

Accountability Requirements

Butambala District

(Vote Code: 608)

Assessment	Compliant	%
Yes	2	33%
No	4	67%

Accountability Requirements

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Assessment area: Annual performance contrac	t		
LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.	XXX	• Butambala DLG submission to MoFPED of a Final Performance Contract for FY 2017/18 on 14th/7/2017, evidence of submission of Draft was not availed.	No
Assessment area: Supporting Documents for th available	e Budget requ	ired as per the PFMA are submitt	ed and
LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).	XXXXX	• No evidence of submission to MoFPED of Budget for FY 2017/18 that included a Procurement Plan was availed. Rather a copy of the Budget for FY 2017/18 that included a Procurement Plan was availed but without any evidence of acknowledgement of receipt by MoFPED, and, evidence of submission of the procurement plan 2017/18 to PPDA on 19th/07/2017	No
Assessment area: Reporting: submission of ann	nual and quarte	erly budget performance reports	
LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)	XXXXX	• Butambala DLG submitted to MoFPED the Annual Performance Report for FY 2016/17 on 23rd/08/2017 which was past the due date of 31st July.	No

LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)	XXXXXX	 Butambala DLG submitted to MoFPED all the 4 Quarterly budget performance reports on dates stated here below: Quarter I: 16th/11/2016 Quarter II: 1st/03/2017 Quarter III: 23rd/05/2017 Quarter IV: 23rd/08/2017 It is evident that the Quarter IV report was submitted on 23rd/08/2017 which was past the due date of 31 July 2017. 	No
Assessment area: Audit The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous financial year by April 30 (PFMA s. 11 2g). This statement includes actions against all findings where the Auditor General recommended the Accounting Officer to take action (PFMA Act 2015; Local Governments Financial and Accounting Regulations 2007; The Local Governments Act, Cap 243).	XXXXX	The District LG produced and submitted information to the PST/ST on the implementation of Internal Auditor General findings for the financial year 2015/2016 in a letter REF CR.203/1, dated 12th March 2017 and was received by the Directorate of Internal Audit, MOFPED on 21st March 2017. This was before the deadline of 31st April 2017. All the 16 findings in the internal audit report for the FY 2016/17 were responded to.	Yes
The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer	XXXXX	The audit opinion on the Financial statements of the District for the FY ended June 2016 was not adverse or disclaimed. The audit opinion was, in fact, unqualified.	Yes



Crosscutting Performance Measures

Butambala District

(Vote Code: 608)

Score 74/100 (74%)

No.	Performance Measure	Scoring Guide	Score	Justification				
Asse	Assessment area: Planning, budgeting and execution							
1		Evidence that a municipality/district has: • A functional Physical Planning Committee in place that considers new investments on time: score 2.	0	 Physical planning committee was formally constituted in CAO's letter dated 26th/06/2012 under ref. no. CR/202/2. Committee meetings were not regular as evidenced by fact that only two meetings had been held since its inception, that is, on 29th/08/2017 and 14th/04/2014 during which prototype building plans, inspection report, and revival of LLG Physical Planning Committees were discussed. Minutes of the meetings held on the dates stated above lacked evidence of approval of any building plans by the Committee. However interim approval by CAO in letter dated 16th/11/2017 under ref. no. CR.750/1 had been issued to Eaton Towers for building plan of transceiver station submitted on 31st/10/2017. Registration book was in place first entry being 05/06/2012. 				
		• All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2.	0	 Neither the District nor the 2 Town Councils (Gombe and Kibibi) had approved physical development plans. None of the 3 new investments in Gombe TC sampled had approved building plans. They included small building of Ssekamate in Gombe village behind Gombe Preparatory PS, residential building of Kkulumba Lauben in Gombe cell along Gombe TC-Gomba road and residential house of Kaddu Nabi in Bugoye village along Gombe TC-Kibibi road. 				

2 The prioritized investment activities in the approved AWP for the current FY are derived from the approved five- year development plan, are based on discussions in annual reviews and budget conferences and have project profiles		2	 The report of the Budget conference held on 27th/10/2016 identified priorities for FY 2017/18 which were also reflected in the AWP 2017/18: Finance and Planning (pg 5 of BC report also on pg. 55-56 of AWP) Health (pg 11 of BC report also on pg. 63-65 of AWP) Education (pg. 13 of BC report also on pg. 66-68 of AWP) -Construction of a 2 classroom block at Mavugeera EMEA PS, 5 stance latrine at Nakatooke PS, provision of desks Roads (pg 16-17 of BC report also on pg 69-70 of AWP) Water (pg .18 of BC report also on pg. 71-72 of AWP) –drilling of 3 boreholes, rehabilitation of 5 boreholes. Community Based Services (pg.21 of BC report also on pg. 60-62 of AWP) Natural Resources (pg .23-24 of BC report also on pg. 73 of AWP)
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• Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If different, justification has to be provided and evidence that it was approved by Council. Score 2.	2	 The capital investments in the approved Annual Work Plan for FY 2017/18 were drawn from the approved five year district development plan II (DDP) 2015/16-2019/20: Administration: (pg 53 of AWP and pg. 232 of the DDP -Rehabilitation of Administration block Health (pg 63-65 of AWP and pg. 210 of the DDP) Rehabilitation of Gombe Hospital Maternal ward Education (pg. 66-68 of AWP and also on pg. 218-220 of the DDP) -Construction of a 2 classroom block at Mavugeera EMEA PS, 5 stance latrine at Nakatooke PS, provision of desks Roads (pg 69-70 of AWP and pg. 231-232 of the DDP) Water (pg .71-72 of AWP and pg 235-236) – drilling of 3 boreholes, rehabilitation of 5 boreholes.
• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1.	0	Project profiles were contained in the DDP pg. 376-406. Although the DTPC in meeting of 9th/November 2017 discussed the departmental projects to be implemented in FY 2017/18 it was not evident that project profiles were discussed. TPC meeting of 1st/11/2017 Min. 07/11/17 discussed only BOQ of renovation of Gombe Hospital and pointed out the need to include environmental issues, signage, HIV and AIDS and other cross cutting issues in BOQ.

3	Annual statistical abstract developed and applied Maximum 1 point on this performance measure	• Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision- making- maximum 1 point.	0	 Statistical abstract 2017 was still in draft form –some statistics e.g staffing in government HC IVs. The abstract contained gender dis-aggregated data including table 5.9 number of teachers and pupils by gender in government aided primary schools (pg. 31), table A10 Total population by Parish, sex (pg. 65) Though Statistical abstract 2015/16 was presented to TPC in meeting of 12th/01/2017 under Min. 07/01/17 there was no evidence of its application during targeting / budget allocation and decision making. HODs were only asked to provide the missing information from their sectors.
4	Investment activities in the previous FY were implemented as per AWP. Maximum 6 points on this performance measure.	• Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2	2	 Review of the Qtr 4 cumulative report and the approved AWP 2016/17 indicated that most of the projects listed implemented in FY 2016/17 listed here below were derived from the AWP for the said year: Health - pg. 64 of the Qtr 4 Cumulative report and on pg. 39 of AWP. Rehabilitation of Gombe Hospital Roads - pg. 70 of the Qtr 4 Cumulative report and on pg. 45-46 of AWP. Rehabilitation of 32 km of urban unpaved roads; Periodic maintenance of 46 km of district roads and routine maintenance of 206 km of district roads using road gangs Water - pg. 73 of the Qtr 4 Cumulative report and on pg. 49 of AWP.
				Quarter 4 Cumulative/ Annual Performance report for FY 2016/17 indicated that though some of the projects were completed within the FY others were only partially achieved thus bringing the overall performance to 95.7%: Completed and over-performance projects:

