

LGPA 2017/18

Accountability Requirements

Buyende District

(Vote Code: 583)

Assessment	Compliant	%
Yes	5	83%
No	1	17%

Summary of requirements	Definition of compliance	Compliance justification	Compliant
Assessment area: Annual performance contr	act		
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	Yes, the LG has submitted her annual performance contract of the forthcoming year by 30th June. The Performance Contract for Buyende DLG for the FY 2017/2018 was submitted to MoFPED and Ministry of Local Government on 26th June 2017 as per the respective dated ministry stamps on the cover letter of the Contract. Refer to the MoFPED Acknowledgement receipt for the submission of Final Form B' Serial number 0802 dated 26th June 2017 attached to the cover letter of the Performance Contract.	Yes
Assessment area: Supporting Documents for available	the Budget re	quired 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	Yes, the LG has submitted her annual performance contract of the forthcoming year by 30th June, and her Draft Performance Contract by 30th March 2017. However the Budget DOES NOT INCLUDE a Procurement Plan. The draft and final Performance Contract for Buyende DLG for the FY 2017/2018 was submitted to MoFPED on 30th March 2017 and 26th June 2017 respectively as per the respective dated ministry stamps on the cover letter of the Contract, and the MoFPED Acknowledgement receipt for the submission of Draft Form B (SN 0513), and Final Form B (SN 0802)	No

		Acknowledgement receipt and dated stamp for the submission of Q4 report' Serial number 0856 attached to the cover letter of the report.	
LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)	XXXXX	Yes, the quarterly budget performance report for all the four quarters for the FY2016/2017 was submitted and included all the four quarters. Quarter 1 report was received by MoFPED on 3 Nov 2016 as per the dated Ministry stamp on the cover letter of the submission. Quarter 2 report was received by MoFPED on 17th Feb 2017as per the dated Ministry stamp on the cover letter of the submission. Quarter 3 report was received by MoFPED on 26th April 2017 as per the dated Ministry stamp on the cover letter of the submission. Quarter 4 report was received by MoFPED on 31st July 2017 as per the dated Ministry stamp on the cover letter of the submission.	Yes

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 LG had 8 issues raised in the Intern Auditor General's findings These issues were all responded to in the letter to the PS/ST in a letter dated 21/03/2017 Ref No. BYD/10/01. This letter was received in the Internal Auditor General's office on 23rd/03/2017.	Yes
The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer	XXXXX	The LG received an unqualified audit opinion. This was verified from the District audited financial statement for FY 2016/17 that was obtained at the Office of the Auditor General	Yes



LGPA 2017/18

Crosscutting Performance Measures

Buyende District

(Vote Code: 583)

Score 50/100 (50%)

583 Buyende District

Crosscutting Performance Measures

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: Planning, budgeting and execution				

All new infrastructure projects in: (i) a municipality; and (ii) all Town Councils in a District are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans

Maximum 4 points for this performance measure.

Evidence that a municipality/district has: • A functional Physical Planning Committee in place that considers new investments on time: score 2.

No, while there is a Physical Planning Committee with 10 members, which meets and discussed building plan applications it is nor fully functional since period between application and plan review and approval exceeds the stipulated 28 days.

The Committee was set up in October 2017 when its members where appointed and inducted. Refer to official appointment letter written by the CAO on 21st October 2016 and the dated time stamp from the CAOs office to the District Physical Planner Buyende. A personalised copy of that letter was written to each of the 10 bearers that are legally form the Committee as per the Physical Planning Act 2010. (Copies of the letter are in file titled 'District Physical Planning Committee - Members Appointments).

The Building Plan registration book was reviewed, and the applications within that book were indeed presented and discussed by the Physical Planning Committee. After the plans are approved by the Committee, the approving authority endorses the plan. The Approving authorities are District Engineer, District Health Inspector, Physical Planner and CAO.

Refer to Minutes of the District Physical Planning Committee dated 15th March 2017 Minute 03/DDPC/31/09/2016/17 where the Physical Planner presented the building plan applications and accompanying building plans within Bugaya Trading Centre.

Sample 1 - Refer to application 38 by Tenywa Franco for a commercial and residential building which was registered in the Building Plan Book on 9th November 2016.

Sample 2 - Refer also to application 44 by Kyawo David for a commercial and residential building which was registered in the Building Plan Book on 9th November 2016.

The committee discussed and approved the plans as per notes within the aforementioned minutes. HOWEVER The applications under review where submitted on 9TH Nov 2016, and approved 15th March 2017 i.e. 68 working days which is MORE THAN THE REQUIRED 28 DAYS.

 All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2. 	0	No, the DLG has not done any post construction site inspection visits on order verify if new infrastructures have been built according to the submitted approved building plans.
• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.	2	Yes, the priorities in the AWP for the FY 2017/2018 are based on the discussions and outcomes of the annual budget conference for the same FY. The Budget conference was held 26 – 27 Oct 2016. As per the conference program, Activity 6 on Day 2 of the conference focused on development of the annual DLG priorities (Ref to Page 2 of report) Refer to the Budget Conference Report for the FY 2017/218 which was held on 2nd Nov 2016. The presentation made by the Water Department of their proposed Annual work plan for the FY 2017/2017 (Page 9 of the Budget conference report). These proposed activities are aligned to the final approved planned activities for the sector as listed on page 46 of the Annual Work Plan for the FY 2017/2018. Refer to the presentation made by the Production and Marketing Sector of their proposed Annual work plan for the FY 2017/2017 which is aligned to the final approved Production And Marketing sector plan in AWP for the FY 2017/2018 from Page 17 – 21. NB: A valid FY 2017/2018 AWP was shared. The AWP is fully signed by the CAO on Page iv, and the District Chairperson on Page iii.

