061 which represents 65% of the mandatory share. However, the District remitted shs. 4,000,000 which is 10% of the amount collected.</p> <p>Transfers were made to Busabi S/C shs. 1,000,000, Busolwe T/C shs. 1,500,000 and shs. 1,500,000 as per the transfers made on the 11/12/2017 and evidenced by the receipts from the lower local governments.</p>	<p>0</p>
<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the total Council expenditures on allowances and emoluments- (including from all sources) is not higher than 20% of the OSR collected in the previous FY: score 2 	<p>Total of OSR for FY 2017/2018 Shs. 128,990,144</p> <p>Total of OSR for FY 2016/17 was shs. 120,410,820</p> <p>Payment out of the OSR is shs. 56,400,000</p> <p>The percentage is UGX 46.8% which is ABOVE the threshold of 20% and thus the scores maximum points on the indicator.</p> <p>Shs. 56,400,000 was paid out as allowances to council and committee meetings and emoluments were shs. 64,800,000 for the financial year. The emoluments comes from the centre and the allowances are paid out of the local revenue</p>	<p>0</p>
<p>Procurement and contract management</p>			

<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2 	<ul style="list-style-type: none"> • The District has a Substantive Senior procurement officer (Hibombo Kainan) appointed on 20th July 2018, under DSC minute No: 32/2010 (b). • Additionally, the District has a procurement officer (Hatemere Sarah) appointed on 20th July 2016 under DSC minute No: 17/2016 (1). 	<p>2</p>
---------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------

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

Maximum 4 points on this performance measure.

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

TEC produced and submitted reports to the Contracts Committee.

For example

(a) Technical evaluation Committee meeting was held 22/11/2017 (Ref; BUTA 557/WRKS/2017-2018/00007): Construction of 2 classroom block Bubuhe P/S Produced report 22/11/2017 submitted to contracts committee. The report

Recommended that M/S KAMUYODISA INVESTMENTS LTD be awarded contract at UGX 60,770,077

(b) Technical evaluation Committee meeting was held 22/11/2017 (Ref; BUTA 557/WRKS/2017-2018/00008): Construction of a 2 in 1 staff house at Bunawale HC II complete bore holes Produced report 22/11/2017 submitted to contracts committee. The report

Recommended that M/S MUWEKO ENTERPRIZES LTD be awarded contract at UGX 87,575,618.

(c) Technical evaluation Committee meeting was held 22/11/2017 (Ref; BUTA 557/WRKS/2017-2018/00019/1): Siting, Drilling, installation of 8 bore holes Lot1 Produced report 22/11/2017 submitted to contracts committee. The report

Recommended that M/S EAST AFRICA BORE HOLES LTD be awarded contract at UGX 169,072,000

(d) Technical evaluation Committee meeting was held 22/11/2017 (Ref; BUTA 557/WRKS/2017-2018/00005): Construction of a 2 classroom block, with an office and sore at Kapisa P/S. Produced report 22/11/2017 submitted to contracts committee. The report

Recommended that M/S NATIVE INVESTMENTS LTD be awarded contract at UGX 61,000.000.

<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the Contracts Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1 	<p>Contracts Committee considered recommendations of the TEC.</p> <p>For example</p> <ul style="list-style-type: none"> • (Ref; BUTA 557/WRKS/2017-2018/00007): Construction of 2 classroom block Bubuhe P/S Report of the contracts committee seating on 20/12/2017, minute no DCCC/35/12/2017(29) as per TEC recommendation, Contracts committee looked at the evaluation report and considered its recommendation that that M/S KAMUYODISA INVESTMENTS LTD be awarded contract at UGX 60,770,077 • (Ref; BUTA 557/WRKS/2017-2018/00008): Construction of a 2 in 1 staff house at Bunawale HC II -Report of the contracts committee seating on 20/12/2017, minute no DCCC/35/12/2017(25) as per TEC recommendation, Contracts committee looked at the evaluation report and considered its recommendation that M/S MUWEKO ENTERPRIZES LTD be awarded contract at UGX 87,575,618. • (Ref; BUTA 557/WRKS/2017-2018/00019/1): Siting, Drilling, installation of 8 bore holes Lot1. Report of the contracts committee seating on 20/12/2017, minute no DCCC/35/12/2017(35) as per TEC recommendation, Contracts committee looked at the evaluation report and considered its recommendation Recommended that M/S EAST AFRICA BORE HOLES LTD be awarded contract at UGX 169,072,000 • (Ref; BUTA 557/WRKS/2017-2018/00005): Construction of a 2 classroom block., with an office and sore at Kapisa P/S -Report of the contracts committee seating on 20/12/2017, minute no DCCC/35/12/2017(28) as per TEC recommendation, Contracts committee looked at the evaluation report and considered its recommendation that M/S NATIVE INVESTMENTS LTD be awarded contract at UGX 61,000.000. 	<p>1</p>
---------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------

The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.

Maximum 2 points on this performance measure.

• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for

the previous FY:
score 2

The procurement and Disposal Plan for 2018/2019 year covers all infrastructure projects in the approved (approval date 24/05/2018) annual work plan and budget. For example

- Drilling, testing pumping and Installation of 15 bore holes and construction of 2 water wells.
- Construction of 2 classroom core block with Office and s at Buhabeba P/S
- Construction of a 2 staff housing UNIT AND 2 STANCE LINED PIT LATRINE AND BATH ROOM in Busabi HCIII
- .Construction of 2 classroom Block with office at Namutima P/S
- Construction of a 2 classroom Block with office and store at Doho P/S .

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

- Construction of 2 classroom block Bubuhe P/S (Ref; BUTA 557/WRKS/2017-2018/00007) at UGX 60,770,077
- Construction of a 2 in 1 staff house at Bunawale HC II (Ref; BUTA 557/WRKS/2017-2018/00008): at UGX 87,575,618.
- Siting, Drilling, installation of 8 bore holes Lot1 (Ref; BUTA 557/WRKS/2017-2018/00019/1): at UGX 169,072,000
- Construction of a 2 classroom block., with an office and store at Kapisa P/S (Ref; BUTA 557/WRKS/2017-2018/00005) at UGX 61,000.000.
- Construction of a 2 classroom block, with an office and store at Bunchaji P/S (Ref; BUTA 557/WRKS/2017-2018/00006) at UGX 59,411,909.

<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/ infrastructure by August 30: score 2 	<p>For FY 2018/2019, By August 30 2018, all bid documents for all investment/infrastructure were prepared above 80%. The Approval date was 12/June/2018 These include:</p> <ul style="list-style-type: none"> • Drilling, testing pumping and Installation of 15 bore holes and construction of 2 water wells. • Construction of 2 classroom tore block with Office and s at Buhabeba P/S • Construction of a 2 staff housing UNIT AND 2 STANCE LINED PIT LATRINE AND BATH ROOM in Busabi HCIII • .Construction of 2 classroom Block with office at Namutima P/S • Construction of a 2 classroom Block with office and store at Doho P/S . 	<p>2</p>
<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2 	<p>For FY 2017/2018, contract register fully updated (2017-2018).such as</p> <ul style="list-style-type: none"> • Construction of 2 classroom block Bubuhe P/S (Ref; BUTA 557/WRKS/2017-2018/00007) at UGX 60,770,077 • Construction of a 2 in 1 staff house at Bunawale HC II (Ref; BUTA 557/WRKS/2017-2018/00008): at UGX 87,575,618. • Siting, Drilling, installation of 8 bore holes Lot1 (Ref; BUTA 557/WRKS/2017-2018/00019/1): at UGX 169,072,000 • Construction of a 2 classroom block., with an office and store at Kapisa P/S (Ref; BUTA 557/WRKS/2017-2018/00005) at UGX 61,000.000. • Construction of a 2 classroom block, with an office and store at Bunghaji P/S (Ref; BUTA 557/WRKS/2017-2018/00006) at UGX 59,411,909 	<p>2</p>

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

Maximum 6 points on this performance measure.

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

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

- Construction of 2 classroom block Bubuhe P/S (Ref; BUTA 557/WRKS/2017-2018/00007) at UGX 60,770,077 (Open domestic bidding New Vision, Monday November 6, 2017)
- Construction of a 2 in 1 staff house at Bunawale HC II (Ref; BUTA 557/WRKS/2017-2018/00008): at UGX 87,575,618. Open domestic bidding New Vision, Monday November 6, 2017)
- Siting, Drilling, installation of 8 bore holes Lot1 (Ref; BUTA 557/WRKS/2017-2018/00019/1): at UGX 169,072,000 Open domestic bidding New Vision, Monday November 6, 2017)
- Construction of a 2 classroom block., with an office and store at Kapisa P/S (Ref; BUTA 557/WRKS/2017-2018/00005) at UGX 61,000.000. (Open domestic bidding New Vision, Monday November 6, 2017)
- Construction of a 2 classroom block, with an office and store at Bunghaji P/S (Ref; BUTA 557/WRKS/2017-2018/00006) at UGX 59,411,909. Open domestic bidding New Vision, Monday November 6, 2017)
- Construction of a 2 stance lined Latrine under DDEG (Education Dept) at Bunawale P/S (Ref; BUTA 557/WRKS/2017-2018/00009) at UGX 7,000,000. (Selective bidding, invitation dated 1st November 2017)

<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2 	<p>Projects implemented in the FY 2017/18 were appropriately certified with interim and completion certificates as per technical supervision. For example Completion and interim certificates were available.</p> <p>For example</p> <ul style="list-style-type: none"> • Construction of 2 classroom block with office and store Bugosa P/S (Ref; BUTA 557/WRKS/2017-2018/00003) INTERIM CERTIFICATE DATED 13/04/2018 • Siting, Drilling, installation of 8 bore holes Lot1 (Ref; BUTA 557/WRKS/2017-2018/00019/1) INTERIM CERTIFICATE DATED 9/06/2018 • Construction of a 2 classroom block., with an office and store at Kapisa P/S (Ref; BUTA 557/WRKS/2017-2018/00005) INTERIM CERTIFICATE DATED 17/04/2018 • Construction of a 2 classroom block, with an office and store at Mulagi P/S (Ref; BUTA 557/WRKS/2017-2018/00004) INTERIM CERTIFICATE DATED 13/06/2018 • Construction of a 2 stance lined Latrine under DDEG (Education Dept) at Bunawale P/S (Ref; BUTA 557/WRKS/2017-2018/00009) INTERIM CERTIFICATE DATED 10/04/2018 	<p>2</p>
<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2 	<ul style="list-style-type: none"> • The FY 2018/2019 project site boards for all projects are not yet erected. • But even the ones that were erected previous financial year are not clearly labelled. They miss information on contract value and expected duration. 	<p>0</p>
<p>Financial management</p>			