		 Rehabilitation of Gombe Hospital (pg. 64 of the Qtr 4 Cumulative report and on pg. 39 of AWP).
		 32 out of 32 km of urban unpaved roads rehabilitated.
		• 206 out of 206 km of district roads routinely maintained –road gangs (both on pg. 70 of the Qtr 4 Cumulative report and on pg. 45-46 of AWP).
		 4 out of 3 boreholes rehabilitated (pg. 73 of the Qtr 4 Cumulative report and on pg. 49 of AWP).
Evidence that the		Partially achieved:
investment projects implemented in the previous FY were completed as per work	2	46 out of 52 km of district roads periodically maintained (pg. 70 of the Qtr 4 Cumulative report and on pg. 45-46 of AWP).
plan by end for FY. o 100%: score 4 o 80- 99%: score 2 o Below		4 out of 5 boreholes drilled (pg. 73 of the Qtr 4 Cumulative report and on pg. 49 of AWP)
80%: 0		Not achieved
		Under Education (pg. 66-69 of the Qtr 4 Cumulative report and on pg. 41 of AWP)
		 Supply of desks to 5 schools of Simba Islamic, Ssenyomo, Gombe UMEA, Lukalu UMEA and Kabasanda UMEA PS.
		• Construction of a 2 classrooms block at Butawuka PS was changed to procurement of vehicle for the department (at 124,500,000= pg. 69 of Qtr 4 report).
		Though Procurement of a vehicle was discussed in Council meeting of 9th/02/2016 under Min. D.C Min/05/09/16 Council did not in particular state that this replaces classroom construction. In meeting of 10th/05/2016 though it had been proposed that some funds be got to top up the 20m required for purchase of a vehicle the Council resolved that a reconditioned vehicle be bought instead at 90million but this was still not captured in the approved work plan and budget for FY 2016/17.

5	The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects and assets during the previous FY Maximum 4 points on this Performance Measure.	 Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2 	0	 The following sampled projects as captured in Butambala DLG Annual performance report 2016/17 indicated a total expenditure of 1,136,048,000= against a budget of 951,890,000=, representing +19.3%: Rehabilitation of Gombe Hospital budget 700,000,000= spent 700,000=(pg. 64 of the Qtr 4 Cumulative report). Rehabilitation of 32 km of urban unpaved roads budgeted 120,423,000= spent 300,192,000= Roads (pg. 70 of the Qtr 4 Cumulative report). Rehabilitation of 4 boreholes; and drilling of 4 boreholes drilled both budgeted at 131,467,000= and spent 135,856,000= (pg. 73 of the Qtr 4 Cumulative report) 	
Asse	essment area: Human	• Evidence that the LG has budgeted and spent at least 80% of O&M budget for infrastructure in the previous FY: score 2	2	 Based on the sample below drawn from Butambala DLG Annual performance report FY 2016/17 the LG spent 1,144,980,000= against a budget of 1,011,541,000= (113.2%) for O&M of infrastructure: Rehabilitation of Gombe Hospital budget 700,000,000= spent 700,000= (pg. 64 of the Qtr 4 Cumulative report) Rehabilitation of 32 km of urban unpaved roads budgeted 120,423,000= spent 300,192,000= (pg. 70 of the Qtr 4 Cumulative report) Periodic maintenance of 46 km of district roads ; and routine maintenance of 206 km of district roads-road gangs both budgeted at 191,118,000= and spent 144,788,000= (pg. 70 of the Qtr 4 Cumulative report) 	
,	Assessment area: Human Resource Management				

6	LG has substantively recruited and appraised all Heads of Departments Maximum 5 points on this Performance Measure.	• Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2	2	Performance agreements viewed and appraisal reports verified (dated 20th July 2017, 1st July 2017, 16th Nov 2017, 10th March 2017 etc) from individual files of HoDs revealed that 14 out of 14 HODs (100%) in Butambala district were appraised using/following the guidelines issued by MoP during the FY 2016/17. A copy of standard guidelines similar to those provided by MOPs was in possession of the Principle Human Resource Officer.
		• Evidence that the LG has filled all HoDs positions substantively: score 3	0	• According to records held in individual files and appointment letters viewed for all heads of department and units verified 9 out of 14 heads are substantively filled. This is 64% of positions filled. Some of the appointment letters had minute ref as follows: DSC/70/2014, DSC/87/2017, DSC/127/2017, DSC/63/2014, DSC/88/2011, DSC/18/2017,
7	The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY. Maximum 4 points on this Performance Measure	• Evidence that 100 percent of staff submitted for recruitment have been considered: score 2	2	According to DSC minutes and submission lists viewed in Butambala district, a total of 58 positions were submitted for recruitment at DSC during FY 2016/17. Submission lists were consulted and contained all the 58 candidates considered. Minute extracts dated 7th April 2017 and 2nd May 2017were used to act on the recruitment submissions from CAO's office. Adverts run in New Vision (dated 30th Oct 2017 and 15th March 2017) as well as internal advert dated 17th March 2016 also added more evidence about consideration of these submissions. Each one of them signed by CAO, These submissions viewed indicate that all the 58 positions were considered for recruitment. That is 100%

		• Evidence that 100 percent of staff submitted for confirmation have been considered: score 1	1	• Submission lists for confirmation viewed at DSC indicate that 55 cases were submitted from CAO's office to DSC. A list of confirmed staff during FY 2016/7 indicated that only all the 58 staff submitted were confirmed as per minute extracts of DSC of 26th Oct 2016 with Ref CR/D/10404, min extract of 2nd May 2017 with reference number DSC/45/2016. Submission lists of 8th Dec 2016, 21st March 2017 and 5th May 2017 also confirm that 55 staff were considered and eventually confirmed. Thus 55 out of 55 represents 100% of staff confirmed during FY 2016/17 only.
		• Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1	1	 According to the submission lists looked into for Butambala district, there were no cases submitted for disciplinary action.
8	Staff recruited and retiring access the salary and pension payroll respectively within two months Maximum 5 points on this Performance Measure.	• Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3	0	 Minute extracts (min 76/2017, min 85/2017, min 85/207, etc) at DSC for FY 2016/17 indicated case by case no recruited staff accessed salary payroll within two months of recruitment. Salary payroll for January 2017 was displayed and indicated none of the newly staff accessed salary payroll after one month of recruitment. Submissions for recruitment including those of ref 156/1 of 6th March 2017 and ref 156/01 of 4th May 2017.for FY 2016/17 were all viewed and confirmed that 55 staff as received at DSC. All these 55 staff submissions were considered and accordingly recruited using three types of advertisements i.e. Newspaper adverts, internal and external adverts displayed on notice boards but none of them accessed salary payroll within two months of recruitment.

		• Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2	0	Out of 7 staff who retired during FY 2016/17, none of them accessed pension payroll within the first 2 months of retirement. Staff retired on various dates including 6th Dec 2016, 2nd June 2016, 19th Sept 2016, 25th Feb 2017 etc. For example the staff who retired on the 6th Dec 2016 and 18th Sept 2017 only accessed pension payroll in January 2018 and May 2018 respectively. The staff who accessed pension payroll earliest of all the retired staff of FY 2016/17 did so after at least 9 months.
	essment area: Revenu	e Mobilization		
9	The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one) Maximum 4 points on this Performance Measure.	• If increase in OSR from previous FY but one to previous FY is more than 10% : score 4 points • If the increase is from 5 -10% : score 2 point • If the increase is less than 5% : score 0 points.	4	The district LG OSR increased by 53% from UGX 128,755,986 in the FY 2015/16 to UGX 196,921,237 in the FY 2016/17. (Source: Butambala District Final accounts for FY 2016/17).
10	LG has collected local revenues as per budget (collection ratio) Maximum 2 points on this performance measure	• If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within /- 10% : then 2 points. If more than /- 10% : zero points.	2	The actual/budget revenue collection ratio for the FY 2016/17 was 104% (UGX 196,921,237/190,000,000). This resulted in a budget variance of -4% which is lower than - 10%. (Source: Butambala District accounts for FY 2016/17)

11	Local revenue administration, allocation and transparency Maximum 4 points on this performance	• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2	0	There was evidence that the DLG collected a UGX 57,191,636 in Local Service Tax at the District Headquarters and remitted UGX 8,830,000 to Sub-Counties (15.5%). The district was therefore not compliant in remitting the statutory revenues (65%) to the LLGs.
	measure	 Evidence that the LG is not using more than 20% of OSR on council activities: score 2 	2	The LG spent UGX 14,554,000 in the FY 2016/17 on Council allowances and emoluments compared to UGX 128,755,986 collected in the FY 2015/16. This was 11.3% of OSR for the FY 2015/16 (less than 20%) a per the Local Governments Act CAP 243. (Source: the Butambala DLG final accounts for the FY 2016/17). The district was therefor compliant with the law.
Asse	essment area: Procure	ment and contract manage	ement	
12	The LG has in place the capacity to manage the procurement function Maximum 4 points on this performance	• Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2	2	• The positions are substantively filled. The Senior Procurement Officer was appointed of 3 May 2011 as per the CAO's letter Ref. CR/D/10653 dated 3 May 2011 and DSC Min DSC/88/2011. The Procurement Officer was appointed on 23 May 2017 as per CAO's letter Ref. CR/D/0154 DSC Min DSC/85/2017
	measure.	• Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1	1	The TEC produced Evaluation Reports and submitted to the Contracts Committee. E.G Evaluation report for the renovation of Gomb Hospital Phase I (BUTA608/WRKS/16- 17/00004) signed on 19 December 2016 which recommended Pharm Investments Lto at evaluated price of UGX 471,257,491.
		 Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 	1	The Contracts Committee minutes were available and they considered TEC reports. E.g. Contracts Committee meeting of 21 December 2016 (Min 133/12/2016-17) considered and approved the recommendations of the TEC and awarded BUTA608/WRKS/16-17/00004 to Pharm Investments Ltd.

13	The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed. Maximum 2 points on this performance measure.	• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2	2	 Review of the procurement and disposal plan for FY 2017-18 shows that the infrastructure projects are reflected in the annual work plan. E.g. Renovation of Gombe Hospital Maternity Ward is item no. 27 in the Procurement Plan and is matching with item no. 1 under Capital Purchases (Hospital construction and Rehabilitation), page 64 Workplan 5: Health of the Local Government Workplan Vote:608 Butambala District. Procurement in FY 2016-17 was as planned, e.g. Construction of Ferro cement tanks at selected points in the district (BUTA/WRKS/16-17/00006) item no.6 page 1 of the contracts register is reflected in the procurement plan FY 2016-17 as item no. 28 with planned value of UGX 8,000,000. Although construction of a septic tank and piped water system at DLG HQ (BUTA/WRKS/16-17/00011) was not in the procurement plan of FY 2016-17, it was approved by Council (D.C.Min02/04/17).
14	The LG has prepared bid documents, maintained contract registers and	• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2	2	• Review of the consolidated procurement plan for FY 2017/18 shows that 100% of the bid documents for infrastructure were prepared by August 30.
	procurement activities files and adheres with established thresholds. Maximum 6 points on this performance measure	• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2	2	 The Contracts Register for FY 2016-17 was available and all procurement were entered, last entry is BUT608/WRKS/16-17/00012. The procurement files were complete with relevant documents such as copy of pre-qualification and solicitation documents, record of bid opening and closing, evaluation reports, contracts committee decisions, notice of best evaluated bidder, Letter of Bid Acceptance, among others.

		• For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.	2	• Projects reviewed indicate that the procurement thresholds were adhered to. E.g Open Bidding (OB) for Contracts BUTA608/WRKS/16-17/00004 valued at UGX 471,257,491 and BUTA608/WRKS/16- 17/00001 valued at UGX 84,039,600 are within the OB threshold of more than UGX 50,000,000. Contracts BUTA608/WRKS/16- 17/00006 valued at UGX 24,412,430 and BUTA608/WRKS/16-17/00007 valued at UGX 8,999,978 are within Selective Bidding threshold of not exceeding UGX 50,000,000.
15	The LG has certified and provided detailed project information on all investments Maximum 4 points on this performance measure	• Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2	2	• Completed works projects from FY 2016/17 had interim Certificates in the files e.g. BUTA608/WRKS/16-17/00006 signed 13 February 2017 and Completion Certificate 2 for BUTA608/WRKS/16-17/00007 issued on 20 February 2017.
		• Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2	0	Project sites visited were not clearly labelled e.g. Renovation works at Gombe Hospital.
Asse	essment area: Financia	al management		
16	The LG makes monthly and up to- date bank reconciliations Maximum 4 points on this performance measure.	• Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4	4	All the monthly reconciliations for the FY 2016/17 and those for the period July to January 2018 were in place. They were all signed by the sector accountants and verified by the Chief Finance Officer.

17	The LG made timely payment of suppliers during the previous FY Maximum 2 points on this performance measure	• If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2.	2	A sample of 9 transactions from department showed that all payments were fully within th period of payment timelines of 30 days as indicated in Contracts. The range of paymen timeline for the sampled vouchers was from days to 29 days which was within the maximum recommended period of 30 days.
18	The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations Maximum 6 points on this performance	• Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.	3	The Head of Internal Audit department (Mr Muwagga Fred) was substantively appointer a Principal Internal Auditor on 1st October 2010 under DSC/127/2017 in a letter signed by the then CAO. He is therefore higher tha the level of a substantive Senior Internal Auditor as required by the LGPA Manual. The district internal audit department also produced all the four quarterly internal audit reports.
	measure.	• Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries: score 2.	2	There was evidence that the LG provided information to Council and LGPAC on the status of implementation of internal audit findings. The District Internal Auditor produced and submitted the 1st quarter, 2nd quarter, 3rd quarter and 4th quarter to LGPAC on 18th October 2016, 17th January 2017, 10th April 2017, and 27th July 2017 respectively to the LGPAC, CAO and the Speaker LCV. The quarterly internal audit reports, which included the status of implementation of audit findings, were duly acknowledged by the above offices.
		• 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	0	The Accounting Officer and the LGPAC received all the internal audit but the LGPAC did not discuss any of the internal reports in the FY 2016/17. It had just concluded the 1s and 2nd quarter reports for the FY 2016/17.