		• 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	Yes, the capital investments in the approved Annual work plan for the FY 2017/2018 are derived from the approved DDP. The project profiles exist, and adhere to the LG planning guidelines format. They are 16 profiles in the DDP form Page 251 to Page 271. These project profiles also match the planned investments in the AWP for the FY 2017/2018. For Example project profile 1 under the Education Sector on Page 264 refers to class room construction (6 classroom blocks in 2 schools per year). This is reflected in the AWP 2017/218 on Page 101 under Output activity Classroom Construction and Rehabilitation where construction of 3 class room blocks was planned for in Butwasa P/S and Nakabira COPE P/S respectively.
		• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1.	1	Yes project profiles have been developed and compiled within the DDP Page 251 to 271 as per the LG Planning guidelines. These project profiles were discussed by the TPC within the respective department work plan submissions. Examples of such deliberations DTPC meeting held 7th January 2016 the meeting agenda 5 was listed as 'Presentation of Departmental Work plans 2016/2017. In this section, each DLG submitted a departmental Work Plan and BFP which included all planned investment projects. Information on the presentation and subsequent discussions can be found in minute Min5: BDLG/TPC/JAN/2016
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	Yes, the statistical abstract for FY 2016/2017 was developed and it contains gender disaggregated data. Refer to Page 6, Page 7, and Page 23 of the Buyende DLG statistical abstract for the FY 2016/2017. The abstract was however not discussed in the DTPC

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

Yes, there is evidence that the investment projects implemented were derived from the Annual work plan and that the Annual Work plan and budget were approved by Council.

Refer to the AWP for the FY 2016/2017, Page 55 of the Quarter 4 Education Sector Output 3 on Capital Purchases where procurement for 1 double cabin in the DEOs offices was planned for. This activity can be compared with the FY 2016/ 2017 Performance Report for Buyende DLG on Page 103 where a double cabin was procured for the DEO office as planned.

Also refer to AWP for the FY 2016/2017, Page 61 of the Quarter 4 under Water; under Output on Borehole Drilling and Rehabilitation where drilling of 15 boreholes in 5 s/c of Buyende was planned for. This activity can be compared with the FY 2016/ 2017 Performance Report for Buyende DLG on Page 111 where 15 boreholes in 5 s/c of Buyende drilled were implemented as planned.

(NB: The AWP FY 2016/2017 is valid and was approved on 24TH March 2016 under Min No5/BDLC/03/2015/16 para 2.)

		• 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	2	Yes, to a great extent, the investment projects in the previous FY were completed as per the work plan by the end of the FY. In order to verify the percentage of completion of all planned investment activities, a review was made of the Annual Performance Report for the FY 2016/2017 under the tabular highlights of the Revenue and Expenditure of the 12 departments which indicated that planned funds were utilised up to 93% cumulatively under the Development Expenditure. Refer to the AWP for the FY 2016/2017, Page 55 of the Quarter 4 Education Sector Output 3 on Capital Purchases where procurement for 1 double cabin in the DEOs offices was planned for. This activity can be compared with the FY 2016/ 2017 Performance Report for Buyende DLG on Page 103 where a double cabin was procured for the DEO office as planned. Refer to Percentage of total expenditure in comparison to the approved Budget under the tabular highlights of the Revenue and Expenditure of the 12 departments on Pages 3, 7, 9, 11, 13, 15, 17, 19, 21, 23, 25 and 28.
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	2	Yes investment projects were completed within the approved budget plus or minus 15%. A review of the Annual Performance Report for the FY 2016/2017 under the tabular highlights of the Revenue and Expenditure of the 12 departments indicates a cumulative variance of 6.45% for total expenditures under both Domestic and Donor Development Expenditures specifically. Refer to Percentage of total expenditure in comparison to the approved Budget under the tabular highlights of the Revenue and Expenditure of the 12 departments on Pages 3, 7, 9, 11, 13, 15, 17, 19, 21, 23, 25 and 28.

No, according to the O and M budget for infrastructure identified, the LG budgeted and spent less than 80% of the O and M budget in infrastructure. A review of the tabular cumulative Department Work plan Performance for the FY 2016/2017 from Page 73 to Page 131 indicates that the cumulative O and M expenditure for infrastructure is at Evidence that the LG approximately 76.9%. has budgeted and spent at least 80% of O&M For example refer to Page 73 of the Annual 0 budget for infrastructure Performance Report FY 2016/2017 under in the previous FY: score Admin Department - Budget for the Maintenance of Machinery, Equipment and Furniture for the year was utilized up to 78.3% Additionally on Page 111 under Water Department, Budget for Boreholes Rehabilitation was utilized up to 94.3%. On Page 106 under Roads Department, Budget for District Roads Maintenance was utilized up to 58.2%. Assessment area: Human Resource Management 6 LG has From a review of personnel files, it was found substantively that only two HoDs departments (DEO & Evidence that HoDs recruited and Ag.DPO) were appraised for FY 2016/17 as have been appraised as appraised all Heads evidenced by existence of annual per guidelines issued by 0 of Departments performance reports on file, signed and MoPS during the stamped on 14/7/17 and 11/8/17 respectively. previous FY: score 2 The performance appraisal was based on the signed Public Service performance Maximum 5 points agreement forms. on this Performance Measure.

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		• Evidence that the LG has filled all HoDs positions substantively: score 3	0	From a review of the approved staff structure and personnel files, it was found that the majority of HoDs are in Acting capacity. Only (3) out (10) approved positions of HoDs (DCDO, Internal Auditor, and DEO) are substantively filled, of which (2) were filled through accelerated promotions after failing to attract suitable candidates for three times. The process of filling most of the positions is ongoing-refer to vacancy announcement which appeared in the New vision newspaper dated 30/10/2017. It was also noted that the district is experienced and qualified candidates.
7	The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.	Evidence that 100 percent of staff submitted for recruitment have been considered: score 2	2	The review of the minute extract of the 9th meeting of Buyende DSC held on 19th -27th April 2017, signed/stamped by Secretary – DSC and Chairperson, DSC on 23/4/2017 indicated that all the (25) positions cleared for filling in FY 2016/17 by MoPS in a letter dated 21/12/16 and received by Secretary DSC on 5/1/17 from the CAO were considered.
	Maximum 4 points on this Performance Measure	Evidence that 100 percent of staff submitted for confirmation have been considered: score 1	1	Buyende DSC did not receive submissions for staff confirmation in FY 2016/17.
		• Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1	1	There was no evidence of disciplinary cases submitted to DSC for FY 2016/17. However it was noted that there was a submission letter of abandonment of duty by CAO dated 23/6/16 and received by DSC on 28/7/17. The untimely delivery of the letter to DSC was not explained.