<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4 	<table border="1"> <thead> <tr> <th>Month</th> <th>Status</th> <th>Unexplained difference</th> </tr> </thead> <tbody> <tr> <td>December 2017</td> <td>Done</td> <td>(7,692,177)</td> </tr> <tr> <td>January 2018</td> <td>Done</td> <td>(7,959,077)</td> </tr> <tr> <td>February 2018</td> <td>Done</td> <td>(745,800)</td> </tr> <tr> <td>March 2018</td> <td>Done</td> <td>(575,800)</td> </tr> <tr> <td>April 2018</td> <td>Done</td> <td>(186,000)</td> </tr> <tr> <td>May 2018</td> <td>Done</td> <td>(186,000)</td> </tr> <tr> <td>June 2018</td> <td>Done</td> <td>20,000</td> </tr> </tbody> </table> <p>Requested for Bank reconciliations and noted that they were not up to date. As seen above the reconciliations were done and they have unexplained differences.</p>	Month	Status	Unexplained difference	December 2017	Done	(7,692,177)	January 2018	Done	(7,959,077)	February 2018	Done	(745,800)	March 2018	Done	(575,800)	April 2018	Done	(186,000)	May 2018	Done	(186,000)	June 2018	Done	20,000	0
Month	Status	Unexplained difference																									
December 2017	Done	(7,692,177)																									
January 2018	Done	(7,959,077)																									
February 2018	Done	(745,800)																									
March 2018	Done	(575,800)																									
April 2018	Done	(186,000)																									
May 2018	Done	(186,000)																									
June 2018	Done	20,000																									
<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> If the LG makes timely payment of suppliers during the previous FY <ul style="list-style-type: none"> – no overdue bills (e.g. procurement bills) of over 2 months: score 2. 	<p>The Local government timely made payment to suppliers and contractors and there were no overdue bills seen. Below are the examples:</p> <ol style="list-style-type: none"> Reviewed payment to USRA General Enterprises for the supply of stationery to the Health Department. Requisition was done on 10/05/2018 by the Secretary to DHO who recommended for payment on the same date. CFO approved payment on 22/05/2018 and CAO authorised on 11/06/2018. Payment was done on 22/06/2018. Reviewed the supply of fuel by Owor Investments Ltd. to the Health department. DHO sanctioned the payment through a request made on 28/03/2018. CFO approved the payment on 28/03/2017 and authorised payment on 28/03/2017 and payment was done on 10/04/2017. Reviewed requisition for payment submitted by Ideal Merchant Property Holdings Ltd. that was initiated by the DEO on 25/04/2018, recommended by CFO on the same date and approved by the CAO, payment was done on 30/04/2018 Reviewed request for payment done by Lodina Investments (U) Ltd. for works at Busoga PS submitted on 09/04/2018 and DEO forwarded on 20/04/2018 CA approved payment on 30/04/2018 and payment was done on 09/05/2018 Request for payment made by Petex (U) Ltd. made on 28/05/2018 for the construction of 2 classroom with offices at Mulagi Primary school at a cost of shs.40,165,000. DEO 	2																								

forwarded for payment on the same date and CAO approved on the 20/06/2018. Payment was done on 25/06/2018

vi. Reviewed request for payment submitted by Native Investment Ltd. for construction of 2 classroom block with an office and store at Kapisa primary school at a cost of shs. 31,132,182 the DEO recommended for payment SHS. 28,758,169. CAO approved payment on 22/06/2018 and payment was done 25/06/2018.

vii. Reviewed request for payment dated 11/06/2018 from Geobot Water Engineering Service Ltd. for payment for consultancy services for supervision of borehole drilling and installation. The DWO forwarded for payment on 12/06/2018 and confirmed amount of shs. 12,017,945 the CAO approved payment on 14/06/2018 and payment was done on 20/06/2018.

viii. Looked at the request for payment dated 09/06/2018 and the water officer forwarded for payment and recommended payment of shs. 160,563,300 on the same date. CAO approved payment on 13/06/2018 and payment was done on 13/06/2018.

ix. Request for payment submitted by Tebex Superior Services that was submitted on 28/05/2018. The water officer recommended for payment on the same date an amount of shs. 96,015,000 . CAO approved for payment on 28/05/2018 and payment was done on 29/05/2018

x. Construction works for the generator cage at the District Health Officer' office. Request was submitted on 08/06/2018 the DHO on the same date . Approved on 25/06/2018 and paid on 25/06/2018.

xi. Request for payment dated 29/05/2018 for construction of a stance lined pit latrine at Namulo Health Center. and the DHO approved payment of shs.8,035,065 on the same date. Payment was done on 13/06/2018

xii. Request for payment by Muweko Enterprises Ltd. for the construction of 2 in 1 staff house at Bunawale Health Centre II in Budumba done on 04/06/2018 and DHO recommended payment on the same date. Payment was done on 13/06/2018

<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG has a substantive Senior Internal Auditor: 1 point. • LG has produced all quarterly internal audit reports for the previous FY: score 2. 	<p>Mr. Mugwe Paul was assigned the duties of Principal Internal Auditor as per CAO's communication dated 15/01/2018 and reference CR/106/4 for a period of 6 months. The position is not substantive and as such the LG does not score under this indicator.</p>	<p>0</p>															
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • LG has produced all quarterly internal audit reports for the previous FY: score 2. 	<table border="1"> <thead> <tr> <th>Quarter</th> <th>Date of report</th> <th>Reference</th> </tr> </thead> <tbody> <tr> <td>Quarter 1</td> <td>03/11/2017</td> <td>AUD/Q1/2017/2018</td> </tr> <tr> <td>Quarter 2</td> <td>23/01/2018</td> <td>AUD/Q2/2017/2018</td> </tr> <tr> <td>Quarter 3</td> <td>13/04/2018</td> <td>AUD/Q3/2017/2018</td> </tr> <tr> <td>Quarter 4</td> <td>13/08/2018</td> <td>AUD/Q1/2017/2018</td> </tr> </tbody> </table> <p>Minutes to the internal audit meetings were also looked at. The dates for the meeting were: 23/10/2017 for the 1st meeting, 7/02/2018 for the 2nd meeting and the 3rd was conducted on 17/05/2018.</p> <p>Seen communication from CAO to CFO instructing the HOD and sectors to respond to queries on 4th quarter concerns dated 03/10/2018 and 2nd quarter on 29/11/2017 for the 1stb quarter</p>	Quarter	Date of report	Reference	Quarter 1	03/11/2017	AUD/Q1/2017/2018	Quarter 2	23/01/2018	AUD/Q2/2017/2018	Quarter 3	13/04/2018	AUD/Q3/2017/2018	Quarter 4	13/08/2018	AUD/Q1/2017/2018	<p>2</p>
Quarter	Date of report	Reference																
Quarter 1	03/11/2017	AUD/Q1/2017/2018																
Quarter 2	23/01/2018	AUD/Q2/2017/2018																
Quarter 3	13/04/2018	AUD/Q3/2017/2018																
Quarter 4	13/08/2018	AUD/Q1/2017/2018																

<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<p>Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries from all quarterly audit reports: score 2.</p>	<p>There is no evidence that the District provided information to the LG Council and LG PAC on the status of implementation of the internal audit findings and this is attributed to the failure to have the Council and the LG PAC to review audit findings and make recommendations. Accordingly the term of office for the LG PAC expired on the 6/03/2017 only to reappoint a new LG PAC on 15/02/2018 and the new LG PAC did not avail time to discuss internal audit reports.</p>	<p>0</p>
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1. 	<p>The reports were provided to the LG Accounting Officer, LG PAC but they were never reviewed and followed up by the units due to the expiry of the term of the LG PAC for the greater part of the financial year.</p>	<p>0</p>

<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4 	<p>Looked at the assets register that is maintained by the LG. Though manually maintained and classification of the assets is in accordance with the provision in the manual, however, it is noted that all the vehicles and motor cycles as registered carry no value or no cost is indicated. This is attributed to the failure of the District to get fair values of the donations of the assets received. Except the Changafa-ZS1100B costed at shs. 10,000,000, Mahindra motor cycle LG0021-024 valued at 6,333,333, Mahindra Reg. No. LG 0022-024 valued at shs. 6,333,333.</p> <p>A schedule of the landed properties that includes the office block at shs.146,000,000, Teachers resource centre at shs. 176,000,000, Lined pit latrine at a cost of shs. 13,000,000 Buildings at shs. 380,00,000 and Office block at shs.138,000,000 was provided and it is within the system bu don't conform to the provision in the manual.</p> <p>Landed properties are not proper registered in the assets register in conformity with the provisions in the manual.</p>	<p>0</p>
<p>The LG has obtained an unqualified or qualified Audit opinion</p> <p>Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY:</p> <ul style="list-style-type: none"> • Unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0 	<p>The LG obtained an unqualified report for the FY 2017/18 as per the report of the Auditor General.</p>	<p>4</p>
<p>Governance, oversight, transparency and accountability</p>			
<p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2 	<p>The Clerk to Council presented evidence to confirm that the Council meets and discusses service delivery related issues including monitoring reports, performance assessment results and LG PAC. The evidence was presented in form of minutes of council meetings that sat on the dates indicated below:</p> <p>Meeting of 21/12/2017, under minute 5/12/2017 mainly discussed education issues focusing on supplementary budget of the sector. The Budget was meant for the Uganda Teachers and Schools effectiveness Project funded by the World Bank for construction of five schools in the district. Council also approved the Recruitment Plan for Butaleja district.</p> <p>Meeting of 21/12/17 dwelt on presentation of sector reports as per minute number 5/12/2017. Water issues</p>	<p>2</p>

discussed included the need to generate a list of all water projects that were planned in the FY and the requirement to share the list with all councillors to enable effective monitoring during the implementation phase. Need to mobilise the communities to pay water user committee fees. Need for the communities to develop Operations and maintenance mechanisms and plans for all the water sources planned.

Education issues included the directive by the DEO to all head teachers to resubmit their academic documents to the DEO for re-evaluation, given that the performance and management abilities of many head teachers was found wanting. Need for parents to make a contribution of 7000 shillings per child to support the school feeding program. Reiterated the need for parents and the communities at large to discourage early child marriages and child labour.

Health issues discussed included the urgent need for the district to recruit a District Health Officer to ensure effective management of the sector and improved service delivery.

Meeting of the 29/03/2018, under minute number 5/03/2018, discussed education issues including the need to establish a model UPE school as one of the ways of promoting improved performance at P.L.E. Council directed the DEO to compile a report about the status of education in the district, which should be presented at the next council for review.

Under health, the Council noted with concern the need to recruit a District Health Officer and urged CAO and HR office to put in more efforts to identify candidates that can express interest in the job. Noted that the chairperson had contacted the MoH and expressed the need for the ministry of health to procure an X-ray machine for Busolwe hospital.

Water issues discussed included the need to identify 27 sites where new boreholes would be drilled based on the criteria of fairness and equity.

Meeting of the 24/05/2018 under minute number 06/05/2018 mainly dealt with the approval of Plans and Budgets for 2018/19.

Meeting of 28/06/2018, under minute number 4/06/2018, discussed issues including the need to sensitise communities about family planning and HIV&AIDS protection; need to construct water sources nearer to the schools to ensure that schools also benefit from the water sources. Need for schools to have their own latrines rather than using the school latrines. The council meeting also appointed members of the District Service Commission.

<p>The LG has responded to the feedback/complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> • Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 1. 	<p>While the CAO appointed the Principal HRO to be the focal point person for coordinating grievances and providing feedback to the complainants, there was no evidence presented to the Assessor to confirm that the LG had responded to any grievances and /or complaints. The Assessor saw a record book for complaints and grievances from the citizens but it was opened in September 2018 which was outside the period of review.</p>	<p>0</p>
<p>The LG has responded to the feedback/complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> • The LG has specified a system for recording, investigating and responding to grievances, which should be displayed at LG offices and made publically available: score 1 	<p>Other than the record book for registering complaints and grievances, that was opened in September 2018, there was no other evidence to confirm that during the FY 2017/18, the LG had a specified system for recording, investigating and responding to grievances which had to be displayed at LG offices and made publicly available.</p>	<p>0</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<p>Evidence that the LG has published:</p> <ul style="list-style-type: none"> • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2 	<p>The LG payroll and Pensioner Schedule for the month of September 2018 were displayed on the public notice board at the HRM office.</p>	<p>2</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> • Evidence that the procurement plan and awarded contracts and amounts are published: score 1. 	<p>There was evidence to confirm that the LG shares information with the citizens regarding matters of procurement. The Best Evaluated Bidder notices were displayed at the public notice board at the procurement office. By the time of the assessment, it was only the Best Evaluated Bidder notices for the drilling of boreholes that had been duly evaluated and hence displayed on the notice board. Notices for other bids were still under process, the notices capture information about the date of display of the notice and date of removal, subject of procurement, method of procurement, name of provider and the total contract price.</p>	<p>1</p>

<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> • Evidence that the LG performance assessment results and implications are published e.g. on the budget website for the previous year (from budget requirements): score 1. 	<p>There was no evidence adduced by the officers who stood in for District Planner (ICT Officer and the PAS) to confirm that the district published the LG assessment results on the budget website or used any other means to discuss and disseminate results of last year's assessment. The officers also had no knowledge as to whether any meetings were held at the district to discuss performance assessment results. Frantic efforts to reach out to the Planner for guidance yielded nothing.</p>	<p>0</p>
-------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------