19	The LG maintains a detailed and updated assets register Maximum 4 points on this performance measure.	• Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4	4	The LG maintains updated assets registers. The latest update on the assets register was the entry of the following District Road equipment: Komatsu Wheel loader no UG1893W received on 18/07/2017 and UXIT MOTOR Grader No UG 1702W received from MOWTS. There was no evidence of any othe asset that was not registered in the Assets Register.
20	The LG has obtained an unqualified or qualified Audit opinion Maximum 4 points on this performance measure	Quality of Annual financial statement from previous FY: • unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0	4	The LG received unqualified audit opinion on the financial statements for the FY 2016/17. (source: The OAG audit report for the FY 2016/17 for the District)
Ass	essment area: Governa	ance, oversight, transparer	icy and a	accountability
21	The LG Council meets and discusses service delivery related issues Maximum 2 points on this performance measure	Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2	2	 The following sets of Minutes of District Council meetings reviewed for FY 2016/17 confirmed that the Council discussed service delivery related issues: a) Meeting of 14th/03/2017 approved new district structure, approved supplementary budget (CAIIP -Maize Mill/processing facility 5.9m and OPM), and discussed General Purpose Committee report. b) Meeting of 20th/04/2017 discussed supplementary budget FY 2016/17 included 127,210,000= in support of health e.g. immunisation (UNICEF and WHO), OSR - Royalties from Energo Co. 16,275,000= for repair of CAO's vehicle; and laying of the budget for FY 2017/18 c) Meeting of 16th/05/2017 discussed PAC recommendations for FY 2015/16 within the state of district affairs speech, Committee reports General purpose; Production, approved District Budget estimates for FY 2017/18.

22	The LG has responded to the feedback/complaints provided by citizens Maximum 2 points on this Performance Measure	• Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 2.	2	 The District Planner, Mr Kato Patrick Perry, had been assigned by the CAO in a letter dated 11th July 2016 under reference no. CR.D.10202 as Focal Person for Budget Transparency Initiative which included responding and giving feedback on complaints or issues raised by the public. Cases of undisciplined teachers who had inflicted violence on pupils were forwarded to relevant authorities for redress. For Mr Kabuusu Patrick who had inflicted violence on 5 pupils of Seeta Bweya M. P.S was reported by head teacher in letter (un-dated) and matter was channelled to the Probation officer by the Inspector of schools on 9th/08/2017 for further action.
23	The LG shares information with citizens (Transparency)	Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2	0	• Though the LG Payroll November 2017 had been posted on the notice board at the District headquarters there was no evidence of display of the Pensioner schedule.
	Total maximum 4 points on this Performance Measure	• Evidence that the procurement plan and awarded contracts and amounts are published: score 1	1	• Procurement plan 2017/18 and awarded contracts 2017/18 and amounts were published on the notice boards at the District headquarters.
		• Evidence that the LG performance assessment results and implications, are published e.g. on the budget website for the previous year (from budget requirements): score 1.	0	N/A. The Central Government did not conduct the Annual Performance Assessment for LGs in FY 2016/17
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24	The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens Maximum 2 points on this performance measure	• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1	1	 Butambala DLG had communicated and explained guidelines, circulars and policies to LLGs as was demonstrated by: Fact that in the DTPC meeting of 2nd/05/2017 (attended by LLG staff –SAS and CDO Kibibi) the New Taxi Park Policy effective 1st March 2017 was discussed under Min. 10/5/17. CAO's letter to all HODs /Sectors and Senior Assistant Secretaries dated 13th/03/2017 under ref. no. 103/1 communicating guidelines on Preparation of work plans and budgets for the FY 2017/18.
		• Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc) with the public to provide feed-back on status of activity implementation: score 1.	1	• Report by CDO Budde SC dated 28th/04/2017 indicated that community meetings were conducted in Budde SC under Uganda Women Entrepreneurship (UWEP) programme
Asse	essment area: Social a	nd environmental safeguar	ds	
25	The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles	• Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2.	2	• Minutes of the Gender mainstreaming meeting for Heads of Department held on 4 October 2016 and distribution list for guidance material on gender budgeting in sector plans and activities show that the Gender Focal Person provided support and guidance to sector departments to mainstream gender in their activities.
	Maximum 4 points on this performance measure.			

		• Evidence that gender focal point has planned activities for current FY to strengthen women's roles and that more than 90% of previous year's budget for gender activities has been implemented: score 2.	2	 The work plan for FY 2017-18 indicates that the gender focal person has planned activities to strengthen women's roles e.g. support to women's councils, women's entrepreneurship program (UWEP), gender mainstreaming at DLG HQ and at LLGs, Youth Livelihood Programme, among others. A comparison of the budget for gender activities (women's entrepreneurship program, support to women's councils, Youth Livelihood Programme) against availed evidence of expenses (Community services Vote ledger, YLP accountability dated 16 June 2017) indicates that 98% of FY 2016-17 budget was used.
26	LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition	• Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 2	2	• Environmental screening is being done for projects e.g. Environmental and Social Screening Reports dated 18 August 2016 for Renovation of Gombe Hospital and borehole drilling at Butende and Kankesa.
	Maximum 6 points on this performance measure	• Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1	1	The LG integrates environmental and social management plans in the contract bid documents e.g. in the BOQ of contract BUT608/WRKS/16-17/00004 and BUT608/WRKS/16-17/00001. There is need to include environment and social management plans in the Conditions section of the Contracts.
		• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc): score 1	1	There is proof of land ownership for a borehole at Simba village and schools e.g. Nakatooke UMEA P/S, Mabanda and Kamugobwa C/U primary schools.

	• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2	2	Environmental and Social Mitigation Certification forms are issued for all completed projects e.g. Certificate Form 020 for the drilling of 10 deep boreholes (BUT608/WRKS/16-17/00001) and Certificate Form 021 for the construction of seven Ferro Tanks (BUT608/WRKS/16-17/00006) both dated 25 January 2018.
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Educational Performance Measures

Butambala District

(Vote Code: 608)

Score 80/100 (80%)

608 Butambala District

No.	Performance Measure	Scoring Guide	Score	Justification			
Asse	Assessment area: Human Resource Management						
1	The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7	• Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4	4	According to staff lists and list of schools examined, there are 545 teachers, which includes head teachers and deputy head teachers, all of whom are budgeted for in the current FY 2017/18.			
	teachers per school) Maximum 8 for this performance measure	• Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4	4	The list of schools and staff lists for FY 2017/18 were reviewed for all the 68 government-aided schools in Butambala district. The review showed that a head teacher and at least 7 teachers have been deployed in each school.			
2	LG has substantively recruited all primary school teachers where there is a wage bill provision Maximum 6 for this performance measure	• Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0	3	The LG approved structure for primary school teachers for Butambala district provides for 612 teachers. Verification from the HRM department showed that 96% of the structure for teachers with a wage bill provision has been filled so far.			
3	LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision. Maximum 6 for this performance measure	• Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6	6	The approved Local Government staff structure for Butambala district provides for 2 inspectors of schools, both of which are already substantively filled – according to the recruitment plan submitted to HRM for FY2017/18.			