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	No. From a review of monthly salary payroll for January, June and September 2017, it was confirmed that 80% (20) out of (25) staff recruited in FY 2016/17 accessed on the salary payroll not later than two months after appointment. It was reported that those who were not accessed on the salary payroll delayed to submit bio data, and positions not on IPPS . Refer to IPPS Nos. for evidence (1001829, 1001832, 1001836, 1008909, 1012591,1010041, etc.)
		• 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	From the review of the pensioners files, all the (8) pensioners retired in FY 2016/17 were not accessed on pension payroll within two months of retirement. Refer to IPPS numbers of the (8) pensioners: 850021, 224006, 223852, 221855, 223793, 850023, 223805, and 850018. Failure to be accessed on pension payroll was attributed to delayed submission of files processing and verification by the beneficiaries.
Asse	essment area: Revenue	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.	2	From the review of the annual final accounts of FY 2015/16 and 2016/17 it was found out that the LG increased local revenue collections by 8% from UGX 105,762,724/= that was collected in 2015/16 to UGX 114,355,275 that was collected in 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.	0	The District had budgeted to collect UGX 151,854,452 as local revenue in 2016/17 but was only able to collect UGX 114,355,275/= which translates into a budget collection ration of -25% The reason given non realization of all the local revenue forecasted was that the water weed blocked most of the landing sites which were the main sources of local revenue

11	Local revenue administration, allocation and transparency			The LG collected 63,901,484 as Local Service Tax and was supposed to remit 65% to the Lower Local Governments (LLGs) However it only remitted 6,880,000 to the LLG which was only 10.7%
	Maximum 4 points on this performance measure	Evidence that the District/Municipality has remitted the mandatory LLG share of local	0	The LG staff reported that LLG do most of the Local revenue collection and do not remit the share of 35% to the LGs so it was a form of Tit for Tat.
		revenues: score 2		They affirmed that one of the reason why they failed to realize the budgeted local revenue collections apart from the water weed attack was because LLGs do not remit the 35% the LGs.
		Evidence that the LG is not using more than 20% of OSR on council activities: score 2	0	The District spent UGX 10,759,000/= on standing committee allowances and 14,553,000/= on council allowances which is 22% of the LG local revenue collection
Asse	essment area: Procure	ment and contract manage	ment	
12	The LG has in place the capacity to manage the procurement function Maximum 4 points on this performance measure.	Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2	0	No evidence was available at Buyende DLG that they had both the Senior and procurement Officer. However the Senior Procurement Officer Mr. David Amolu (0782669608) was appointed substantively on transfer and promotion from Tororo DLG to Buyende DLG under Min. No. BYD/DSC/17/2017(B) dated 11th May 2017 signed by Ag CAO Kandole Simon Peter. The Procurement Officer recruitment process was still underway at the time of assessment with interviews completed in Dec 2017. There was no evidence of current status regarding the appointment of the procurement officer.

procurement officer.

• Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1	0	With reference to a) the appointment of the Senior Procurement Officer who assumed duty on 13th July 2017. b) The handover report from the previous caretaker Mr David Baliluno, as evidenced by his handover report dated 13th July 2017 and received on 13/7/2017 in registry. The caretaker did not hand over TEC reports as submitted to the contracts committee in FY 16/17. Conclusively there were no TEC reports submitted to contract committee on file in PDU of Buyende LG c) There was evidence that the predecessor took away some files while CAO signed attesting to having kept the original acknowledgement by Baliluno David. d) Status report by the Senior Procurement Officer to CAO was dated 13/7/2017 Ref CR
		/01/1 alluded to the missing documents.
		Yes, Buyende DLG has evidence that the contracts committee during FY 17/18 considered recommendations of the TEC there was found no deviation as sampled from: Open Bids:-
		• BUYE583/SUPLS/17-18/0001 Supply and delivery of assorted BH spare to works under RWSCG
		BUYE583/WRKS/17-18/0003 Construction of a 3-unit Class room block at Namugongo Pr. School
		BUYE583/WRKS/17-18/0009 Rehabiliattion of old bore holes in various sub counties under RWSCG
		BUYE583/WRKS/17-18/00016 Construction and fencing of Igwaya Livestock Market
		BUYE583onstruction of a 5-stance pit latrine at Kakooge Pr. School under SFG
Committee considered recommendations of the TEC and provide		• BUYE583/Supls/17-18/00015 Supply of Desks at Namugongo Primary . School under DDEG. The DCC decisions were not on file hence use of the best evaluated bid notices.
justifications for any	1	During FY17/18 were 5 sets of Contracts

deviations from those Committee minutes; recommendations: score ? Dated 23/11/17 under Min 116/DCC/2017 was approval of evaluation report with 17 selective bid procurements signed by 3 DCC members. ? 3/8/2017 under Min 088/DCC/2017 was approval of best evaluated bidders for 9 open bidding items. The minutes were fully signed. ? 16/10/2017 under Min 108/DCC/2017 was approval of evaluation report for the second open bids and other 11 procurement items. Min.110/DCC/2017 was Approval of bid documents and procurement methods for restricted domestic bids. Minutes signed by all DCC members on 20/10/2017.

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? Other DCC meetings were on 12/9/2017 and 21/8/2017

It was concluded that TEC submissions were considered by the Contracts committee with no deviations.

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

Yes, Buyende DLG has evidence that the Procurement and disposal plan for FY 17/18 was signed by CAO Kandole Simon Peter on 7th Nov 2017, submitted to PPDA 11th Dec 2017. On the second page all the education projects as listed in the 9th Buyende District Annual Work plan and budget signed by the Chairperson Mr. Ziribasanga Robert on 4/5/2017 were included on page34 under Education capital developments..

Secondly, the water projects Ref: BUYE/WRKS/2017-2018-009 up to BUYE/WRKS/2017-2018-0012 are reflected in the Annual district work plan and budget on page 44 under capital development of water..

On file of BUYE 583/SUPLS/17-18/0001 Supply and delivery of assorted Borehole spare to works under RWSCG and an advert for Buyende DLG open national bidding for works and supplies, and pre qualification published by the New Vision of 16th June 2016. Is referring to 16/17 much as the procurement s are for 17/18. As such the infrastructure projects are evidently advertised as per the work plan 17/18 and procurement plan..

Approved Consolidated Procurement work plan FY 2016/17. Ref ADM/583/161/001 dated and signed by CAO Lucy Frances Amulen on 15/03/2016. The Ag. Head of Procurement did not sign. The quarter 1 and 2 reports procurements are evident in the procurement plan as sampled on page 1 of both documents.

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 current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2

0

No evidence that the LG of Buyende had 80% of the bid documents prepared by August 30th. However the bidding was closed on 6th June 2017 for all the 15 open bids, but the Officer in charge at the time did not hand over the files nor the soft copy. Selective procurements for 2017/18 are 23 to date. There was no evidence for the 80 % bid documents as at 30th August.