<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1 	<p>Evidence was presented to the Assessor to confirm that the LG communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY. The evidence was provided in form of a set of examples of guidelines/circulars and/or policies that were disseminated through various forms as per examples below:</p> <ul style="list-style-type: none"> - DDEG guidelines were disseminated through a TPC meeting that was held on the 27/02/2018 as per minute number 3/02/2018 - Budget Call Circular 2, was disseminated through a TPC meeting 27/02/2018, aqs per minute number 3/02/2018 - Preparations for the midterm review of the DDP, was disseminated through a TPC meeting that was convened on 12/03/2018, under minute number 05/10/2018 - Budget Call Circular 2 was disseminated through a TPC meeting held on the 4/10/2017 under minute number 5/10/2017 - Guidelines on performance Agreements were disseminated through a TPC meeting held on 7/12/2017 under minute number 3/12/2017. 	<p>1</p>
<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that LG during the previous FY conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc.) with the public to provide feed-back on status of activity implementation: score 1. 	<p>There was no satisfying evidence provided by the LG to confirm that the 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. The only evidence provided was an example of a Baraza held in the Town Council and largely dwelt on discussing issues of security and sanitation in the Town council. No evidence was provided about Barazas held outside the Town Council. Secondly, while the PAS indicated that the RDC ands sector heads attend radio programmes in Mbale and Tororo radio stations and among other issues provide feedback on progress of activity implementation, no evidence was provided to that effect.</p>	<p>0</p>
<p>Social and environmental safeguards</p>			

<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG gender focal person and CDO have provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities score 2. 	<p>Guidance has been provided by gender focal point person to departments regarding how to mainstream gender. For example</p> <ul style="list-style-type: none"> • Conducted training of Head of Departments and Sub county staff on gender main streaming on 4th August 2017 in Health Board Room. Training focused on providing knowledge and skills in gender main streaming and also create an avenue for resource allocation during planning and budgeting. • Provided guidance on how to include women, PWDs in projects). • Conducted gender awareness using men care model in Busolwe Town Council and other sub counties that included CDOs in main streaming gender in sub county plans and budgets. 	
---------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--

<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the gender focal point and CDO have planned for minimum 2 activities for current FY to strengthen women's roles and address vulnerability <p>and social inclusions and that more than 90 % of previous year's budget for gender activities/ vulnerability/ social inclusion has been implemented: score 2.</p>	<p>In FY 2018/19 Gender focal point person and CDO have planned activities. These include</p> <ul style="list-style-type: none"> • Conducting gender development in lower local governments • Gender Main streaming • children and youth services, • community based services and • support to disabled and elderly, representation on Women councils. • probation and welfare support • operation of community based services Department. • Support to Youth Councils <p>In FY 2017/18 over 90% of the planned activities on gender activities/vulnerability/social inclusion well implemented e.g</p> <ul style="list-style-type: none"> • 100% achievement was registered as was planned. PWDs supported to attain skills, Departments were helped on how to conduct gender mainstreaming, use data for planning, mentoring of departments on gender main streaming, facilitating youth council meetings, supporting people with disabilities, dissemination of gender aggregated data, • Women, youth and disability councils were inducted. Mobilization, meetings and participation in international days were all done. • Supported Youth Livelihood programs, NUSAF3, UWEP through sensitization, training and monitoring.(reports dated 19/07/2018, 09/07/2018, 13/04/2017, 20/10/2017) • Held radio talk show on Open Gate FM about SGBV on 4/06/2018.
---------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 1 	<p>Environmental screening and EIA are carried out for activities and projects are planned and budgeted for in respective BOQs for specific projects in each department depending on the department e.g indicates money planned for conducting environmental screening all district development projects.</p> <p>Example of screened included:</p> <ul style="list-style-type: none"> • Construction of 2 classroom block Bubuhe P/S (Ref; BUTA 557/WRKS/2017-2018/00007) screening done 3/11/2017 • Construction of a 2 classroom block., with an office and store at Kapisa P/S (Ref; BUTA 557/WRKS/2017-2018/00005) screened done 3/11/17 • Construction of a 2 classroom block, with an office and store at Bung haji P/S (Ref; BUTA 557/WRKS/2017-2018/00006) screening done 2/11/2017 • Construction of a 2 classroom block at Mulaji P/S screening done 2/11/2017 • Construction of a 2 classroom block in Bugosa P/S screening done 2/11/2017 	<p>1</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1 	<p>Environmental and social management and health and safety plans are integrated and appended on the bid documents are contracts agreements for example: for example bid documents reviewed, they contain the clause on environmental management and health and safety plans (They are well captured in the BOQs in the contact and bid documents Section 6:statement of requirements).</p> <p>For example bids for the projects below</p> <ul style="list-style-type: none"> • Drilling, testing pumping and Installation of 15 bore holes and construction of 2 water wells. • Construction of 2 classroom tore block with Office and s at Buhabebe P/S • Construction of a 2 staff housing UNIT AND 2 STANCE LINED PIT LATRINE AND BATH ROOM in Busabi HCIII • .Construction of 2 classroom Block with office at Namutima P/S • Construction of a 2 classroom Block with office and store at Doho P/S 	<p>1</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1 	<ul style="list-style-type: none"> • Few projects are implemented on the land with proof of Ownership and mostly these are land consent forms and agreements for bore halls. • The didtrict has Land Title: BLOCK (ROAD BUSOLWE ROAD 11-47 AT BABONE CELL (DISTRICT HEAD QUARTERS) Though no project was at the Head Quarter. 	<p>0</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1 	<p>All completed projects have Environmental and Social Mitigation Certification. For example</p> <ul style="list-style-type: none"> • Construction of 2 classroom block with office and store Bugosa P/S (Ref; BUTA 557/WRKS/2017-2018/00003) Certification dated 29/06/2018 • Construction of a 2 classroom block., with an office and store at Kapisa P/S (Ref; BUTA 557/WRKS/2017-2018/00005) Certification dated 29/06/2018 • Construction of a 2 classroom block, with an office and store at Mulagi P/S (Ref; BUTA 557/WRKS/2017-2018/00004) Certification dated 29/06/2018 • Construction of a 2 classroom block, with an office and store at Bunghajji P/S (Certification dated 29/06/2018 <p>Mitigation Certification Forms completed and signed by Environmental Officer and CDO</p>	<p>1</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the contract payment certificated includes prior environmental and social clearance (new one): Score 1 	<p>The contract payment certificated includes prior environmental and social clearance. Clearance is done after inspection of contracts committee and based on the report of this committee. Environmental and social clearance was done before every payment. For example</p> <ul style="list-style-type: none"> • Construction of 2 classroom block with office and store Bugosa P/S (Ref; BUTA 557/WRKS/2017-2018/00003) • Construction of a 2 classroom block., with an office and store at Kapisa P/S (Ref; BUTA 557/WRKS/2017-2018/00005) • Construction of a 2 classroom block, with an office and store at Mulagi P/S (Ref; BUTA 557/WRKS/2017-2018/00004) • Construction of a 2 classroom block, with an office and store at Bunghajji P/S 	<p>1</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that environmental officer and CDO monthly report, includes a) completed checklists, b) deviations observed with pictures, c) corrective actions taken. Score: 1 	<ul style="list-style-type: none"> • No monthly reports were prepared. Only quarterly reports The quarterly reports captured a few projects from the project visits by the Environmental Officer and CDO. The checklists are not well completed. Few pictures were taken of the projects • Inadequate monitoring and supervision was done by Environment and Community Development officer. • For example the reports (dated 12/02/.2018, 20/03/2018,) Cover very few projects in education (class rooms, pit latrines, health and other sectors without completed checklists and very pictures. 	<p>0</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<p>• Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4</p>	<p>The LG Education department budgeted for Butaleja District Performance Contract FY 2018/2019 (Vote 557, workplan 6) dated 26/7/18 indicates budgeting for head teachers and teachers. Example: A list of 101 primary schools, a list of 1,264 teachers including Head teachers, enrollment list by school show at least the seven teachers (ref List of teachers as performance contract 2018/19)</p>	4
<p>The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<p>• Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school (or minimum of a teacher per class for schools with less than P.7) for the current FY: score 4</p>	<p>As per teachers list, deployment is done accordingly ascertained with 1,264 teachers also as per H/Rs payroll September 2018. The sampled schools;</p> <ul style="list-style-type: none"> -Dube Rock P/S has a head teacher and 21 teachers. -Nakwasi P/S has 14 teachers including the head teacher . -Lelesi P/S has 13 teachers including the head teacher. -Bunghaji P/S has 11 teachers including the head teacher. -Butaleja Integrated P/S has 15 teachers including the head teacher. 	4

<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100%: score 6 o If 80 - 99%: score 3 o If below 80%: score 0 	<p>According to Butaleja District approved structure as per DEO's proposed work plan to the H/R dated 7/6/17 structure for primary teachers is filled with a wage bill provision. The wage bill provision is for 1,264 teachers.</p> <p>Teachers proposed by office of the DEO was 1,752, the wage bill provision is 1,264, placements filled are 1,264 while 498 are not filled as required according to the proposed number by DEO as per recruitment plan submitted 10/8/18. As per wage bill provision, staff register by H/R the LG has filled 100%</p>	6
<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6 	<p>Butaleja District approved structure (Approved establishment by PS MoPS dated 7/6/17 ref; ARC 135/306/01) had a provision of 3 slots of school inspectors plus 1 DIS and these positions were substantively filled (Performance contracts, 17/18 and 2018/19 Butalejja District,(Vote;557, Work plan 6) Education department</p>	6
<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> • Primary Teachers: score 2 	<p>The DEO has accordingly submitted a recruitment plan to HRM for the FY 2018/2019 on 10/8/18 Education Department proposed Primary Teachers positions available is 1,796; currently filled 1,264, the staff registers as per H/R is 1,264 teachers numbers as provided by wage bill.</p>	2

<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> • School Inspectors: score 2 	<p>The DEO has accordingly submitted a recruitment plan to HRM for the FY 2018/2019 on 10/8/18 Education Department proposed Positions of school inspectors to be filled as 3.</p>	<p>2</p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------

Monitoring and Inspection

<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> • 100% school inspectors: score 3 	<p>The District has 3 inspector who have all been appraised (100%) as follows:</p> <ul style="list-style-type: none"> a) Adeke Ester; inspector of schools (special Needs) appraised by DEO on 06th Aug 2018 b) Akol Janet Christine; senior education officer (Inspection) appraised by the DIS on 23rd 07.2018 c) Wamahudi Moses; District Inspector of schools appraised by DEO on 10th July 2018. 	<p>3</p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------

<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> • Primary school head teachers o 90 - 100%: score 3 o 70% and 89%: score 2 o Below 70%: score 0 	<p>The district has 101 head teachers, all the 101 teacher's files were seen. From the review of 10 randomly sampled head teacher's files, it was found out that they were all (100%) appraised. Below is the presentation of appraisal status of 5 of the 10 sampled head teachers:</p> <p>a) Habi James Richard: Namulo P/S; officer appraised by the SAS Humuto Sub-County on 28th 12.2017</p> <p>b) Sanya Humphrey: Busolwe Township; officer appraised by the Town Clerk Busolwe Town Council on 27th 12.2017</p> <p>c) Namwima FF Justine: Buhasango PS; officer appraised by the Town Clerk Busolwe TC on 27th Dec 2017</p> <p>d) Hiire Amos: Bugosa PS; officer appraised by SAS Butaleja Sub-County on 20th 02.2018</p> <p>e) Ama Wasike James: Bubaali PS; officer appraised by the SAS Busabi Sub-County on 21/2/2018</p>	<p>3</p>
<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1 	<p>All guidelines, policies, circulars issued by the national level in the FY 2017/2018 were communicated to schools. For example on 20/2/18 there was general meeting with head teachers and communication was given regarding work plan, SMC minutes filing at the District, appraisal forms, Min 6/7/HTRs/2018.</p> <p>Letter to the schools by DEO dated 2/4/18 on National Kids Athletics and SNE learners.</p> <p>Letter to the schools by DEO dated 6/7/18 on MDD.</p> <p>Guidelines on school charges by PS MoES dated 24/10/17, ref: ADM/48/315/01.</p>	<p>1</p>