4	The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.	Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of Primary Teachers: score 2	2	The recruitment plan for FY 2017/18 dated 7 July 2017 was submitted to the HRM department, which acknowledged receipt on the same date, specifying several positions for teachers to be filled as follows: • 22 head teachers; 46 deputy head teachers; 11 senior education assistants; and 30 education assistants.
	performance measure	Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of School Inspectors: score 2	2	The 2 positions for inspectors of schools are already filled as per approved structure and the recruitment plan for 2017/18.
5	The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.	Evidence that the LG Education department appraised school inspectors during the previous FY • 100% school inspectors: score 3	3	• Butambala district is keen to appraise school Inspectors. There are only two School Inspectors i.e Namayengo Rose who is Senior Inspector of Schools was apprised on the 2nd July 2016 by Walugembe, Matovu Abudu who is Inspector of Schools was appraised on the 5th July 2017 by Lwanga Henry. Therefore personal files and appraisal reports verified confirm that both Inspectors of Schools were appraised. That is 100%.
	Maximum 6 for this performance measure	Evidence that the LG Education department appraised head teachers during the previous FY. • 90% - 100%: score 3 • 70% - 89%: score 2 • Below 70%: score 0	2	Out of 68 Primary Schools found in Butambala district, a 10% sample was obtained giving 10 Primary schools. On viewing records in personal files of Head Teachers of these 10 primary schools, it is found that only 7 out of 10 were appraised. This gives a 70 % of the total number of head teachers in Butambala.
Asse	essment area: Monito	ring and Inspection		

6	The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools Maximum 3 for this performance measure	• Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1	1	Communication between the education department and the schools is on course, evidenced by the signed lists of dissemination of information and distribution of documents from the national level to the schools. Such documents include: - Circular dated 25 April 2017 from UNEB on "Warning Against Non-declaration of Private (Non- UPE) Candidates in Schools" - Circular dated 31 Oct 2016 from MoES on "School Feeding Programme in Educational Institutions" - Circular dated 25 April 2017 from MoES on "Mass Registration of Learners"
		• Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level, including on school feeding: score 2	2	Meetings between the education department and the head teachers to explain and sensitise on the guidelines and other documents received from the national level are taking place as required. This was verified by examining minutes of such meetings and the lists of attendants, eg: - Meeting dated 14 Dec 2017 on Teachers and Learners Absenteeism. - Other meetings dated 9/2/2017; 30 Nov 2016; 20 Aug 2016; and 8 June 2017.

7	The LG Education Department has effectively inspected all private and public primary schools Maximum 12 for this performance measure	• Evidence that all private and public primary schools have been inspected at least once per term and reports produced: o 100% - score 12 o 90 to 99% - score 10 o 80 to 89% - score 8 o 70 to 79% - score 6 o 60 to 69% - score 3 o 50 to 59% score 1 o Below 50% score 0.	8	Inspection reports examined reveal that inspection of both private and public primary schools is carried out at least twice a term. The current school inspection coverage of government-aided public primary schools stands at 100%, and 60% for private schools which affects the score according to the following inspection reports: - 1st Quarter report 2016/17 dated 23 Aug 2016; - 2nd Quarter report 2016/17 dated 8 Feb 2017; - 3rd Quarter report 2016/17 dated 25/5/2017; and - 4th Quarter report 2016/17 dated 19/July 2017.
8	LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations Maximum 10 for this performance measure	• Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4	4	Minutes of meetings held 25 April 2016, 27 Oct 2016, and 7 Feb 2017 are some of the indications that inspection reports are discussed by the education department and recommendations for corrective action generated.
		• 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	2	Submissions of inspection reports to DES were acknowledged by the latter on the following dates: - 8 Feb 2017; - 19 July 2017; - 25 May 2017.
		• Evidence that the inspection recommendations are followed-up: score 4	4	Follow-ups on inspection recommendations are being carried out as required, evidenced by some of the communications to head teachers and teachers dated 21 April 2016; 13 June 2017; 16 June 2017; and 11 Oct 2017.
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9 The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES	• Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5	5	Statistical returns for primary schools for 2016 and 2017 were examined for 5 schools namely Kayenje C/S Primary School, Saad Senene Primary School, Ssenyomo Primary School, Gombe Umea Primary School, and Sempiira Memorial Primary School. The compilation of the data was found to be accurate and consistent with both EMIS reports and OBT.
Maximum 10 for this performance measure	Evidence that the LG has submitted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and OBT: score 5	5	School enrolment data for Kayenje C/S Primary School, Saad Senene Primary School, Ssenyomo Primary School, Gombe Umea Primary School, and Sempiira Memorial Primary School were examined for 2017 in order to verify whether the entries are correct. The validation established that the data were accurate/consistent with EMIS reports and OBT.
Assessment area: Govern	nance, oversight, transparency and acco	untabilit	у
 The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council Maximum 4 for this performance measure 	• Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etcduring the previous FY: score 2	0	The minutes of the General Purpose Committee (includes Education and Health) meetings reviewed confirmed that the Committee held meetings and discussed service delivery issues: • Meeting of 27th/09/2016 discussed departmental reports including Education and Health • Meeting of 15th 12/2016 discussed departmental reports • Meeting of 10th/05/2017 discussed workplans and budgets for FY 2017/18 However it was not evident that Committee had discussed LG PAC reports.

		• Evidence that the education sector committee has presented issues that requires approval to Council: score 2	2	 Review of the minutes of the District Council of the following dates evidenced that the General Purpose Committee (includes Education and Health) presented to the District Council issues that required approval of Council: a) Meeting of 14th/03/2017 approved new district structure, approved supplementary budget and discussed General Purpose Committee report. b) Meeting of 20th/04/2017 laying of the budget for FY 2017/18. c) Meeting of 16th/05/2017 discussed PAC recommendations for FY 2015/16 within the state of district affairs speech, Committee reports General purpose, approved District Budget estimates for FY 2017/18.
11	Primary schools in a LG have functional SMCs Maximum 5 for this performance measure	Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0	5	All the primary schools in Butambala district have functional SMCs, which meet regularly and submit reports to the education department, evidenced by reports as dated here below: - 28 Sept 2017; - 20 Oct 2017; - 15 July 2016; - 3 June 2017; - 13 March 2017 In brief, all the SMCs are 100% functional.
12	The LG has publicised all schools receiving non-wage recurrent grants Maximum 3 for this performance measure	• Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3	3	List of schools receiving non- wage recurrent grants available and well displayed on the public notice board at the district headquarters.