Bid data sheets for the selective bid procurements were in place by September 2017 as prepared by the Senior Procurement officer.

 For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2

0

No evidence was availed to the effect that Buyende LG PDU had contract register given the scarcity of information courtesy of the previous office bearer. They however had an electronic contract register for FY17/18 which is still under implementation since all payments status was yet to be included in the register from accounts sections of education and water departments.

Procurement action files for the FY16/17 (some) were carried away by the former Ag. Procurement Officer Mr Baliluno David on pretext of photocopying for reporting purposes. There was not evidence of files in Office at the time of this assessment. Evidence is by his acknowledgement dated 28/8/2017, a copy is with the CAO as dated 18th Oct 2017

The works department had a file which contained 4 payment certificates issued in FY16/17 kept with the District Engineer with no copy on the procurement activity files, rendering them incomplete.

All files lacked contract manager appointments and technical supervisory reports as a basis for payment. In conclusion there was no evidence of complete procurement activity files.

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

Yes, there was evidence that all projects implemented in FY16/17 adhered to the procurement thresholds. Evidence was by procurement reports for FY16/17 from quarter 1 as signed by CAO Lucy Francis Amulen on 6/11/2016 and submitted to PPDA on 10/1/2017.

Furthermore Quarter 2 report was signed by CAO Lucy Amulen Frances on 4th January 2017 and submitted to PPDA on 13/1/2017.

Projects Included;

- BUY583/WRKS/2016-17/ 0002 Construction of administration block at 202,000,000 was under open domestic. Page 1 of qtr 2 report
- BTC/DP/2016/17/03 completion of 4 roomed staff quarters at Buyende Town ship was under restricted bidding at 20,000,000 page 6 of qtr 2 report
- BUY /WRKS/2016-2017 -0004 Construction of a 5 stance VIP latrine at Ndolwa P/S as item 12, page 3 in the Qtr 1 report at 19,600,000 was restricted bidding.
- BUY /WRKS/2016-2017 -0009 Mechanised routine maintenance of Ndalike Gumpi Irundu 29km road under force on account as item 22, page 3 in the Qtr 1 report. The value was 125,154,600/=
- BUY /WRKS/2016-2017 -00013 Construction of a Livestock Slaughter Slab as item 27, page 4 in the Qtr 1 report under restricted bidding at 25,869,000.

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

0

No, there was no evidence that all projects implemented in the previous FY were appropriately certified – Interim and completion certificates based on technical supervision. However, there was evidence of a draft for CAO to appoint Contract supervisors dated 20th September, 2019. In the same vein there was evidence that the Ag. District Planner, Mugulusi Simon on 31/10/2017 nominated Sendawula Ronald, the Statistician as contract manager for the construction of Namugongo Primary school. There was however no technical supervision report evidence on file.

The payments are not shared with PDU to ascertain appropriate certification of all interim and completion of projects. This could be due to limited photocopy facilities.

Summarily, there were no appropriately certified interim and completion certificates for all projects based on technical supervision.

No evidence was available to show that all works projects for FY 17/18 were clearly labelled indicating names, value, source of funds and project duration. Sampled projects in the field were:

A 3 classroom block with office at Nakabirako Primary School in Buyende TC at roofing and finishes stage.

Located at;

Latitude: 1.1042

Longitude:33.1684

Altitude: 1078.5

? Namugongo Pr School 1km off Nabigwo trading centre was complete, with furniture delivered

Latitude: 11.2418

Longitude: 33.1039

Altitude: 1032.5

? A 5 stance pit latrine at Wesunire Primary .School at shuttering stage. The Head

		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	teacher had no idea of the project value and source of funding. Latitude: 1.23198 Longitude: 33.1363 Altitude: 1064.7 ? A 5 stance toilet at Kakooge Primary School almost complete with a base for hand wash facility. ? The roads had no evidence of sign posts with an explanation that they are stolen for use as firewood. ? The water projects label on the concrete slabs upon completion but do not indicate the project value. The assessor therefore concludes that there was no 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: • BUY583/WRKS/2016-17/0002 Construction of the administration block at 202,000,000. This project has spanned from FY 15/16 supposed to be handed over January 2017 as said by the Principal Assist Secretary but it had no detailed label save for the initial general sign post yet electrical wiring was a phase done in FY16/17. • Some Bid for toilet construction provided for signage.
Asse	essment area: Financia	ıl 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	From the review of the cash book it was observed that the LG makes monthly bank reconciliations for all accounts. For example for the Capital development Account, bank reconciliation as at 31st/12/2017 had the following details: o Bank balance 42,683,627/= o Cash book balance 42,683,627/=

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	From the review of the vouchers, it was found out that the LG promptly pays supplies (no outstanding bills of over 2 months seen) for example: o Construction of a 3 classroom block, offices etc at Kabukye PS an invoice was raised on 15th/10/2016 and payment was effected on 8th/11/2016 o Rehabilitation of Buyende market, an invoice was raised on 29th/12/2016 and payment done on 4th/01/2017 o Repair of lyingo mini piped water system, an invoice was raised on 26th/06/2016 and payment done on 29th/06/2016
18	The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations Maximum 6 points on this performance measure.	• Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.	3	The District has a substantive Principle Internal Auditor by the names of Okello James Andrew Onyango. He was appointed on promotion on 11th May 2017 as a Principal Internal Auditor Minute No: BYD/DSC/15/2017 The internal Audit department has produced internal audit reports for all the four quarters of 2016/17.

• 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.

The Chief Administrative Officer has provided information to Council and LG PAC on the status of implementation of the internal audit findings. This was evidenced from the following submissions:

- o 18th October 2017 CAO's letter on actions of Buyende DLG on Public Accounts Committee Audit report for the 1st quarter
- o Status of implementation of internal audit recommendations by the accounting officer for Q1 &2
- o Status report on the implementation of Audit recommendations for the FY 2016/17 by the accounting officer
- o Internal audit quarterly reports, in the preamble of each quarterly report produced, the auditor provides status of implementation of the previous comments raised in the previous report. This status is obtained from the CAO's responses.