<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level: score 2 	<p>A number of meetings were held with head teachers of primary schools on different dates to elaborate and sensitize on the matters regarding education health as guided by the MOES dated 4/7/18, ref BPD 86/103/02.</p> <p>Min: 6/HTRs/2017 in a meeting dated 26/9/17 on guidelines on environment, licensing of private schools, scheming and planning.</p>	<p>2</p>
<p>The LG Education Department has effectively inspected all registered primary schools</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> o 100% - score 12 o 90 to 99% - score 10 o 80 to 89% - score 8 o 70 to 79% - score 6 o 60 to 69% - score 3 o 50 to 59 % score 1 o Below 50% score 0. 	<p>In FY 2017/18, inspections were done and reports were produced.</p> <p>All the 101, Quarter 1 inspection report dated 3/10/17, Quarter 2 dated 11/12/17, Quarter 3 dated 23/3/18, and Quarter 4 dated 18/7/18 with list of schools attached, submission by DIS to DEO.</p> <p>-Dube Rock P/S was inspected on 17/11/17, 21/3/18 and 26/6/18 by Associate Assessors and inspectors.</p> <p>-Nakwasi Primary school was inspected on 17/4/18, 16/8/18 and 27/9/17 as per feedback reports on file.</p> <p>-Lelesi P/S was inspected 14/9/17, 16/4/18 and 8/8/18.</p> <p>-Bunghaji P/S inspected on 20/10/17, 26/3/18 and 13/7/18.</p> <p>-Butaleja Integrated P/S inspected on 22/10/17, 12/4/18 and 13/7/18.</p>	<p>12</p>

<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4 	<p>The education department has discussed school inspection reports and used reports to make recommendations.</p> <p>For example, a meeting on inspection report quarter 4, recommendations to track absentees dated 20/7/18 and lobby of development partners for the training of senior women and men.</p> <p>Also a department meeting of follow up on recommendations on 10/9/18.</p> <p>Letter by DEO to DIS for following up recommendations of qtr. 4 inspection report dated 6/7/18.</p> <p>DEO s letter on support supervision dated 3/7/18 to inspectors and H/Ts.</p>	<p>4</p>
<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2 	<p>Butaleja Education department did not submit school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports. The District is not part of the pilot ones using e- supervision.</p>	<p>0</p>

<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the inspection recommendations are followed- up: score 4. 	<p>Inspection recommendations are followed-up. For example:</p> <p>For example, a meeting on inspection report quarter 4, recommendations to track absentees dated 20/7/18 and lobby of development partners for the training of senior women and men.</p> <p>Also a department meeting of follow up on recommendations on 10/9/18.</p> <p>Letter by DEO to DIS for following up recommendations of qtr. 4 inspection report dated 6/7/18.</p> <p>DEO s letter on support supervision dated 3/7/18 to inspectors and H/Ts.</p>	<p>4</p>
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> o List of schools which are consistent with both EMIS reports and PBS: score 5 	<p>Data submitted was accurate and consistent</p> <p>For example performance contract FY 2018/2019 dated 26/7/18 provides the list of schools of 101 which is consistent with the department list as reviewed. The MoES confirmed they dint issue for use EMIS in the year of assessment though they have not written.</p>	<p>5</p>
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<p>Evidence that the LG has submitted accurate/consistent data:</p> <ul style="list-style-type: none"> • Enrolment data for all schools which is consistent with EMIS report and PBS: score 5 	<p>Enrolment data submitted for all schools in place with 95,188 pupils and was consistent with PBS data, performance contract FY 2018/2019 dated 26/7/18.</p>	<p>5</p>

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

Evidence was provided by Clerk to Council to confirm that the Council Committee for education met and discussed service delivery issues including inspection, performance assessment results and LG PAC reports. The evidence was produced in form of a set of minutes of the committee meetings as indicated below:

- Meeting of 19/09/2017, discussed issues including the need for the district to raise some revenue from privately owned education institutions including Kindergartens and Nursery Schools, primary schools, secondary schools as well as tertiary institutions. Recommendations about the fees were made to Council to resolve.

- Discussed and recommended to Council that the Principal of Butaleja due to the public outcry about the dwindling enrolment at the school which is partly attributable to his mismanagement.

- Discussed the issue of encroachment on the Habija Primary School land and the need for the district to protect the people who were defending the land.

Meeting of 19/12/2017 discussed issues including the requirement for all schools to set aside a room to act as a *safe room* for girls as one way of retaining girls at school. Need for parents to make a contribution of 7000= per child towards the school feeding programme to ensure that at least the pupils get a hot mid-day meal at school. Urged the CAO to appoint a Project Manager for the Global Partnership for Education Programme (GPE), to ensure effective management of the programme.

Meeting of 14/02/2018, discussed among other issues, the need for all schools to acquire Land Titles, need to ensure that all schools and other government projects are fenced. Need for the CAO and DEO to take action against undisciplined teachers. Need to construct water sources next to Schools so that the pupils and teachers can get access to water.

Meeting 27/03/2018 discussed among other issues reviewed the Work Plans and budgets for FY 2018/19, noted the need for head teachers to undergo refresher courses and the need for head teachers to plan for athletics and extracurricular activities.

Meeting of the 23/05/2018, reviewed progress of the construction works at Nalugunjo Primary School and noted that the works had been completed. Revisited the issue of the school feeding program and recommended that DEO reports to council about the suggestion for parents to make a contribution towards

the school feeding programme so that council can make a resolution. DEO should make arrangements for commissioning all schools that had been constructed during FY 2017/18.

Meeting of the 27/06/2018 recommended that the CAO and DEO should expedite the process of reconstruction the roof at Nalugujo Primary school that was blown off by a wind storm. Need for the district to devise means of reducing child marriages. Need for the district to plan for multi-sectoral monitoring and supervision teams to make monitoring more effective. Revisited the issue of the need to plan for the commissioning of projects that had been completed.

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

There was evidence that the education sector committee presented issues that require council approval. The issues were presented as Recommendations made by the education committee during their mandatory sittings and were presented to council by the chairperson of the social services committee as indicated in the examples below.

- Committee Meeting of 19/09/2017 recommended to council that the district should to raise some revenue from privately owned education institutions including Kindergartens and Nursery Schools (10,000=), primary schools (20,000=), secondary schools (25,000=) as well as tertiary institutions (25000=).

- Recommended to council that the Principal of Butaleja due to the public outcry about the dwindling enrolment at the school which is partly attributable to his mismanagement.

- Recommended to Council that the people who are defending the land of Habija primary schools from encroachment should be protected by the district.

Committee Meeting of 14/02/2018, recommended to council that there was need to have all schools acquire Land Titles, need to ensure that all schools and other government projects are fenced. Recommended that Council directs the CAO and DEO to take action against undisciplined teachers to ensure that they are effective in their work. Recommended that water sources should be constructed next to Schools so that the pupils and teachers can get access to water.

Committee Meeting of the 27/06/2018 recommended that the CAO and DEO should expedite the process of reconstruction the roof at Nalugujo Primary school that was blown off by a wind storm. Need for council to identify resources from the *Force Account* and seek approval from the MoFPED to utilise the force account to respond to the emergency.

<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO/ MEO)</p> <ul style="list-style-type: none"> • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80 % schools: score 0 	<p>All the 101 primary schools in Butaleja District have functional SMCs; the office of the DEO has a record of submitted minutes of SMC meetings as submitted by the schools. These SMCs meet regularly and keep minutes. For example as sampled ,</p> <p>-Dube Rock P/S held meetings on 25/10/17, 15/2/18 and 15/6/18 where budgets and the H/Ts reports were discussed.</p> <p>-Nakwasi P/S held meetings on 22/11/17, 2/3/18 while minutes of 2nd term were not available at the school, H/T s reports and budgets were discussed.</p> <p>-Bunghaji P/S held meetings on 16/11/17, 17/10/17, 13/3/18 and 12/6/18.</p> <p>-Butaleja Integrated P/S held meetings as expected and filed the minutes with DEO on 17/10/17, 25/2/18, and 17/7/18.</p>	<p>5</p>
<p>The LG has publicised all schools receiving non- wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3 	<p>All schools receiving non-wage recurrent grants were posted on public notice boards. for example the main education notice board The District has put up for publicity of all schools receiving non- wage recurrent grant on the public notice boards evidence is there at DEO s office.</p>	<p>3</p>
<p>Procurement and contract management</p>			

<p>The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements,</p> <p>to the Procurement Unit that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the sector has submitted procurement input to Procurement Unit that covers all investment items in the approved Sector annual work plan and budget on time by April 30: score 4 	<p>Education Department Submissions of the procurement in put were done and they covered all investment items such as construction of a 2 class room block at Doho P/S and a 2 class room blocks at Namutima in the approved Sector annual work plan and budget. However, the submissions were done late on 3/7/18 beyond the required submission time of April 30th. The delay was due to change of mode of procurement plan by the MOF as communicated.</p>	<p>0</p>
<p>Financial management and reporting</p>			

<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3. 	<p>Reviewed the requests for payment and was able to ascertain that the sector timely recommends suppliers' request for payment. Those reviewed include:</p> <ol style="list-style-type: none"> i. Reviewed payment to USRA General Enterprises for the supply of stationery to the Health Department. Requisition was done on 10/05/2018 by the Secretary to DHO who recommended for payment on the same date. CFO approved payment on 22/05/2018 and CAO authorised on 11/06/2018. Payment was done on 22/06/2018. ii. Reviewed the supply of fuel by Owor Investments Ltd. to the Health department. DHO sanctioned the payment through a request made on 28/03/2018. CFO approved the payment on 28/03/2017 and authorised payment on 28/03/2017 and payment was done on 10/04/2017. iii. Reviewed requisition for payment submitted by Ideal Merchant Property Holdings Ltd. that was initiated by the DEO on 25/04/2018, recommended by CFO on the same date and approved by the CAO, payment was done on 30/04/2018 iv. Reviewed request for payment done by Lodina Investments (U) Ltd. for works at Busoga PS submitted on 09/04/2018 and DEO forwarded on 20/04/2018 CA approved payment on 30/04/2018 and payment was done on 09/05/2018 v. Request for payment made by Petex (U) Ltd. made on 28/05/2018 for the construction of 2 classroom with offices at Mulagi Primary school at a cost of shs.40,165,000. DEO forwarded for payment on the same date and CAO approved on the 20/06/2018. Payment was done on 25/06/2018 vi. Reviewed request for payment submitted by Native Investment Ltd. for construction of 2 classroom block with an office and store at Kapisa primary school at a cost of shs. 31,132,182 the DEO recommended for payment SHS. 28,758,169. CAO approved payment on 22/06/2018 and payment was done 25/06/2018. 	<p>3</p>
-------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------

<p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by 15th of July for consolidation: score 4 	<p>There was no evidence seen by the Assessor to confirm that the education sector submitted annual reports-including all quarterly reports-with availability of all four quarterly reports to the planning Unit for consolidation before the 15th of July 2018.</p> <p>Due to the absence of the Planner from station, the PAS and ICT Officer could neither trace hard copies of the quarterly reports nor retrieve from the PBS system, the submission dates of the four quarterly reports of the education sector to the Planning Unit for consolidation. In addition, the Assessor did not see any copies of the quarterly reports (especially quarter 4 reports) for reference. The LG Report Submission Status generated at the MoFPED on the 28th of August 2018 did not include the dates of submission of the Quarter 4 consolidated report for Butaleja district, implying that it could have been submitted after the 28th of August.</p>	<p>0</p>
<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year <ul style="list-style-type: none"> o If sector has no audit query <p>score 4</p> <ul style="list-style-type: none"> o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 o If all queries are not responded to score 0 	<p>Education had no issues raised in the 4th quarter report.</p> <p>3rd quarter report had issues on inadequate documentation and accountability</p> <p>2nd quarter report had an anomaly on accountabilities and irregular procurements and failure to prepare schemes of work and lesson plans.</p> <p>There is no evidence that responses were provided.</p>	<p>0</p>
<p>Social and environmental safeguards</p>			

<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills, etc.: Score 2 	<p>At the time of assessment, there was evidence that education department has disseminated guidelines on gender, environment charging the head teachers on all these issues including how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills. Quote letter dated 10/5/18 and 14/11/17</p>	<p>2</p>
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2 	<p>The education department and gender focal person issued guidelines on how to manage sanitation for girls and PWDs in primary schools.</p> <p>For example meeting with H/Ts on 26/9/18.</p>	<p>2</p>
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the School Management Committee meets the guideline on gender composition: score 1 	<p>The School Management Committees meet the guidelines on gender composition. All schools sampled have two or more female members on their SMC.</p> <ul style="list-style-type: none"> -Dube Rock P/S has 13 members with two female members. -Nakwasi P/S has 13 members with four female members. -Lelesi P/S has 11 members with two female members. -Bunghaji P/S has 13 members with two female members. -Butaleja Integrated 12 members with 4 female members. 	<p>1</p>