13	The LG Education department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30: score 4	0	Request was made for the purchase of a double cabin pick- up vehicle and submitted to PDU on 1 Sept 2017, later than deadline of April 30.
14	The LG Education department has certified and initiated payment for supplies on time Maximum 3 for this performance measure	• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points	3	The education department certified and recommended payments to suppliers on time. A sample of 3 payment vouchers and 2 contracts/LPOs which were examined and compared with the payments registrar indicated that payments were made within a range of 5 days and 15 days compared to maximum period of 30 days indicated in the LPOs .
Asse	essment area: Financ	ial management and reporting		
15	The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure	• Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by mid-July for consolidation: score 4	0	Verification from the Planning unit indicated that the annual performance reports were submitted on 4 Sept 2017, much later than the stipulated date of mid-July.

16	LG Education has acted on Internal Audit recommendation (if any) Maximum 4 for this performance measure	• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points o If all queries are not responded to score 0	2	The education department's status of implementation of internal audit issues were given. For example, the District Education officer submitted the status of implementation on the internal audit recommendation in a letter REF CR/305/1 dated 08/08/2017.
Asse	essment area: Social	and environmental safeguards		
17	LG Education Department has disseminated and promoted adherence to gender guidelines	• Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc: Score 2	2	Reports dated 21, 22, 23 June 2017 and 12 July 2017 show that there is active collaboration between the education department and the focal point person providing guidance to girls and boys on hygiene, sanitation, reproductive health, life skills, etc
	Maximum 5 points for this performance measure	• Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2	2	Collaboration with gender focal person is on course, evidenced by reports dated 21, 22, 23 June 2017 and 12 July 2017 and issuing of sanitary towels to girls on 3 Aug 2016
		• Evidence that the School Management Committee meet the guideline on gender composition: score 1	1	Lists of SMCs of various schools indicated compliance with guideline on gender composition, evidenced by the following sampled schools: - Kayenje C/S Primary School; - Saad Senene Primary School; - Ssenyomo Primary School; - Gombe Umea Primary School; and - Sempiira Memorial Primary School.

18 LG Education department I ensured that guidelines or environment managemen disseminated Maximum 3 for this performance measure	 • Evidence that the LG Ed department in collaboration • Evidence that the LG Ed department in collaboration • Environment department in guidelines on environment guidelines on environment management (tree plantin management, formation or environmental clubs and e education etc): score 3: 	n with nas issued tal g, waste f	Collaboration between the education department and that of environment is good, evidenced by issuing of guidelines on environment issues, eg: - Circular on tree planting project dated 8 Sept 2016; r - Respone of the head teacher of St Kizito Kasoso Primary School to the DEO on tree planting dated 13 Oct 2016.
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Health Performance Measures

Butambala District

(Vote Code: 608)



No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Human res	source planning and management		
1	LG has substantively recruited primary health workers with a wage bill provision from PHC wage Maximum 6 points for this performance measure	Evidence that LG has filled the structure for primary health workers with a wage bill provision from PHC wage for the current FY • More than 80% filled: score 6 points, • 60 – 80% - score 3 • Less than 60% filled: score 0	6	 The wage budgetary allocation for 2016/17 was 1,766,201,000/= and 1,820,249,000/= (103%). There was a supplementary budget to MOFPED The staffing level according to established structures was 60.6%, implying that the budgetary is allocations from the responsible Ministries was insufficient
2	The LG Health department has submitted a comprehensive recruitment plan to the HRM department Maximum 4 points for this performance measure	Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers: score 4	4	- There was a comprehensive recruitment plan for 2017/18 dated July 31, 2017 covering all vacant positions, that was submitted by DHO to the CAO.

 The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY. Maximum 4 points for this performance measure Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4 The HRS generated lists are in place and indicated that staff are deployed as in the staff deployment lists and OBT reports. The discrepancies in staff lists are due to local transfers when the salaries are not yet transferred to new stations of deployment. 		Evidence that the health facility in- charge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0	0	 There are 5 Health Centre 3s in Butambala district with In-charges as follows: Kyagulanyi Denis (Bulo HC3), - appraisal report of 4th Oct 2018. Lutaaya Ibrahil (Kitimba HC3) – appraisal report of 1th Dec 2016. Kakeeto Dominic (Epicentre HC3) – no evidence of appraisal found in his personal file. Walusansa (Ngando HC3) – no evidence of appraisal found in his personal file Kawuki Ronie (Kyabadaaza HC3) – appraisal report of 1th Dec 2016. Therefore, out of 5 HC3s, only two In-charges were appraised during FY 2016/17, that is 40%.
Assessment area: Monitoring and Supervision	The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY. Maximum 4 points for this performance measure	department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4	4	are in place and indicated that staff are deployed as in the staff deployment lists and OBT reports. The discrepancies in staff lists are due to local transfers when the salaries are not yet transferred to new

5	The DHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities Maximum 6 for this performance measure	• Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3	3	 Since July 2016 the district has received the following: o Circular on Avian flue - January 16, 2017 o August 26, 2016 - DG circular on Management of donations o Health sector quality improvement framework, August 14, 2016 o May 16, 2017 - PS circular on reporting on community quarterly data o HIV consolidated guidelines The evidence of receipt and distribution of the guidelines was scanty
		• Evidence that the DHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3	3	- The district held regular DHT meetings with more that 10 in-charges per quarter. The agenda of the meetings were, among other things, to discuss supervision findings, dissemination of any new guidelines and policies from the ministry
6	The LG Health Department has effectively provided support supervision to district health services Maximum 6 points for this performance	Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3	3	- There were four quarterly supervision reports of October 10, 2016, January 10, 2017, May 16, 2017 and August 22, 2017. Gombe hospital was supervised in all the quarters. No HCIV in the district
	measure	L	1	

		Evidence that DHT has supervised lower level health facilities within the previous FY: • If 100% supervised: score 3 points • 80 - 99% of the health facilities: score 2 • 60 - 79% of the health facilities: score 1 • Less than 60% of the health facilities: score 0	3	- There were four quarterly supervision reports of October 10, 2016, January 10, 2017, May 16, 2017 and August 22, 2017. All facilities 100% were supervised every quarter
7	The Health Sub- district(s) have effectively provided support supervision to lower level health units Maximum 6 points for this performance measure	Evidence that health facilities have been supervised by HSD and reports produced: • If 100% supervised score 6 points • 80 - 99% of the health facilities: score 4 • 60 - 79% of the health facilities: score 2 • Less than 60% of the health facilities: score 0	6	- The district has no HSD But, there were four quarterly supervision reports of October 10, 2016, January 10, 2017, May 16, 2017 and August 22, 2017. All facilities 100% were supervised every quarter
8	The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up	• Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4	4	- There are regular DHT meetings with all in-charges where supervision reports are discussed. Quarter 1 meeting was held on August 20, 2016, quarter was on Dec 20, 2016, quarter 3 was on March 21, 2017, and Quarter 4 on June 20th, 2017.
	Maximum 10 points for this performance measure	• Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6	6	- There are issues especially on disciplinary actions that were taken on staff. On July 31, 2017 the DHO wrote to CAO for a disciplinary action to be taken on a staff, the staff was summoned to the reward and sanctions committee on November 30, 2017. This was true for two staff.