		• 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	All the four quarter internal audit reports produced were submitted to the CAO and LG PAC evidenced from the stamped copies seen. For example o Q1 internal audit report was received by LG PAC on 9th December 2016 o Q2 internal audit report was received on 24th May 2017 o Q3 internal audit report was received on 21st May by LG PAC and the Central registry o Q4 internal audit report was received by Central Registry on 31st July 2017 and LG PAC LG PAC reviewed these reports this can be evidenced from the LG PAC reports for example: o LG PAC committee report on internal audit reports that were produced on 18th July 2017 for Q1,2 and 3 There was however no evidence of LG PAC review of 4th quarter internal audit reports and follow up from the LG PAC
19	The LG maintains a detailed and updated assets register Maximum 4 points on this performance measure.	• Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4	0	The LG has an assets register however not all assets are included in the register for example the recently acquired road works from the Central Government which were donated to the LG in December 2017. The format of the assets register is different from what is provided in the manual. However it complies to the format that was provided by the Accountant General in May 2017.

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 an unqualified audit opinion. This was verified from the District audited financial statement for FY 2016/17 that was obtained at the Office of the Auditor General
ASSE	essment area. Governa	ance, oversight, transparen	cy and a	Iccountability
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	Yes, the council meets and discusses service delivery issues including the DTPC and performance assessment reports. Refer to District Council meeting held 28th Sept 2017 under BDLG/DLC/MIN. NO. 05.09.2017/2018 – Presentation of Standing Committee reports; where the Chairperson of the Finance, Planning, Administration and Works presented a report on Finance specifically on Local Revenue (Page 6). This report was generated from the standing committee meeting held 7th Sept 2016 where the Ag. Chief Finance Officer, SAS/ Revenue Officer, Physical Planner, Ag District Engineer presented their approved DTPC department reports which covered the performance of Aug 2017 and planned activities for the forthcoming quarter 2. Refer to Minute BDLC/FPAW/MIN NO.05.09/2017/2018 on Page 10 where the Finance Department report was submitted.
22	The LG has responded to the feedback/complaints provided by citizens Maximum 2 points on this Performance Measure	• Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 2.	0	No. The district does not have an officially designated person to coordinate response and feedback from the community.

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	The LG Payroll and Pension Schedule was not displayed on public notice boards
	Total maximum 4 points on this Performance Measure	Evidence that the procurement plan and awarded contracts and amounts are published: score 1	1	The procurement plan and awarded contracts and amounts were published on the website www.buyende.co.ug
		• 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.	1	No. The district did not share assessment results since they were nit held in the previous year.
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	Yes, the HLG have communicated and explained guidelines and circulars issued to them by the National level to the LLG. This is usually done through technical planning meetings where the LLGs are invited and engaged together with the HLGs personnel. Refer to DTPC meeting held 7th January 2016, where meeting agenda 3 was listed as 'Dissemination of Planning Guidelines, In this section, the planner presented the LG guidelines, and held a brief orientation on how they should be used. Refer to minute Min3: BDLG/TPC/ AN/2016.
		• 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	Yes, the district notes that they carry out radio talk shows where discussions are held on the status of activity implementation. Refer to summary was submitted on the 11 radio talk shows held between 4th January – 7th June 2017 where communities were sensitized on new government projects, planned district activities and progress on the implementation of planned activities.

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

Yes, Buyende D LG through has a the Gender Focal Person (GFP) Ms Nakamya Monica who was assigned this role in Sept 2017. Before then the Ag. DCDO disseminated guidance on gender mainstreaming to sector departments on a one on one basis as evidenced by a submission dated 21/3/2017. It was received by 15 officers

Maximum 4 points on this performance measure.

planned activities for FY 17/18 under vote 9 on page 51. there was a total of 5,820,000 (of which 5,402,250 was for women council meetings to strengthen women's roles, Travel -420,000, stationary – 300,000 and 200,000 for gender mainstreaming.

On page 51 still is a Gender Based Violence

Yes, the LG had evidence that the GFP had

On page 51 still is a Gender Based Violence campaign programmes work plan with 15,871,311 which is jointly funded by Irish funded and government of Uganda.

From the budget summary of 2016/17 the gender mainstreaming vote budget was 1,692,000 and 8,944,000

It was realized as evidenced by;

S/N 923 Voucher no. 5/12 dated 30/11/2016 wroth 192,000

S/N 878 Voucher no.8/10 dated 6/10/2016 worth 500,000

S/N 874 Voucher No.4/10 dated 6/10/2016 worth 1,000,000

S/N 1544 Voucher No.17/6 dated 29/6/2017 worth 1,000,000

S/N 1302 Voucher No.10/5 dated 2,680,000

The Ag. DCDO said that they received all the funds but the other vouchers totalling to 4,264,000 were taken by external auditors but he had no evidence to the same.

The available evidenced percentage gives 50.51% implementation hence concluding that the previous years budget for gender activities was less than 90%.

• 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.

LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition

Maximum 6 points on this performance measure

• Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score Yes, Buyende DLG has evidence of an established, functional system and staff for environmental and social impact assessment and land acquisition. The LG has a District Environment Officer Mr. Mweene John Paul, and 4 other staff namely Senior Land management Officer, Forestry Officer, a ranger, and a Physical planner as staff.

The District Environment Officer had evidence of EIAs screening reports carried out for drilling of boreholes in Mpunde TC, Buwaza in Bugaya Parish, at Bugaga KabukyaParish, in Bugaga-Busana in Wandago parish, Buttabazi In Ndolwa ,Buyende s/c, at Kibeza Kyeza, Buwanga LC 1 in Bumogoli Kagulu s/c and 9 other water sources in Buyende during FY 16/17.

There were 5 forms for road opening but incomplete with no specific road names and locations for the projects. The SFG projects under education claim limited financial provisions which cannot cater for screening. But they include the lighting arrestor in the SFG classroom construction projects.

Yes, Buyende LG had evidence that the mitigations are planned for under AWP for FY2016-2017 dated 27/6/2016 signed by Wambi Richard for CAO and submitted to Uganda Road Fund on 4/7/2016 on page 5 of the document.

In 2017/18 the same was planned for in the AWP dated 26/4/2017 signed by Kandole Peter CAO, on 26/4/2017 on page 5 of the document.