<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 1: 	<p>The Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education) at Hasahya P/S, Kaplsa P/S, Lelesi P/S, Masulula P/S and other schools action and some secondary schools the DEO in collaboration with Environment Officer report dated 30/4/18.</p>	<p>1</p>
<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all school infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: Score 1 	<p>There was no evidence of screening forms and site reports signed by Environmental Officer and the CDO. The sector was not able to show the certificates of site completion as required.</p>	<p>0</p>
<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 1 	<p>No evidence of the Environmental Officer and Community Development Officer visited the sites to check whether the mitigation plans were complied with on the various projects sites.</p>	<p>0</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>LG has substantively recruited primary health care workers with a wage bill provision from PHC wage</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY</p> <ul style="list-style-type: none"> • More than 80% filled: score 8 • 60 – 80% - score 4 • Less than 60% filled: score 0 	<p>The Butaleja DLG HD had substantively recruited to the tune of 62.2%:</p> <ol style="list-style-type: none"> 1. The fully substantively recruited and filled were 326 (62.2 % i.e. according to the HD's staffing and deployment lists). 2. The Butaleja DLG HD's Staffing Norm for the HWs was 529 but those filled only 326 (with all attempts made at filling the vacant positions – according to the above-mentioned details and availed advertisements – succeeding to fill to the tune of 326 only). NB: See The New Visions of 22nd/1/2018/pg. 46 and 6th/2/2018/pg. 52. All attracted all sought for PHC workers including a substantively recruited DHO. 3. The HD and HRM provided evidence of attempts to fill/recruit and confirmed that they attracted all (now part of the 326). According to the HD's records reviewed by the assessor, no other News Paper advertisements were seen to fill the remaining vacant positions. 4. The approved health sector staffing structure is based on PS/MoPS letter (dated 29th/6/2017 Ref: ARC135/306/01) on Implementation of Approved Staff Structure for Government Institutions (received and signed by Butaleja DLG for for the FY 2018/19). 5. The above means that the total effort remains at 326 out of the 529 which works out at 62.2% filled only. 6. The DLG had IPFs with a PHC wage bill provision amounting to UGX 3,924,742,924 for the FY 2018/19, this was meant to cater for 326 according to the extracts submitted to the PBS records on staffing levels (e.g. see Pg 52, under the section on Health). 7. Also there were some mismatches in the information on staffing, especially inconsistencies between the HD and HF level records. For example, the Busolwe Hospital reported having 135 staff while the HD report 126 staff only (i.e. 9 staff less). 8. There are inconsistencies between MoH and the HD on how to treat Nabiganda HF. To the former it is a HC III but to the latter it is a de jure HC IV (see table). The DHO's Visitors Book (15th/4/2011) demonstrates one among many 	4

		<p>visits by a Q3 MoH Area Visit Team (by Dr. S. Byakika) on upgrading the HF. Also, CAO's letter (dated 29th/6/2016) to MoH's Director of General Health Services (DGHS) cites the DLG's quest to upgrade Nabiganda HC III to HC IV. Indeed, the PS' MoH letter (dated 30th/6/2016) refers to Nibiganda as a HC IV. However, some HD records that the assessor reviewed referred variously to Nabiganda as either HC III or HC IV.</p> <p>ID Type of HF No. Norm Filled Vacant</p> <p>1 DHO 1 11 7 7</p> <p>2 Hospital 1 190 129 129</p> <p>3 HC IV 1 48 28 28</p> <p>4 HC III 11 190 124 124</p> <p>5 HC II 10 90 38 38</p> <p>Total 24 529 326 326</p>	
<p>The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/re- quest to HRM for the current FY, covering the vacant positions of primary health care workers: score 6</p>	<p>The HD submitted a comprehensive recruitment plan for FY 2018/19. All staffing records offered signs that suggest evidence of some consistency of the actual figures on the filled and vacant positions seen as follows:</p> <ol style="list-style-type: none"> 1. The DHO provided proof in form of a submission letter of the Recruitment Plan to the PHRO (dated 30th July 2018). 2. The print out of an extract uploaded on PBS (on the Staff Recruitment Plan) reflected recruitment plan to cover 61 vacant positions under health (i.e. those to be filled under the HD). 3. The PBS could not be accessed on account of absence from station of the District Planner. 	<p>6</p>

<p>The LG Health department has conducted performance appraisal for Health Centre IVs and Hospital In-charge and ensured performance appraisals for HC III and II in-charges are conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the all health facilities in-charges have been appraised during the previous FY:</p> <ul style="list-style-type: none"> o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0 	<p>It was reported that the District has 22 government health facilities. During the assessment only 17 appraisal files of the health in charges were seen of these only 15 (68%) had been appraised for the period 2017/18. Below is a presentation of 2 of the health in-charges (2 of the 17 seen) that had not appraised:</p> <p>a) Nandera Mary Immaculate: Busabi HC III; no appraisal report for the period seen</p> <p>b) Okia Charles Peter: Nakwas HC; no appraisal report for the period seen</p>	<p>0</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------

<p>The Local Government Health department has deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Health department has deployed health workers in line with the lists submitted with the budget for the current FY, and if not provided justification for deviations: score 4 	<p>The HD records on staffing/deployment levels were only marginally comparable with those stated within the sampled HFs. Some fairly minor discrepancies or inconsistencies were evident when it came to what the HD and HF levels documented as the filled HF positions (see table):</p> <ol style="list-style-type: none"> For some HFs the staff deployment was not in accordance with the positions as seen in HD's official records. For Busolwe Hospital the HD records indicated that it had 126 staff yet the HF's records showed 135 fully-filled portfolios. The HD's Biostatistician and the HR Officer both possessed conflicting figures on Busolwe Hospital with the latter having 126 staff and the latter 129 personnel. To account for the differences in the accuracy of the parallel records within the HD and between the HD and the HFs, the gaps was attributed un updated records, et cetera. There are inconsistencies between MoH and the HD on how to treat Nabiganda HF. To the former it is a HC III but to the latter it is a de jure HC IV (see table). The DHO's Visitors Book (15th/4/2011) demonstrates one among many visits by a Q3 MoH Area Visit Team (by Dr. S. Byakika) on upgrading the HF. Also, CAO's letter (dated 29th/6/2016) to MoH's Director of General Health Services (DGHS) cites the DLG's quest to upgrade Nabiganda HC III to HC IV. Indeed, the PS' MoH letter (dated 30th/6/2016) refers to Nibiganda as a HC IV. However, some HD records that the assessor reviewed referred variously to Nabiganda as either HC III or HC IV. <p>ID</p> <p>HF's Deployed HWs FY 2017/18</p> <table border="1"> <thead> <tr> <th></th> <th>HF Records</th> <th>HD Records</th> <th>Norm</th> </tr> </thead> <tbody> <tr> <td>1 Bugalo HC III</td> <td>10</td> <td>14</td> <td>19</td> </tr> <tr> <td>2 Busolwe Hospital</td> <td>135</td> <td>126</td> <td>190</td> </tr> <tr> <td>3 Madungha HC II</td> <td>4</td> <td>4</td> <td>9</td> </tr> <tr> <td>4 Mulogi HC III/PNFP</td> <td>17</td> <td>-</td> <td>19</td> </tr> </tbody> </table>		HF Records	HD Records	Norm	1 Bugalo HC III	10	14	19	2 Busolwe Hospital	135	126	190	3 Madungha HC II	4	4	9	4 Mulogi HC III/PNFP	17	-	19	<p>0</p>
	HF Records	HD Records	Norm																				
1 Bugalo HC III	10	14	19																				
2 Busolwe Hospital	135	126	190																				
3 Madungha HC II	4	4	9																				
4 Mulogi HC III/PNFP	17	-	19																				
<p>Monitoring and Supervision</p>																							
<p>The DHO/MHO has effectively</p>	<ul style="list-style-type: none"> Evidence that the DHO/ MHO has 	<p>There was mixed evidence from the sampled HFs that the DHO/HD was effective when it came to</p>	<p>0</p>																				

communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities

Maximum 6 for this performance measure

communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3

communicating all the circulars, guidelines and policies issued by the national level for the FY 2017/18 (see table). There was only evidence that the sampled HFs had access to some assorted circulars, guidelines and policies from the national level (i.e. did not receive all or 100% of those issued). Indeed, there were both apparent and reported challenges in the mode of communication and documentation between and within the HD and HFs when it came to these documents:

1. First, as signals for commitment towards “effective communication” and investment of efforts towards supporting CME, there was absence of systematic records of the total number of circulars, guidelines and policies that had been received from the national level. However, there was some evidence of proper records on those distributed. Even going by their own records alone, there was no documented evidence that the DHO had communicated all the circulars, guidelines and policies received from the center (i.e. in the spirit of ensuring “effective communication” and promoting CME).
2. Secondly, going by the records secured at the HD and HF levels, the HD acknowledged receiving 7 circulars, guidelines and policies secured from the national level. However, those sent to higher and lower level HFs were reportedly far more (an average of 13, hence 6 more circulars, guidelines and policies). Also, HD’s records indicated that the list of those received excluded “MoH Guidelines for LG Planning for the Health Sector”, “MoH Sector Grant and Budget Guidelines FY 2018/19” as well as “MoH Policy Strategies for Improving Health Service Delivery 2016-2021”.
3. Third, the HD had its own official records of those they were able to dispatch/ distribute to HFs (7 altogether covered in forms that served as logbooks or registers of those dispatched). The uneven documentation of receipts and better documentation of those distributed made it difficult to secure more systematic records of those got and those sent. It should be easier to retrieve information with respect to what circulars, guidelines and policies the HD received and those sent in FY 2017/18 (i.e. a complete record of what they were). Incoming versus outgoing communication through use of logbooks would be the most systematic way by which to achieve effective record keeping but one that requires intervention. As a result, the HD’s rough records indicated that it had gotten in the region of 7 circulars, guidelines and policies altogether but the average of those distributed of 13 is high. This inconsistency and

mismatch is a sign of weak documentation.

4. Forth, at a HF level, while it was often difficult for HFs to establish when exactly they had received what circular, guideline or policy. On the whole, the sampled HFs possessed an average of (only) 13 circulars, guidelines or policies issued in the FY 2017/18 (see table). When you compare with the HD's rough records, it is clear that the HD got in the region of 7 circulars, guidelines and policies altogether. The fact that the HFs got about 6 circulars, guidelines and policies suggests that some IPs and MDAs bypass the office of the HD/DHO, hence go ahead to send more than 100% of whatever goes through the DLG structures (an indication of weak systems in use accuracy).

ID

No. Issued to HFs (FY 2017/18) DHO Visits

1 Bugalo HC III 18 3

2 Busolwe Hospital 13 6

3 Madungha HC II 10 2

4 Mulogi HC III/PNFP 10 0

Average 13 3

<p>The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the DHO/ MHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3 	<p>In line with the quest to support effective communication and promote CME, it was clear that the DHO attempted to explain some of the issued circulars, guidelines and policies by the national level in FY 2017/18. The assessor reviewed the following relevant HD documents:</p> <ol style="list-style-type: none"> At HD level, some records indicated that the DHO explained some circulars, guidelines and policies. For example, the Minutes of DHO's Meeting with HF Managers (held on the 30th/8/2018, page 1, bullet number 3 cites DHO briefing the in-charges about recent policy changes and guidelines such as Test and Treat Management of Malaria, Management of Expired Medical Supplies, Management of uptake of Rotavirus etc.). For the FY 2017/18, all the 4 sampled HFs Visitors Books demonstrated evidence of either the DHO or representatives of the HD explaining selected circulars, guidelines and policies. For Busolwe Hospital, Visitors Book date 14th/3/2018 cites coaching on Baby First health Initiative (BFHI). This was also the case for Bugalo HC III. For Mulagi HC III/PNFP, Visitors Book date 12th/12/2017 cites mentorship Integrated Disease Surveillance Response (IDSR). For Busolwe Hospital, Visitors Book date 14th/3/2018 cites coaching on Baby First health Initiative (BFHI). For Magungha HC II, Visitors Book date 26th/3/2018 that cites mentorship on Nutrition. 	<p>3</p>
<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT/MHT has supervised 100% of HC IVs and district hospitals (including PNFPs receiving PHC grant) at least once in a quarter: score 3</p>	<p>The DHT supervised 100% of higher HFs and PNFPs receiving PHC funding. However, the HD compiled evidence for support supervision but rather inadequately, to the extent that it was not easy to gauge its efficiency and effectiveness when it came to its operations in the FY 2017/18. However,</p> <p>ID Date No. of Supervision Visits FY 2017/18</p> <p>Hospital 1 HC IV 1 PNFPs</p> <p>Q1 2nd/10/2017 1 out of 1 1 out of 1 1 out of 1</p> <p>Q2 5th/1/2018 1 out of 1 1 out of 1 1 out of 1</p> <p>Q3 30th/3/2018 1 out of 1 1 out of 1 1 out of 1</p> <p>Q4 16th/7/2018 1 out of 1 1 out of 1 1 out of 1</p> <p>According to HD records:</p> <ol style="list-style-type: none"> The DHT covered 100% (once in a quarter) of the higher HFs (the 1 Hospital and 1 HC IV) and 	<p>3</p>

the 1 PNFP (i.e. covered 100% for all quarters – Q1, Q2, Q3 and Q4 – see table).