• Evidence that the LG has submitted accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports and OBT: score 10	10	- There are 16 facilities receiving PHC and 14 of them are public and 2 are PNFP facilities. There are two facilities which are reflected on the OBT as receiving PHC but they were actually blocked through a press release by Ministry of Health and signed by the Hon Minister. So the funds were re- allocated at district level to other facilities.
ce, oversight, transparency and accountabi	lity	
• Evidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2	0	The minutes of the General Purpose Committee (includes Education and Health) meetings reviewed confirmed that the Committee held meetings and discussed service delivery issues: • Meeting of 27th/09/2016 discussed departmental reports including Education and Health • Meeting of 15th 12/2016 discussed departmental reports • Meeting of 10th/05/2017 discussed workplans and budgets for FY 2017/18 However it was not evident that Committee had discussed LG PAC reports.
	 accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports and OBT: score 10 ce, oversight, transparency and accountabile e, oversight, transparency and accountabile e, oversight, transparency and accountabile for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: 	 accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports and OBT: score 10 ce, oversight, transparency and accountability e vidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY:

con	vidence that the health sector nmittee has presented issues that uire approval to Council: score 2	2	Review of the minutes of the District Council of the following dates evidenced that the General Purpose Committee (includes Education and Health) presented to the District Council issues that required approval of Council: a) Meeting of 14th/03/2017 approved new district structure. b) Meeting of 20th/04/2017 laying of the budget for FY 2017/18. c) Meeting of 16th/05/2017 discussed PAC recommendations for FY 2015/16 within the state of district affairs speech, Committee reports, and approved District Budget estimates for FY 2017/18.
Committees and Hos Hospital Board are HUI operational/functioning held reso san Sco	dence that health facilities and spitals have functional MCs/Boards (established, meetings d and discussions of budget and ource issues): • If 100% of randomly npled facilities: score 5 • If 80-99% : are 3 • If 70-79%: : score 1 • If less n 70%: score 0	0	- Bulo HCIII, Kyabadaaza HCIII, Epicentre HCIII, Kiziiko HCII and Gombe hospital were assessed. Bulo has new board that has met once, Kyabadaaza has no HUMC, Epicentre and Kiziiko were not meeting regular. Only the hospital was regular.
wage recurrent grants hea	vidence that the LG has publicised all alth facilities receiving PHC non-wage urrent grants e.g. through posting on plic notice boards: score 3	3	- The list of the facilities receiving PHC allocations was available and posted on the DHO notice board.
Assessment area: Procurement a	nd contract management		

13	The LG Health department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in	• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2	0	- The procurement plan was available and was submitted on April 23, 201 for 2017/2018 and the one for 2016/2017 was submitted on July 25, 2016 which were both late
	the approved Sector annual work plan and budget Maximum 4 for this performance measure	Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2	0	The procurement requests PPI were submitted, on October 18, 2016 for capit development.
14	The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS Maximum 8 points for this performance measure	 Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time: 100% - score 8 70-99% - score 4 Below 70% - score 0 	8	- The requests to NMS plans and plans were don electronically and were seen for all facilities
15	The LG Health department has certified and initiated payment for supplies on time Maximum 2 for this performance measure	• Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points	2	The LG Health department certified and recommended payments to suppliers on time. Health department had only 3 payment voucher contracts/contract indicated that payment wat made between 3 day and 17 days respectively compared to maximum period of 30 days indicated in the contracts and LPOs

16	The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure	• Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4	0	- The annual performance plan was submitted, but late after mid-July. They were also printed out from the system late, so the auto generated date for print out could also not be considered.
17	LG Health department has acted on Internal Audit recommendation (if any) Maximum 4 for this performance measure	Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0	2	The health department gave the status of implementation of internal audit findings. The responses was given in a letter dated 15th August 2017 signed by the Medical Superintendent of Gombe Hospital responding to all the 7 audit findings and was received by the DIA on 17th August 2017.
Asse	essment area: Social and	environmental safeguards		
18	Compliance with gender composition of HUMC and promotion	• Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2	2	- The HUMCs had at least two female members
	of gender sensitive sanitation in health facilities. Maximum 4 points	• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2	0	- There was no evidence that guidelines on sanitation had been issued by the district. Even the latrines at facilities, apart from one at Epicentre were not labelled according to sex of use.
19	The LG Health department has issued guidelines on medical waste management Maximum 2 points	• Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal : score 2 points.	0	- There was no evidence that the guidelines had been issued. However, in 3 out of five of the facilities visited there were old guidelines/SOPs on medical waste management provided by Mildmay



LGPA 2017/18

Water & Environment Performance Measures

Butambala District

(Vote Code: 608)

Score 84/100 (84%)

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Plannir	ng, budgeting and execution		
1	The DWO has targeted allocations to sub- counties with safe water coverage below the district average. Maximum score 10 for this performance measure	• Evidence that the LG Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: score 10	10	Butambala district has safe water coverage of 95% as per the Uganda Water atlas 2017. It has four sub counties and one Town Council and they are all at 95% the same as the district coverage and these are: Kibibi TC 95%, Bulo 95%, Ngando 95%, Kalamba 95% Budde 95%. As evidenced in the AWP FY 2017/18 submitted to MWE on 11th Aug 2017, the district is planning to construct two solar powered systems in Lugali RGC in Ngando S/C, Nakatooke RGC in Bulo S/C, Gombe-Kyabadaza (Budde s/c), Gravity Flow scheme in Lamala S/C and drill one new deep borehole in Wamala Village in Ngando S/C were planned and budgeted for. However Kibibi has been gazzeted as a Town council.

2	The LG Water department has implemented budgeted water projects in the targeted sub- counties (i.e. sub- counties with safe water coverage below the district average) Maximum 15 points for this performance measure	• Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15	15	Annual Progress report for the previous financial year (2016/17), that was submitted to MoWE dated 11th Aug 2017, was reviewed and found out that 4 Deep borehole were drilled and installed at Butende in Ngando S/C, Kankesa in Bulo S/C, Kibibi village in Kibibi S/C and Namilyango, Budde S/C. Then RWHT were constructed in Bukesa Prim. Sch in Ngando, Ngando Trading Centre in Ngando SC, Mitwetwe Kibibi S/C, Butalunga P/S in Ngando S/C, Muwenda Mutebi P/S in Ngando S/C. MWE had planned to do phase 1 of a piped water system in Kalamba and its on going. Therefore all the Sub counties were included in the budget and implemented as planned.
Asse	essment area: Monito	ring and Supervision		
3	The LG Water department carries out monthly monitoring and supervision of project investments in the sector Maximum 15 points for this performance measure	Evidence that the LG Water department has monitored each of WSS facilities at least annually. • If more than 95% of the WSS facilities monitored: score 15 • 80 - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60 - 69% monitored: score 5 • 50 - 59%: score 3 • Less than 50% of WSS facilities monitored -score 0	10	From the monitoring and supervision reports on file submitted to CAO . 7 Ferro cement tanks 3rd May 2017 7 Fero cement tanks were visited on 10th March 2017 14 bore holes March and March 2017 Out of 546 water facilities in the district, 440 water facilities were monitored. Therefore 80% of the water facilities in the district were monitored.