There was evidence of conducting environmental inspections on 8/7/2016 and report received by registry on 11/7/2016. CAIIP road checklist for Namukunya – Kimbaya road (25km) was seen as a precedent for certification;

• Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1	1	Yes, Buyende LG had evidence that they integrate environment and social management plans in some contract bid documents the sampled action files for evidence were • Bills of quantities for 5-Stance VIP lined Latrines example of Sseka Group of Companies. • There was no evidence that water, production, health and education classroom constructions sector provided for Environmental management in the bid documents. • BoQ for opening and shaping of Kyabagole – Kirongo-Buwibuga road 9km in Bugaya s/c included environment concerns at 300,000/= • BoQ for periodic maintenance of Mpunde – Butakoma- Ngole road (19kms)included environmental costs at 400,000/= • Barike Investments Ltd provided for Lightening arrestors at 1,000,000 as well as engraving in the Bid to construct a 3 classroom block at Kigingi Primary school FY 16-17 sequence no.0003.
• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc): score 1	0	Yes, Buyende had evidence of ownership of the district administration block project land. Bugaya S/c headquarters have titles under Min No 05(01/DPPC/08/05-16/17 Kagulu s/c Min 05(02/DPPC/08/05/16-17 In 2017/18 the district was processing titles for sub county land and parish to acquire titles but not for schools. Education department did not have titles/nor agreements for the projects much as the projects are ongoing hence not all projects. In conclusion there was no evidence that all projects are implemented where the LG had proof of land ownership.

Yes, Buyende DLG had limited (few projects completed) evidence of social mitigation certification forms for FY 16/17 namely; • Drilling of 19 boreholes by ICON Projects Ltd dated 6/2/2017 at a cost of 820,000/ signed by Mweene John Paul the Environment Officer. Construction of a 3 classroom block office at Evidence that all Kigingi Pr. School dated 8/3/2017 by SIMTEK completed projects have Uganda Ltd at 2,900,000/signed by the Environmental and **Environment Officer** Social Mitigation 2 Certification Form Renovation of a 4 Classroom block at completed and signed by Bugaya Pr. Sch by Gwase General Environmental Officer: Contractors Ltd dated 13/12/2017 at score 2 400,000/= signed by Environment Officer. • Igalaza no environmental certificate was issued • In 2017/18 no projects had been completed at the time of this assessment.



LGPA 2017/18

Educational Performance Measures

Buyende District

(Vote Code: 583)

Score 44/100 (44%)

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 teachers per school) Maximum 8 for this performance measure	• Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4	4	There is evidence that the performance Contract budgeted for 1,035 Teachers inclusive of Head Teachers as submitted to Ministry of Finance on 8/7/2016 it Captures the following, 80, 220 Pupils. The Performance Contract had provided provision for 76 Head Teachers and 959 Teachers totalling to 1035 teachers which was the provision of the wage bill of 6,414,620,759.			
		• Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4	0	The LG education department deployed 64 Substantive Head Teachers & 27 Care Takers of schools to act as Head Teachers for a total of 91 schools, however the wage bill was providing for 76 Head Teachers Not all Head Teachers were already deployed, as some schools were still running with caretakers.			
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	6	There is evidence of filling the posts by CAO's letter to Public service requesting to clear recruitment and fill the gaps on 12/6/2017 which was received by public service on 3/8/2017. PSC cleared the recruitment with adjustments on 4/9/2017 providing for 12 Head Teachers, 17 Deputies, 14 Education assistants. Advert for recruitment was in place as printed in the media New vision on 2/10/2017 and interviews have already been given to close the 43 staff gaps as per the wage bill.			

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	Approved Structure for the education department was in place and signed by the Ag. DEO on 14/7/2016 The Structure provides for 3 inspectors of schools who were in place already.
The LG Education department has submitted a recruitment plan covering primary teachers and		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	0	There was no recruitment plan evident in the DEO's office. All recruitments were seen to come from CAO to public service. There was no evidence of DEO preparing a recruitment plan fro FY 2016/2017
	school inspectors to HRM for the current FY. Maximum 4 for this performance measure	Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of School Inspectors: score 2	2	It was evident that all the required inspectors of schools were available and substantively appointed.
5	The LG Education department has conducted performance appraisal for school inspectors and ensured that performance	Evidence that the LG Education department appraised school inspectors during the previous FY • 100% school inspectors: score 3	0	From the review of the performance appraisal files for the (3) school inspectors revealed that only (1) inspector of schools was appraised for FY 2016/17 on 25/5/17 signed by Ag.DEO and CAO. Performance appraisal reports for FY 2015/16 were on file for the other (2) inspectors of schools.
	appraisal for all primary school head teachers is conducted during the previous FY. Maximum 6 for this performance measure	Evidence that the LG Education department appraised head teachers during the previous FY. • 90% - 100%: score 3 • 70% - 89%: score 2 • Below 70%: score 0	3	All the (91) head teachers(HTs) were appraised for calendar year 2016 using the performance agreements and this was confirmed by reviewing all the annual performance reports for HTs. Also refer to the report on appraisal of HTs for 2016 submitted to the CAO by DEO dated 30/1/17

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	0	There is evidence that Policies & Circulars were received at the department such as the School Feeding guide lines which were disseminated to the schools as advised by CAO. A physical Copy of the booklet for guiding on school feeding was in place at the DEO's office However not all the issued guidelines, policies, circulars by the national level were communicated to the schools.
		• 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	The minutes were shared as having met with the education department on 25th November 2016, discussed issues of Welfare, Music and Academics of the pupils. They were signed by the General secretary. Another meeting was held on 20/7/2016 and discussed issues about absenteeism of Head Teacher & Teachers, protecting school land by fencing and signed by the General Secretary.

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.	3	- It is clear that DIS submitted 2 reports i.e Q1 & Q2 to DES regional office in MBALE on 7th April 2017 and received by the SIS Nakhosi Seera Anne. - There are 4 reports for FY 2016/2017 in place and results are shown below with schools inspected Q1 – 120 Q2 – 30 Q3 – 72 Q4 – 93 Total – 315 Given that 91 Government school and 71 Private schools = 162 schools If number of inspections were 315 out of (162*3 terms). This gives 64.8% rate of inspection of all primary schools.
8	LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed	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	0	The minutes on 4/01/2017, 16/10,2017, 21/011/2016 at the DEO's office Show the issues discussed between the inspectors and department but no action was taken. No Action Matrix in place and no evidence that recommendations for action was done
	Maximum 10 for this performance measure	• Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2	0	Submission must be for 4 quarters in year 2016/2017, However only 2 reports of Q1 & Q2 were submitted on 7/04/2017. This however does not measure up on the guidelines of submitting all the reports
		Evidence that the inspection recommendations are followed-up: score 4	0	There was no evidence in place that inspection recommendations were followed up