2. There were no pointers of errors of omission or commission in the coverage and documentation of support supervision for the said HFs (see table).
3. There are inconsistencies between MoH and the HD on how to treat Nabiganda HF. To the former it is a HC III but to the latter it is a de jure HC IV (see table). The DHO's Visitors Book (15th/4/2011) demonstrates one among many visits by a Q3 MoH Area Visit Team (by Dr. S. Byakika) on upgrading the HF. Also, CAO's letter (dated 29th/6/2016) to MoH's Director of General Health Services (DGHS) cites the DLG's quest to upgrade Nabiganda HC III to HC IV. Indeed, the PS' MoH letter (dated 30th/6/2016) refers to Nibiganda as a HC IV. However, some HD records that the assessor reviewed referred variously to Nabiganda as either HC III or HC IV.

According to HF records:

1. Busolwe Hospital support supervision is documented between series 897009 and 897013 (i.e. from 25th/9/2017 to 17th/4/2018) for the FY 2017/18. However, on close scrutiny, this appears inadequate considering that the HF is relatively closer to the HD. It is possible that there could be a documentation gap where support supervision is done but not recorded.
2. Mulagi HC III/PNFP support supervision is documented between series 897817 and 897820 (i.e. from 27th/11/2017 to 24th/5/2018) for the FY 2017/18. Again, on close scrutiny, this appears inadequate considering that the HF is a PNFP is in need of hands-on support and relatively close to the HD as well as the HSD.

ID HF SUPPORT SUPERVISION VISITS (FY 2017/18)

HF DHO DHT HSD Total

1 Busolwe Hospital 6 15 N/A 21

2 Mulogi HC III/PNFP 0 21 0 21

Total 6 36 0 42

The LG Health Department has effectively provided support supervision to district health services

Evidence that DHT/MHT has ensured that HSD has supervised lower level health

Support supervision for FY 2017/18 covered 36.9% (i.e. falling way below the required pass mark of 60%) for the lower-level HFs. Based on the contents cum records derived from the availed 4 quarterly support supervision reports the following figures were captured

Maximum 6 points for this performance measure

facilities 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

and used (see table):

1. The coverage of lower-level HFs for all the 4 quarters for the FY 2017/18, the HD only registered numbers of HF visits of 31 only.
2. The total numbers of expected or required visits for 100% coverage of lower-level HFs for all the 4 quarters for the FY 2017/18 works out at 84 for the 21 HFs altogether for 4 quarters (i.e. for 11 HC IIIs and 10 HC IIs).
3. The above works out at 36.9% (i.e. with a numerator of 31 only as the visits that materialized and a denominator of 84 of the expected visits altogether; multiply with 100%).

ID Date Support Supervision Visits Comments

11 HC IIIs 10 HC II

Q1 2nd/10/2017 9 out of 11 2 out of 10 Partial coverage (11 of 21)

Q2 5th/1/2018 4 out of 11 2 out of 10 Low coverage (6 of 21)

Q3 30th/3/2018 2 out of 11 2 out of 10 Low coverage (4 of 21)

Q4 16th/7/2018 9 out of 11 1 out of 10 Partial coverage (10 of 21)

The other records presented the following evidence (see table):

1. The HF visits by the DHO are far fewer than those of the DHT. However, the function of the HSD was only remotely in use, hence clearly dysfunctional.
2. There is coverage of several HFs for the 4 quarters. However the proportion of the HFs covered for lower-level HFs by the DHT is below 100% (i.e. the fact that the former is 100% and the latter 36.9% only).

ID

HF's OFFICIAL VISITS (FY 2017/18) Total

DHO DHT HSD

1 Bugalo HC III 3 37 0 40

2 Busolwe Hospital 6 15 - 21

3 Madungha HC II 2 12 0 14

4 Mulogi HC III/PNFP 0 21 0 21

		Total 11 85 0 96	
<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that all the 4 quarterly reports have been discussed and used to make recommendations (in each quarter) for corrective actions during the previous FY: score 4 	<p>The HD provided evidence of the existence of the required 4 out of 4 quarterly reports for FY 2017/18 (see table):</p> <ol style="list-style-type: none"> All the 4 quarterly reports were made available, signed and stamped (see table). The reports discussed the issues and results arising from support supervision with respect to most HFs. All the 12 DHT monthly meetings minutes (for FY 2017/18) were made available, fully signed and stamped – i.e. 7th/7/2017, 15th/8/2017, 7th/9/2017, 13th/10/2017, 28th/11/2017, 15th/12/2017, 30th/1/2018, 14th/2/2018, 20th/3/2018, 19th/4/2018, 22nd/5/2018 and 21st/6/2018. There were 4 of the 12 DHT meetings that discussed the results arising from the 4 quarterly support supervision reports (see table). <p>?</p> <p>ID Q Reports DHT Monthly Meetings Minutes Discussing Q Reports Q1 2nd/10/2017 13th/10/2017 Agenda 5, MIN 5 Q2 5th/1/2018 30th/2/2017 Agenda 3, MIN 3</p> <p>Q3 30th/3/2018 19th/4/2018 Agenda 4, MIN 4/4/2018</p> <p>Q4 16th/7/2018 20th/7/2018 Agenda 6, MIN 6/7/2018</p>	4
<p>The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6 	<p>Both the quarterly support supervision reports (as well as DHT Minutes) and HF support supervision logbooks indicated evidence of discussion of relevant support-supervision issues emerging from quarterly support supervision and monitoring visits, results, and/or reports. For the former, it was reported that the aim of the DHT discussion was to pave the way for better follow up of emerging issues with proper actions focused on specific corrective measures (see table).</p> <p>ID HD Recommendation Follow up</p> <p>1 Butaleja DLG HD Issue of irregularities in the leadership and management of HFs featured prominently (e.g. for Busaba HC III, Kanyenya HC II and Muhuyu HC II. It was recommended that problematic staff should be redeployed / transferred. The assessor saw DHT Meeting (of 9th/1/2018, Agenda 4, pg. 4) discussing on the modalities for action. The assessor also saw several copies of DHO letters, subj: Staff Transfers. A list of all affected is seen in a 2-page List of Transfers that is appended to</p>	6

a general communication to the CAO.

ID HF Recommendation Follow up

2 Bugalo HC III For the EPI Fridge, record temperatures both in the mornings and evenings (see logbook 928623 on the 26th/7/2017). Temperature monitoring chart for Fridge-tag seen with “am” and “pm” columns, including initials of those taking the temperatures.

3 Busolwe Hospital Update stock cards (see logbook 897010, date 7th /12/2017). Seen Box File on Stock Cards for “ARVs, Anti-TB, and Reproductive Health” (e.g. card on Antevirenz 200mg tablets indicates quantity used, balance, etc.).

4 Madungha HC II Liaise with Bugala HC III for EMINOC (Emergency Management of Maternal New Born Obstetric Care) drugs (see logbook 896017, date 23rd/2/2018). Seen District Requisition and Issue Voucher (HMIS Form 017) Bugala I/C issued 20 Hyabene Zipola on 6th/1/2018 to Madungha HC II

5 Mulogi HC III/PNFP Employ another midwife (see logbook 897817, date 25th/1/2018). Seen Appointment Letter (dated 1st/6/2018) on file of the Enrolled Midwife (Ms. Josephine NAMUGWERE)

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

1. First, evidence was shaky for the HD relying on discussions of support-supervision quarterly reports (findings and results) to generate actionable recommendations in each quarter that are followed up with specific corrective activities or actions. The scanty evidence at HD level was surprising but equally surprising was that HFs were more readily inclined to give indications of actions emerging from support-supervision (as seen in their logbooks and based on discussions with the in-charges of sampled HFs).
2. Secondly, the DHT met 12 out of 12 mandatory times, an indication that the DHT was functional but the meetings' discussion of support-supervision results and reports appeared adhoc (not deliberate, direct, full and systematic, particularly in the ways they were documented).
3. Third, there were 4 DHT minutes that discussed the 4 quarterly reports. However, the HD confided that documentation of the 2 related documents needed to improve (e.g. to better cite or quote HF-specific needs, emerging priority issues, corresponding pages where a DHT refers to a specific quarterly report, et cetera).

4. Forth, the HSD system appeared and was reported to be dysfunctional (reportedly on account of limited funding for the health sector). The most commonly reported operational gap had to do with the limited funding to the HD to support total and integrated documentation of support supervision and monitoring operations at HD and HF levels. The critical gaps are linked to weak documentation, including limited awareness, low capacity as well as dysfunctional systems for evidence storage and retrieval, etc).
5. Fifth, and in summary, in part because of weak documentation methods, both the HD and the sampled HFs struggled to wade through their records to pick out what support-supervision issues and recommendations had been followed up with corrective action. While all sampled HFs (100%) benefited from DHT support supervision and all had pieces of evidence (e.g. in the supervision logbooks) to confirm that the DHT made recommendations and with further evidence of follow up on the advice on corrective actions to be implemented in the FY 2017/18), picking evidence of the actual follow up actions often proved difficult (tedious and time consuming). Again, while the monthly DHT meetings discussed some quarterly support-supervision reports/results, the HD staff often struggled to prove what meeting discussed what quarterly report as well as the recommendations followed up with specific corrective actions, et cetera.

<p>The LG Health department has submitted accurate/consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10 	<p>There was accurate and consistent data and reports on the 22 HFs receiving PHC funding (as per MoH formats). The following was evident in the records:</p> <ol style="list-style-type: none"> The 22 HFs had been posted both on the DLG and HD's Notice Boards covering the 22 HFs receiving PHC funding for the FY 2017/18. The 22 HFs posted on the notice board and in the HD's files were all reflected in the MoH HMIS Excel spreadsheet. NB: Their reporting rate was inadequate (i.e. below 100% HMIS reporting rate). The 22 HFs were covered in the HD documented extracted and latter uploaded to the PBS in FY 2018/19. NB: The HD faced difficulties in accessing the details as uploaded in the PBS. NB: The only inconsistency lay in how to treat Nabiganda HF. Here, there was mismatch between MoH and the HD. To the former it is a HC III but to the latter it is a de jure HC IV (see table). The DHO's Visitors Book (15th/4/2011) demonstrates one among many visits by a Q3 MoH Area Visit Team (by Dr. S. Byakika) on upgrading the HF. Also, CAO's letter (dated 29th/6/2016) to MoH's Director of General Health Services (DGHS) cites the DLG's quest to upgrade Nabiganda HC III to HC IV. Indeed, the PS' MoH letter (dated 30th/6/2016) refers to Nibiganda as a HC IV. However, some HD records that the assessor reviewed referred variously to Nabiganda as either HC III or HC IV. 	<p>10</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------

Governance, oversight, transparency and accountability

<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2 	<p>Evidence was provided to the Assessor by the Clerk to Council to confirm that the Council committee for health met and discussed service delivery issues including supervision reports, performance assessment results among other issues.</p> <p>Evidence was presented in the form of minutes of the council committee responsible for health as follows:</p> <p>Meeting of 19/09/2017 discussed the issue of the need for the health office to design strategic programs that will ensure quality health service delivery to the population. Need for mentoring health workers in the strategies and practices that can lead to a reduction of maternal, post natal mortality and morbidity. Need to recruit Social Workers to help in sensitising the communities about bad cultural practices that can lead to spread of diseases.</p>	<p>2</p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------

Meeting of 19/12/2017 discussed issues including the need for Health Unit Management Committees to be inducted/ empowered with skills in monitoring and evaluation to enable them to competently do basic monitoring and evaluating of the performance of health workers at the health facilities. Need for the politicians at the district to pick interest in the activities/projects being implemented and take time off to monitor the implementation of such projects. Noted the need to expeditiously recruit a DHO to provide effective leadership to the health team.