4	The LG Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE Maximum 10 for this performance measure	• Evidence that the LG has submitted accurate/consistent data for the current FY: o List of water facility which are consistent in both sector MIS reports and OBT: score 10	10	MIS reports submitted to MWE on 13th Aug 2018 and the OBT submitted to the District Planner were accurate and consistent. Both reports had the accurate and consistent data with same safe water Coverage of 39.9% and Functionality at 80%.
Asse	essment area: Procur	ement and contract management		
5	The LG Water department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4	4	From the DWO file it was established that a list of procurement requests for borehole siting, design and supervision of 3 deep boreholes, construction and up grading of water sources to solar powered system,in Nakatoke and Kugali, Borehole drilling at Wamala village at Ngando SC were submitted to PDU on 27th April 2017 (FY 2017/18), below the deadline (30th April 2017).
6	The DWO has appointed Contract Manager and has effectively managed the WSS	• If the DWO prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2	0	By 10th Feb 2017 Contract management plans were not on file in the DWOs office.
	Maximum 8 points for this performance measure	• If water and sanitation facilities constructed as per design(s): score 2	2	Two Rain water harvesting tanks were visited at Mitwetwe P/S, Kiwaala P/S and three deep boreholes at Kankeesa in Bulo S/C, Namilyango in Budde S/C and Kibibi Moslem SS They were well installed as per design in the BOQs.

		• If contractor handed over all completed WSS facilities: score 2	2	East Africa Boreholes Ltd Handed over WSS facilities on 27th April 2017 to the DWO that is: 4 deep boreholes drilled and installed for the FY 2016/17. JJemuva Enterprises Ltd, handed over 7 RWHTS in selected institutions, on 27th April 2017.
		• If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2	2	All the WSS that were done were fully certified by the DWO. Only two WSS projects were prepared and completed as given hereafter;. DWO Handed over a completion certificate on 28th April 2017 to JJEMUVA Enterprises Ltd, Under contract: Buta 608/wrks/16-17/00006 for the construction of 7 Ferro cement water tanks. DWO also handed over a completion certificate to East Africa boreholes Ltd, under contract No. Buta 608/wrks/16- 17/0001 28th April 2017.
the D (as p certif recor supp paym point		• Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points	3	The LG Water department certified and recommended the contract for payments to suppliers within the recommended timelines in the contract of 30 days. Sample of 3 payment vouchers and contracts/LPOs indicated that payments were made between 5 days and 13 days compared to maximum recommended timeline of 30 days indicated in the contracts and LPOs.
Assessme	nt area: Financi	ial management and reporting		

8	The LG Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 5 for this performance measure	• Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5	5	it was Evidenced that the department submitted the annual performance report for the previous FY 2016/17 to the planner on 11th July 2017.The planner acknowledged through signing. All quarterly reports were submitted to planner, though he didn't acknowledge reciept for the first three quarters but the auto date indicated: 1st Quarter submission 4th Sept.2017 2nd quarter submission 1st March 2017 3rd quarter 25th May 2017 Therefore all the reports were submitted to the Planner before mid July.
9	LG Water Department has acted on Internal Audit recommendation (if any) Maximum 5 for this performance measure	• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 5 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0	3	• The Water department responded to all the internal audit findings that had been raised. For example, the status of implementation of audit recommendations for the quarter 4 was submitted in a letter dated 9th July 2017 with 8 auditng findings which was received by the DIA on 3rd August 2017.here were no other audit findings relating to the water sector during the same financial year
Asse	essment area: Govern	ance, oversight, transparency and accou	ntability	

10	The LG committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council Maximum 6 for this performance measure	• Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3	0	under Quarter 4 in the sectoral committee of 10th may 2017, the DWO presented on the projects that were already done and presented on the proposed workplan to be done. During the presentation the DWO highlighted on the allocation of the new borehole to be drilled and constructed in Wamala village. The committee proposed the re- alocation of the borehole for wamala to Katabila B village. However it was not evident that submissions from the DWSCC were discussed
		• Evidence that the water sector committee has presented issues that require approval to Council: score 3	3	There was evidence that water sector issues are presented to council for approval. on 16th May 2017, under Minute, Min DC 03/05/17, the Chair sectoral committee presented the issue of reallocation of Wamala bore hole to Katabila B village and it was concluded that the borehole shouldn't be reallocated since Katabila B village was to benefit from a piped system.
11	The LG Water department has shared information widely to the public to enhance transparency	• The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2	2	By 10th Feb 2018 Budget and the water development grant releases were displayed on the district notice board.
	Maximum 6 points for this performance measure			

		• All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2	2	All the 5 WSS facilities visited were well labelled as below: Kibibi Muslim, Kibibi S/C, DWD 66188, DOC 31/01/2017, Funded by DWO Butambala. Kankesa, Bulo S/C, DWD66186, 01/02/2017, Funded by DWO Butambala. Namilyango, Budde S/C, DWD 16516, DOC 03/02/2017, Funded by DWO Butambala. Mitwetwe P/S, BUT/DWO/RHT01/PAF 2916-17 Contr:Jemuva Ent Ltd
		 Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2 	2	By 9th Feb 2017 Contract awards on contractors name and contract sum were displayed on the notice board for the last (FY) 2016/17 and current FY 2017/18 of all projects to be done under Water department.
12	Participation of communities in WSS programmes Maximum 3 points for this performance measure	• If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1	1	There was evidence that communities apply for WSS facilities and these are: High way Bivamuntuyo P/S, in BuddeS/C on 19th Oct 2016, Mitwetwe Parents school, Kibibi S/C, on 25TH Aug 2016,Namilyango, Budde S/C on 28th Nov 2013, Kankeesa village in Bulo S/C on 18TH Dec 2016.

		• Number of water supply facilities with WSCs that are functioning evidenced by collection of O&M funds and carrying out preventive maintenance and minor repairs, for the current FY: score 2	2	There was evidence of O&M fees collection in Lugali, Kasala, Kiwaala villages. Lugali had collected 280000/- and spent 94000/- for repairs. Kasala had collected 120000/ and spent 53000/ for repairs. Kiwaala had collected 98000/ and had no repairs yet.			
Asse	Assessment area: Social and environmental safeguards						
13	The LG Water department has devised strategies for environmental conservation and management	• Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2	2	Environmental screening was done for 4 deep boreholes in four villages and 7 Fero cement water tanks in 7 institutions and reports were on file by 18th Aug 2016.			
	Maximum 4 points for this performance measure	• Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1	1	There was evidence that environmental concerns raised (7 RWHT, 4 Boreholes) were followed up by the District Natural resources Officer and report was on file dated 25th January 2017.			
		• Evidence that construction and supervision contracts have clause on environmental protection: score 1	0	There was no evidence on environmental protection in the contracts signed with JJEMUVA Enterprises and East Africa boreholes Ltd for FY 2016/17 and 2017/18.			

14	The LG Water department has promoted gender equity in WSC composition. Maximum 3 points for this performance measure	• If at least 50% WSCs are women as per the sector critical requirements: score 3	3	Three WSCs for three deep boreholes o FY 2016/17were sampled in the report on file in DWOs office and they all had 50% women on the committees that is: Namilyango Borehole 3males 4 females Butende Borehole, 4 males 3 females Kankeesa Deep borehole 3 Males 4 females
15	Gender- and special-needs sensitive sanitation facilities in public places/RGCs. Maximum 3 points for this performance measure	• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3	0	One drainable latrine was visited at Kibibi mosque constructed, It has separate stances but not well marked (Gents, Ladies), the ramp was there.