9	The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES Maximum 10 for	• 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	List of Schools in EMIS report tally with the OBT. Sampled schools -Kasiira Muslim P/S, -Bupioko P/S, -Nkoone P/S, -Wesunire P/S
	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	There is evidence that the enrollment information tallies with the EMIS data according to the sample Lukotaime P/S had 687 pupils which tallied with the EMIS report Nduudu P/S had 417 which tallied with EMIS report of 417, Iringa P/S had 710 pupils as was with the EMIS report.
10	The LG committee responsible for education met, discussed service	nance, oversight, transparency and ac	Courtai	Yes, the standing Committee on Social Service met and discussed service delivery issues and department performance.
	delivery issues and presented issues that require approval to Council Maximum 4 for this performance measure	ery issues and inted issues equire eval to Council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etcduring the previous		For example the committee met on 27th April 2017 and one of the issues discussed the planned budget for FY 2016/2017, as well as the planned school inspections for the same period. Refer to issue 1 under Minute BDLG/SSC/MIN.NO.04/2016/2017. The LG PAC report was submitted to the District Chairperson as is the usual practise but it was not shared with the standing committee. There was no physical evidence of this submission.

		Evidence that the education sector committee has presented issues that requires approval to Council: score 2	2	Yes the Education Sector has met and presented issues that required approval to Council. For example the Standing Committee on Social Services met on 27th April 2017 and one of the issues discussed was the planned budget for FY 2016/2017, as well as the planned school inspections for the same period. Refer to issue 1 under Minute BDLG/SSC/MIN.NO.04/2016/2017. A review of the District Council meeting held 4TH May 2017 include agenda item 5 namely 'Standing Committee Recommendations and Reactions'. Minute BDLG/DLC/MINNO.05.05.2016/2017 has the first submission under Education made by the Chairperson of the Standing Committee for Social Services on the key priority areas for FY 2017/2018 and report on overall sector performance for the FY 2016/2017.
11	Primary schools in a LG have functional SMCs Maximum 5 for this performance measure	Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0	0	It was observed that there was no evidence of Minutes and reports of SMC's whatsoever. However there was no SMC list of private schools seen 70 government SMC lists were seen out of 91 and there was no SMC list of the 71 private School. i.e 70/162 = 43.2%
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	0	There was No evidence of publicising of schools receiving non-wage grants neither were they on file
Asse	essment area: Procure	ement and contract management		

department has on time for projects executed as pe	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	Budget was In place and was approved for FY 2016/2017 by the Council on 10th May 2016 but There were no evidence of procurement of submission to PDU as of 30th April 2016. There was no procurement plan for the Department.
initiated payment for supplies on time Maximum 3 for this performance measure Description: Initiated payment for supplies on time on the contract for supply of school furniture at Igalaza SDA the payment was supposed to be done within 30 days after production of the invoice. The Invoice was presented on 10th/04/2017 and was certified on 26th/04/2017 The contract for supply of school furniture at Igalaza SDA the payment was supposed to be done within 30 days after production of the invoice. The Invoice was presented on 10th/04/2017 and was certified on 26th/04/2017 The contract for supply of school furniture at Igalaza SDA the payment was supposed to be done within 30 days after production of the invoice. The Invoice was presented on 26th/04/2017 and was certified on 26th/04/2017		department has certified and initiated payment for supplies on time Maximum 3 for this performance measure	departments timely (as per contract) certified and recommended suppliers for payment: score 3 points	3	furniture at Igalaza SDA the payment was supposed to be done within 30 days after production of the invoice. The Invoice was presented on 10th/04/2017 and was certified on 26th/04/2017 o Contract for construction of a 5 stance VIP latrine at Ndolwas PS the payment was supposed to be effected 30 days after presentation of the invoice. The invoice was raised on 05/06/2017 and was

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	No, there is no evidence that the department submitted the annual report for the previous FY to the planner by mid -July for consolidation.
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	0	The practice in the LG is that queries are addressed to individual persons to answer not to the department so each individual responds to the queries raised on him individually The above notwithstanding, not all audit queries raised were responded to.
Asse	ssment area: Social a	and environmental safeguards		
17	• Evidence that the LG Education department in consultation with the gender focal person 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		0	There was no evidence that the department worked hand in hand with the Gender department to sensitize the schools about the role of senior men and senior women teachers
Maximum 5 points for this • Evidence that LG Education department in collaboration with gender department have issued		0	There was no evidence of department engaging the Gender department about issues of sanitation and PWD's in primary schools	

		Evidence that the School Management Committee meet the guideline on gender composition: score 1	1	Sampled schools proved that the Foundation body had at least 2 female members. i.e Bukutula P/S had 3 members on the Foundation body, MPunde Muslin had 2 Ladies on the Foundation body and Kigingi P/s had 2 ladies on the foundation	
18	LG Education department has ensured that guidelines on environmental management are disseminated Maximum 3 points for this performance measure	• Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc): score 3:	0	There was no evidence that the department had issued guidelines about environmental management in schools	



Health Performance Measures

Buyende District

(Vote Code: 583)

Score 20/100 (20%)

Health Performance Measures

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	ssment area: Human re	source planning and r	manage	ment
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	0	There was a PHC shortfall of 17,322,078/= in the Buyende so no recruitment was done.
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 evidence with the HR that a recruitment plan was submitted from DHOs office. This was among the consolidated plan of all the sectors and letter on file submitted on 2nd Feb 2017.
3	The LG Health department has ensured that performance appraisal for health facility in charge is conducted Maximum 8 points for this performance measure	Evidence that the health facility incharge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0	0	There was no annual appraisal report for FY2016/17 for the health facility in-charge for Kidera HCIV

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	0	There was no recruitment in Buyende for the current year because of the shortfall in PHC.
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Assessment area: Monitoring and Supervision