Meeting of 14/02/2018, discussed among other issues, the urgent need for the recruitment of a DHO as the absence of the DHO was grossly affecting health service delivery including the implementation of the planned infrastructure projects. Discussed the need to fence Nabiganda HC III and the need to up-grade it to HC IV level to improve service delivery by enabling the communities to access services provided at HC IV level. Need for the political and technical leaders to mobilise communities to participate in the planned indoor spraying to curb the spread of Malaria.

Meeting of the 27/03/2018 discussed the need to recommends Sister Ochieng Ruth for extension of contract while waiting for two other officers to complete their further studies. Need for sensitisation of communities about the neglected tropical disease. Need for the district to have a specialist in Anaesthesia and recommended that one of the clinical officers at Busolwe HC IV should be recommended for training in Anaesthesia.

Meeting of 23/05/2018 observed that the PEPFAR vehicle was missing from the district and that efforts should be made by the district to trace and return the vehicle to the district. Need to commission the newly refurbished Bunawali HC III so that it can be accessed for services.

Meeting of 27/06/18 reiterated the need to recruit a DHO to ensure effective management of the health sector.

The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council

Maximum 4 for this performance measure

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

Evidence was presented by the Clerk to Council to confirm that the Council committee responsible for health submitted issues to council for approval during council meetings that were convened and resolved issues on the dates indicated below:

Council meeting of 21/12/2017, under minute number 5/12/2017 resolved Health issues as per recommendations of the council committee for health including the need for the district leaders to mobilise communities to embrace and participate in the indoor residual spraying as one way of controlling the spread of Malaria. Noted that the X-ray machine at Busolwe HCIV was not functioning and urged the CAO to approach the MOH and explore ways and means of getting a replacement X-ray machine at the health facility.

Meeting of the 15/02/2018 resolved that the CAO and District Chairperson should contact MoH and MoPs and be advised on the best way to recruit a DHO for the district since the district had failed to attract a suitable candidate for the position.

Meeting of the 29/03/2018, noted that the CAO and the district chairperson had approached MoH and had been promised the the MoH had secured an X-ray machine for the district.

Meeting of the 24/05/2018 reviewed and approved district Annual Work plans and Budgets including for the health sector, as per minute number 06/05/2018.

<p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 6 points</p>	<p>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> • If 100% of randomly sampled facilities: score 6 • If 80-99 %: score 4 • If 70-79: %: score 2 • If less than 70%: score 0 	<p>According to all the sampled HFs 50% had fully functional HUMCs and the average level of functionality was a mere 87.5% (i.e. 2 HFs had committees that had only 3 out of the 4 required HUMC minutes for FY 2017/18 – see table):</p> <ol style="list-style-type: none"> 1. A division of the sum of the said 2 figures by 2 is above the 60% mark (i.e. $50.0+87.5= 137.5\div 2= 68.8\%$). Therefore, the HD met the HUMC functionality threshold because the average of the sample hovers above the 60% composite rate. 2. The assessments evidence was not corroborated by HD records because support supervision by DHT was mostly concerned with other preoccupations (hence had not mainstreamed committee functionality in support supervision related analysis and documentation). <p>ID</p> <p>HF's HUMCs Meetings in FY 2017/18 Functionality</p> <p>1 Bugalo HC III 4 100%</p> <p>2 Busolwe Hospital 4 100%</p> <p>3 Madungha HC II 3 75%</p> <p>4 Mulogi HC III/PNFP 3 75%</p> <p>Average 2/4 HFs (50%) 87.5%</p>	
---------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--

The LG has publicised all health facilities receiving PHC non-wage recurrent grants

Maximum 4 for this performance measure

- Evidence that the LG has publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards: score 4

While the DLG publicized the list of 22 HFs receiving PHC non-wage recurrent grant inside the HD's walls, all the sampled HFs appeared to face challenges of managing the list:

1. At the HF level, only a few had the list in the public areas to allow for public viewing. Mulagi HC III had a PHC Funding Accountability Corner on the Notice Board but had posted HF-specific financial details. Those HFs that had the list had posted it inside the offices, left it in files or extracted HF-specific info as one to be publicized.
2. At the HD level, the HD notice board had posted an old 22-HF list of HFs receiving PHC funding inside the HD office. The HD updated the list in the course of the assessment. However, the HD had not conceived of more pragmatic and systematic ways of publicizing the list of the 22 HFs (e.g. using Whatsapp or in the course of support supervision to encourage HFs to post the list or to influence the DLG to publicize the list on a LG website). These would foster wider transparency and accountability mechanisms. The DHO argued that the new list was available but on file (not publicized)..
3. At a DLG level, the Butaleja DLG budget website was yet to publicize the 22-HF list of HFs receiving PHC funding. Indeed, the DLG Main Block Notice Boards never posted the list.
4. However, the list refers to Nabiganda as HC III while the HD treat it as HC IV. As such, there were inconsistencies between MoH and the HD on how to treat Nabiganda HF. To the former it is a HC III but to the latter it is a de jure HC IV (see table). The DHO's Visitors Book (15th/4/2011) demonstrates one among many visits by a Q3 MoH Area Visit Team (by Dr. S. Byakika) on upgrading the HF. Also, CAO's letter (dated 29th/6/2016) to MoH's Director of General Health Services (DGHS) cites the DLG's quest to upgrade Nabiganda HC III to HC IV. Indeed, the PS' MoH letter (dated 30th/6/2016) refers to Nibiganda as a HC IV. However, some HD records that the assessor reviewed referred variously to Nabiganda as either HC III or HC IV.

<p>The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the sector has submitted input to procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2 	<p>The DHO submission of input to the procurement plan to the PDU was made belatedly (30th /7/2018) i.e. way after the deadline of 30th/4/2018. The late submission was self-reportedly attributed to the HD receiving guidelines or IPFs rather late (no documented proof offered to the assessor to confirm the claim).</p>	<p>0</p>
<p>The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2. 	<p>The DHO submitted Procurement Form PP1 on the 15th/8/2017, hence submitted it in time (i.e. by the end of the Q1 for FY 2017/18/ - with an implied deadline of 30th/9/2017). The timely submission concerned "Construction of a Generator Cage for DHOs Office in the FY 2017/18.</p>	<p>2</p>

<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4. 	<p>Reviewed payments in the sector to ascertain whether the sector timely certifies and recommends suppliers' and contractors' requests for payment and noted that this is adequately done. Those reviewed included:</p> <ol style="list-style-type: none"> 1. Construction works for the generator cage at the District Health Officer' office. Request was submitted on 08/06/2018 the DHO on the same date . Approved on 25/06/2018 and paid on 25/06/2018. 2. Request for payment dated 29/05/2018 for construction of a stance lined pit latrine at Namulo Health Center.and the DHO approved payment of shs.8,035,065 on the same date. Payment was done on 13/06/2018 3. Request for payment by Muweko Enterprises Ltd. for the construction of 2 in 1 staff house at Bunawale Health Centre II in Budumba done on 04/06/2018 and DHO recommended payment on the same date. Payment was done on 13/06/2018 	<p>4</p>
<p>Financial management and reporting</p>			
<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the 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 	<p>There was no evidence seen by the Assessor to confirm that the Health sector submitted annual reports-including all quarterly reports-with availability of all four quarterly reports to the planning Unit for consolidation before the 15th of July 2018.</p> <p>Due to the absence of the Planner from station, the PAS and ICT Officer could neither trace hard copies of the quarterly reports nor retrieve from the PBS system, the submission dates of the four quarterly reports of the Health sector to the Planning Unit for consolidation. In addition, the Assessor did not see any copies of the quarterly reports (especially quarter 4 reports) for reference. The LG Report Submission Status generated at the MoFPED on the 28th of August 2018 did not include the dates of submission of the Quarter 4 consolidated report for Butaleja district, implying that it could have been submitted after the 28th of August.</p>	<p>0</p>

<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</p> <ul style="list-style-type: none"> • If sector has no audit query: Score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: Score 2 points • If all queries are not responded to Score 0 	<p>Looked at the 4th quarter report and the sector had three (3) issues relating to Busolwe Hospital cash revenue not accounted, delays in banking of cash generated by Busolwe Hospital as well as inadequate accountabilities.</p> <p>Quarter 3 report pointed out issues on inadequate accountability.</p> <p>2nd report had issues of irregular procurements</p> <p>All the above were yet to be addressed by the sector and there was no formal communication of the responses to the internal audit queries.</p>	<p>0</p>
<p>Social and environmental safeguards</p>			

<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines (i.e. minimum 30 % women: score 2 	<p>Based on a sample of 4 HFs (see table), only 50.0% of the committees met the gender composition requirement. The average composition based on the assessments sample was 38.3% as the overall average for Butaleja DLG (see table). A division of the sum of the said 2 figures by 2 is way below 50% (i.e. $50.0+38.3= 88.3\div 2= 44.2\%$). Therefore, the HD did not meet the gender composition requirement because the average of the sample only hovers below the 50% composite rate (not above, hence failed to meet the requirement marginally). The HD had not commissioned assessments or used the support-supervision function to find out the composition of committees and to address the associated problems.</p> <p>?</p> <p>ID Name of HF All Members Female Members %/Female</p> <p>1 Bugalo HC III 7 2 28.6%</p> <p>2 Busolwe Hospital 11 3 27.3%</p> <p>3 Madungha HC II 5 2 40.0%</p> <p>4 Mulogi HC III/PNFP 7 4 57.1%</p> <p>Average Gender Composition (50% of HFs) 38.3%</p>	<p>0</p>
<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2. 	<p>There was no documented evidence provided by the HD and the HFs that the DHO had issued a circular on sanitation, including labeling toilets for men and women. The noteworthy evidence includes the fact that only 50% of the sampled HFs had labeled the toilets appropriately (e.g. Mulagi HC III/PNFP).</p>	<p>0</p>

<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that all health facility infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: Score 2 	<p>All 3 HF infrastructure projects implemented in the FY 2017/18 did not have separately filled Environment and Social Screening Forms (ESSF). For the one that had, it had clear errors of omission or commission (see Construction of Staff Houses for Bunawale HC III):</p> <ol style="list-style-type: none"> The EO and CDO did not fill the forms in such ways that identified or specified possible risks associated with the project. Consequently, the EO and CDO did not fill the forms in such ways that proposed mitigation plans or measures to address the risks. 	<p>0</p>
<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 2 	<p>The EO and CDO did not compile Site Visit Reports to assess compliance with any mitigation measures meant to address the identified risks.</p>	<p>0</p>
<p>The LG Health department has issued guidelines on medical waste management</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> Evidence that the LG has issued guidelines on medical waste management, including guidelines (e.g. sanitation charts, posters, etc.) for construction of facilities for medical waste disposal: score 4. 	<p>On access to guidelines on segregation of medical waste (either in form of a chart or otherwise) 100% of the sampled HFs displayed the chart (an indication that the HD had issued guidance on the same).</p>	<p>4</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the district Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: <ul style="list-style-type: none"> o If 100 % of the budget allocation for the current FY is allocated to S/Cs below average coverage: score 10 o If 80-99%: Score 7 o If 60-79: Score 4 o If below 60 %: Score 0 	<p>Butaleja district has a safe water coverage of 53.35% with the sub-counties of Butaleja (49.78%), Butaleja TC (48.47%), Busaba (48.99%), Kachonga (51.98%), Himutu (48.26%), Mazimasa (32.40%) and Busolwe (50.31%). In the current FY AWP, the LG water department has made budgeted for the drilling and construction of 15 deep boreholes (hand pump) and rehabilitation of 22 boreholes. The boreholes were to be constructed in the sub-counties of Kachonga (1), Butaleja (1), Butaleja TC (2), Busaba (2), Kachonga (1), Himutu (1), Mazimaza (2), Busolwe (1), Busabi (1), Naweoyo (1), Nawanjofu (1) and Budumba (1). From the budget allocations, it was observed that 66.7% were targeting sub-counties below district average.</p>	4

<p>The district Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the district Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY. <ul style="list-style-type: none"> o If 100 % of the water projects are implemented in the targeted S/Cs: Score 15 o If 80-99%: Score 10 o If 60-79: Score 5 o If below 60 %: Score 0 	<p>In the previous FY, the district had a safe water average coverage of 60.56% with the sub-counties of Butaleja (56%), Butaleja TC (60.22%), Busaba(47.99%), Nawanjofu (59.48%), Kachonga (53.98%), Himutu (59.9%), Mazimasa (45.2%), Naweyo (59.41%) below district average. According to the annual progress report dated: 9th August, 2018, the LG water department had planned to drill and construct 16 deep boreholes and also rehabilitate 25 deep boreholes. In the drilling and construction budget allocation, the sub-counties with safe water coverage below average were targeted and these included; Busaba (2), Butaleja (1), Butaleja TC (2), Nawanjofu (1), Kachonga (1), Himutu (1), Mazimasa (3) and Naweyo (1). From the report, it was observed that all these were implemented and completed accounting for 100%</p>	
<p>Monitoring and Supervision</p>			

<p>The district Water department carries out monthly monitoring of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the district Water department has monitored each of WSS facilities at least annually.</p> <ul style="list-style-type: none"> • If more than 95% of the WSS facilities monitored: score 15 • 80% - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60% - 69% monitored: score 5 • 50% - 59%: score 3 • Less than 50% of WSS facilities monitored: score 0 	<p>The LG district water department implemented the drilling and construction of 16 deep boreholes and also the rehabilitation of 25 water and sanitation facilities. From the project file, monitoring reports were found and these included:</p> <ul style="list-style-type: none"> - Monitoring report on boreholes drilled by East Africa Borehole Ltd. Dated: 13/02/2018. In this report, 8 boreholes were monitored. - Supervision report for borehole siting for FY 2017/18. Dated: 18th April, 2018 where 16 boreholes were sited. - Monitoring report on boreholes drilling by Icon projects Ltd Dated: 19th July, 2018. Where 8 boreholes were monitored - Monitoring report for Rehabilitated boreholes by Hand pumps Mechanics Association Dated: 20th June, 2018. <p>This accounted for 87%.</p>	<p>10</p>
<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the district has submitted accurate/consistent data for the current FY: Score 5 • List of water facility which are consistent in both sector MIS reports and PBS: score 5 	<p>There was no evidence to prove that the LG had submitted accurate/consistent data for the current FY. At the time of the assessment, the PBS couldn't be accessed since the planner was not available. Therefore there was no way of comparing the documents for consistence of submissions made</p>	<p>0</p>

<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> List of water facility which are consistent in both sector MIS reports and PBS: score 5 	<p>There was no available list to compare with due to the absence of the planner</p>	<p>0</p>
<p>Procurement and contract management</p>			
<p>The district Water department has submitted input for district's procurement plan, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has submitted input for the district procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4</p>	<p>From the files it was evident that the water department did submit inputs for the district procurement plan to PDU that covers all investment items in the approved sector annual work plan on 13th July, 2018 which was later than 30th April. Argument is that this was a revised on but access to the original one was in vein.</p>	<p>0</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> If the contract manager prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2 	<p>From the Project files, there was no evidence in form of contract management plan, no evidence in form of minutes for site meetings between contract manager and the contractor. The argument was that the implemented projects could at times take less than a month to be implemented.</p>	<p>0</p>

<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> If water and sanitation facilities constructed as per design(s): score 2 	<p>From the sampled water sources, construction was as per design(s). For example, the boreholes in Nakwasi Village, Butaleja sub-county, Kanyenya village borehole in Himutu sub-county, Bubinge Village Borehole in Nawanjofu sub-county and Namunasa Village Borehole in Kachonga sub-county were as per stipulated design. They were well protected, had water discharge pit and right pump handle used.</p>	<p>2</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> If contractor handed over all completed WSS facilities: score 2 	<p>There were no handover reports on completed WSS facilities found in the project files</p>	<p>0</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2 	<p>In the project files, completion certificates were not found because the defect period hadn't expired but interim certificates were found certifying all WSS projects that were completed. For example; interim payment certificate for borehole siting, drilling, casting and installation; Contract No: BUTA 557/WRKS/17-18/00019; Name of contractor: ICON PROJECTS LTD signed on 30th July, 2018</p>	<p>2</p>

<p>The district Water department has certified and initiated payment for works and supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 	<p>Reviewed payments within the sector to ascertain whether timely recommendation was done for the suppliers' requests for payment and noted that this adequately done. Those reviewed included:</p> <ol style="list-style-type: none"> Reviewed request for payment dated 11/06/2018 from Geobot Water Engineering Service Ltd. for payment for consultancy services for supervision of borehole drilling and installation. The DWO forwarded for payment on 12/06/2018 and confirmed amount of shs. 12,017,945 the CAO approved payment on 14/06/2018 and payment was done on 20/06/2018. Looked at the request for payment dated 09/06/2018 and the water officer forwarded for payment and recommended payment of shs. 160,563,300 on the same date. CAO approved payment on 13/06/2018 and payment was done on 13/06/2018. Request for payment submitted by Tebex Superior Services that was submitted on 28/05/2018. The water officer recommended for payment on the same date an amount of shs. 96,015,000 . CAO approved for payment on 28/05/2018 and payment was done on 29/05/2018 	<p>3</p>
<p>Financial management and reporting</p>			
<p>The district Water department has submitted annual reports (including all quarterly reports) in time to the Plan- ning Unit</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5 	<p>There was no evidence seen by the Assessor to confirm that the Water sector submitted annual reports- including all quarterly reports-with availability of all four quarterly reports to the planning Unit for consolidation before the 15th of July 2018.</p> <p>Due to the absence of the Planner from station, the PAS and ICT Officer could neither trace hard copies of the quarterly reports nor retrieve from the PBS system, the submission dates of the four quarterly reports of the Water sector to the Planning Unit for consolidation. In addition, the Assessor did not see any copies of the quarterly reports (especially quarter 4 reports) for reference. The LG Report Submission Status generated at the MoFPED on the 28th of August 2018 did not include the dates of submission of the Quarter 4 consolidated report for Butaleja district, implying that it could have been submitted after the 28th of August.</p>	<p>0</p>

<p>The District Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year 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 	<p>The sector had no issues pointed out in the 4th quarter report nor in other quarterly reports.</p>	<p>5</p>
----------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------	----------

Governance, oversight, transparency and accountability

<p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3 	<p>The Clerk to Council presented evidence to the Assessor to Confirm 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. The evidence adduced included a set of minutes of the council committee for water that sat on the following dates and held discussions as indicated.</p> <p>Meeting of the 19/09/2017 discussed among other issues the need to compel communities to fence water sources to ensure good hygiene around the water sources. Noted that the Busolwe bore hole water was contaminated and therefore the borehole should be officially condemned and abandoned/dismantled.</p> <p>Meeting of the 19/12/2017 discussed and recommended that all water projects that had been completed should be commissioned so that population can start using them.</p> <p>Meeting of 14/02/2018 resolved that communities should pay Operations and Maintenance fees in order to have a fund that can be used for maintaining their water sources. Need to solicit funding from NUSAF 3 to assist in funding some of the water sources. Observed that it was a requirement to select women to be part of the water user committees. Noted that there was need to construct latrines that were compatible with the topography around the Doho Rice Scheme which was basically a wetland.</p> <p>Meeting of the 27/03/2018 noted that need to extend piped water to Nabiganda Town board to enable the residents access clean water. Recommended that the women should be the majority on the water user committees.</p> <p>Meeting of the 23/05/2018 urged the Water Officer to document all the water sources in the district and ensure that the lists are shared with the district councillors to enable them monitor the projects. Recommended that double cabin vehicle be procured by the water office.</p> <p>Meeting of 27/06/2018 recommended that all completed water projects should be commissioned so that communities can start using them.</p>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the water sector committee has presented issues that require approval to Council: score 3 	<p>Evidence was adduced by the Clerk to Council to confirm that the water sector committee presented issues that require council approval. The evidence was presented in form of recommendation by the water committee to council and council resolutions resolving and /or approving some of the recommendations as indicted in the examples below:</p> <p>Council meeting of 21/12/2017, under minute number 5/12/17, resolved that the water department should generate a list of all water sources/projects implemented and the list should be distributed to all councillors to enable the councillors effectively monitor all the projects. Council adapted the recommendation that communities should pay some water user fees that would be used to maintain the water sources.</p> <p>Council meeting of 15/02/18 resolved and /or adopted recommendations made by the water committee including the need for the political and technical officers to monitor water sources regularly to ensure that they are well maintained and are kept clean at all times.</p> <p>Council meeting of the 29/03/2018 under minute number 5/03/2018, adopted the recommendation of the water committee that slots for drilling boreholes at the 27 sites should be selected using the principle of fairness and equity.</p>	<p>3</p>
<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2. 	<p>From the notice board, it was observed that the AWP, budget and the water Development grant releases and expenditures are displayed on the district notice board as per PPDA Act.</p>	<p>2</p>

<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2 	<p>From the sampled WSS projects, it was observed that the projects were clearly labelled for example the boreholes in the villages of Nambusulu, Busangisa, Masolwa and Lujeho were all labelled showing the name of the project, date of construction and source of funding.</p>	<p>2</p>
<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2 	<p>From the notice board, it was observed that information on tenders and contract awards were displayed; For example;</p> <p>Subject of procurement: Siting, drilling, test pumping, casting and installation of 8 boreholes under Lot 1; Reference number: BUTA557/WRKS/18-19/00014; Name of best evaluated bidder: East Africa Boreholes Ltd; Contract price: 163,192,000</p> <p>Subject of procurement: Siting, drilling, test pumping, casting and installation of 7 boreholes under Lot 2; Reference number: BUTA557/WRKS/18-19/00015; Name of best evaluated bidder: KLR (U) Ltd; Contract price: 139,587,000</p>	<p>2</p>
<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> If communities apply for water/ public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1 	<p>At the time of the assessment, no community applications for water/public sanitation facilities as per the sector critical requirements for the current FY. The argument was that forms for application had not been sent out to the communities by the department.</p>	<p>0</p>

<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> Water and Sanitation Committees that are functioning evidenced by either: i) collection of O&M funds, ii) carrying out preventive maintenance and minor repairs, iii) facility fenced/protected, or iv) they have an M&E plan for the previous FY: score 2 <p>Note: One of parameters above is sufficient for the score.</p>	<p>From the sampled water facilities, it was evident that most water facilities have WSCs that were not functioning as evidenced by the lack of O&M funds and carrying out preventive maintenance and minor repairs or facility being fenced.</p>	<p>0</p>
<p>Social and environmental safeguards</p>			
<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2 	<p>From the project files, it was evident that environmental screening for all projects and EIAs were conducted for all WSS projects and reports are in place. For example the following forms on environmental and social screening were found;</p> <ul style="list-style-type: none"> - Borehole drilling, casting and installation at Buhitengho, signed on 7th/12/2017. - Borehole siting, drilling, pump testing, casting and installation at Nangolo village Butaleja TC, signed on 7th/12/2017. - Borehole siting, drilling, pump testing, casting and installation at Lujeho Butaleja TC, signed on 7th/12/2017 - Borehole siting, drilling, casting and installation of Nakabi village and Namatoke, signed on 7th/12/2017 	<p>2</p>

<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1 	<p>According to the Environmental and Social Impact compliance monitoring report for district boreholes of April 2018, it was observed that there has been follow up support provided in case of unacceptable environmental concerns in the past FY.</p>	<p>1</p>
<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that construction and supervision contracts have clause on environmental protection: score 1 	<p>From the 3 sampled contracts, it was observed that there was no clause on environmental protection</p>	<p>0</p>
<p>The district Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> If at least 50% WSCs are women and at least one occupying a key position (chairperson, secretary or Treasurer) as per the sector critical requirements: score 3 	<p>According to the MIS report, it was observed that the WSCs are made up of at least 50% of women and they do take up key positions for example in Nambusulu, Busangisa and Masolwa villages.</p>	<p>3</p>

<p>Gender and special needs-sensitive sanitation facilities in public places/</p> <p>RGCs provided by the Water Department.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> • If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3 	<p>From the sampled public sanitation facilities, it was observed that the facilities have adequate access and separate stances for men, women and PWDs. For example; Nampologoma primary school and Doho primary school.</p>	<p>3</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------