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	0	At the DHOs office the following circulars were available from MOH. Referral and Care of Hepatitis B Positive Clients dated 22nd March 2017, Regional Data Review and Data Cleaning for data captured in HMIS /DHIS2 dated 5th October 2017, The National Digital Stock Management System 3rd Oct 2017, Recruitment of Bike Riders for Additional 83 dated 3rd October 2017 And the following policies were at the district: National HIV Testing Services Policy and Implementation Guidelines 2016, Guidelines to the Local Government Planning Process Health Sector Supplement 2016, National HIV and AIDS Priority Action Plan 2015/2016-2017/18, Clinical Systems Mentorship Framework for Comprehensive HIV and AIDS Prevention Care Treatment and Support Services March 2016, Mass Distribution of Long Lasting Insecticides Treated Nets to Achieve Universal Coverage in Uganda 2016/17, Immunisation in Practice Uganda, Uganda National Tuberculosis and Leprosy Control Program Strategy Plan 2015/16-20119/20. Malaria Reduction Strategic Plan 2014-2020, National Policy on Public Private Partnership in Health 2017, Health Sector Quality Improvement Framework and Strategic Plan 2015/16 2019/20. And Uganda Public Health Service Protocols May 2016. There were no policies, guidelines or circulars from the DHO at the facilities visited mainly Buyende III, Bugaya III and Ngandho III.
		• Evidence that the DHO has held meetings with health facility incharges and among others explained the guidelines, policies, circulars issued by the national level: score 3	0	There were no minutes available to show that the policies mentioned above were disseminated either in meetings or other foras. Six DHT meeting minutes were reviewed and there was no discussion of the policies or guidelines issued by MOH.
6	The LG Health Department has effectively provided			There was no evidence of DHT supervising the HCIV and hospitals mainly because information at DHOs office was inconsistent with information

at Kidera HCIV. Below is detailed information for support supervision to district health services justification. Buyende District has only one health center four and that is Kidera HCIV. Reports at the DHOs for Maximum 6 points for support supervision were reviewed and the this performance conclusion was Kidera was not supervised and measure below are the findings: The report dated 16th January 2017, Kidera HCIV was among facilities supervised but the period of the supervision was not identified in the report. Another integrated report was dated 31st March 2017 conducted between 21st Feb to 15th March, Kidera HCIV was among the facilities supervised. If the first supervision was conducted around Feb then two supervisions were conducted in one quarter. On 28th June 2017 on file there was a report Monitoring Health Facilities in Buyende District. It was conducted between 25th and 28th June 2017 and Kidera HCIV was among the facilities supervised. The first reports above were summarized and it was difficult to ascertain which challenge, weakness or action Evidence that DHT plan related to Kidera HCIV. The last report has supervised however was more specific and the issues 100% of HC IVs namely strengths, weaknesses recommendations and district and conclusion for each health centre were hospitals: score 3 included. Because Kidera HCIV was a key facility for this assessment it was important that this facility is visited. This facility unfortunately was over 50km from the DHO and transport to field was a challenge. As plan B, the HUMC file, supervision book and HSD supervisions reports were brought to DHOs office. In Kidera HCIV supervision book there was a DHO visit for strengthening the IDRS on 25th July 2016, on 3rd October 2016 there was DHT monitoring, on 3rd Nov 2016 an integrated support supervision. Using information from DHOs office these dates are not consistent. May be the supervisions were conducted but DHO forgot to write in the supervision book at Kidera HCIV, in addition 3rd Nov 2016 is not within any of the periods indicated in the reports for integrated support supervision. Therefore, evidence that supervisions were done at Kidera HCIV was not available. There was no evidence of DHT supervsing the

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

0

lower facitlites manily because information at DHOs office was inconsistent with information at lower facilities. Below is detailed information for justification.

At the DHO office the integrated support supervisions reports were reviewed and conclusions is that DHT didnt supervise lower facilties findings are described below:

The first report was dated 10th October 2016 and the following facilities were Kakooge, Bukungu, Iringa, Kagulu, Ngandho all HCII and Buyende, Nkondo, Iringa, and Bugaya all HCIII were supervised. This report had findings for each facility and the action plan. The second report was dated 16th January 2017, and the following facilities were supervised Kidera, Bukungu, Buyanja, NKDU, Kigingi, Wesunire, Nkondo, Iringa, Ngandho, Bugaya, Wandago, Namusiki, Buyende, Kakooge, Irundu and Kagulu. This particular report didn't indicate the level of the facilities and the period when the supervision was conducted. The third integrated report was dated 31st March 2017 conducted from 21st Feb to 15th March. This report included Bukungu, Wandago, Kakooge, Iringa, Bukungu, Wesunire, Ngandho, Kidera, Buyende, Kagulu, Namalikya, Iraapa and Buyanja. This report and the former were summarised and it was difficult to ascertain which challenge or weakness related to a particular facility. On 28th June 2017 there was a report Monitoring Health Facilities in Buyende District. It was conducted between 25th and 28th June 2017. There were seven bullets of the findings in this report and Bukungu, Kidera, Nkondo, Kakooge, Kinging and Buyende were supervised. The last report was dated 18th June 2017 and the supervision took place between the 19th and 31st May 2017. As previous reports it was a general report with the heading as strengths, weaknesses recommendations and conclusion. Worth noting picture of Buyanja HCII of mama kits was found in the former and latter report.

Three facilities were visited to verify information at DHO office. These were Buyende which shares a compound with DHOs office, Bugaya HCIII and Ngandho HCII.

At Buyende HCIII there was a new supervision log book with no information and no old supervision log book. In the visitor's book and there was one visit from the DHOs office on 9th

				May from Mutesi Teddy and Teiva. This information based on the reports above is not consistent. At Bugaya HCIII there were three visits from the
				DHO office in the supervision book. There was a DHO visit on 31st Aug 2017 and it was a DIMs assessment, on 5th Nov 2017 there was a DIT immunization and data improvement and on 4th Dec 2017 there was visit but purpose not documented.
				At Ngandho HCII in the supervision book there was a visit from the DHOs office on 4th Dec 201 for vaccine distribution.
7	The Health Sub- district(s) have effectively provided support supervision to lower level health units Maximum 6 points for this performance measure	Evidence that health facilities have been supervised by HSD and reports produced: • If 100% supervised score 6 points • 80 - 99% of the health facilities: score 4 • 60 - 79% of the health facilities: score 2 • Less than 60% of the health facilities: score 0	0	Kidera HCIV is the only HCIV in the district is supposed to supervise all the facilities. From the information in the supervision books of the facilities of Ngandho HCII, Bugaaya HCIII and Buyende HCIII there was no evidence of HSD supervision. The HSD reports were not available at DHO office and not among files brought from Kidera HCIV though requested. Therefore there is no evidence available for HS supervisions to the lower facilities.
8	The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for	• Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4	0	There is no evidence available for HSD supervisions to the lower facilities therefore no reports discusssed.
	corrective actions and followed up Maximum 10 points for this performance measure	• Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6	0	There is no evidence available for HSD supervisions to the lower facilities therefore no action plans implemented.

9	The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH Maximum 10 for this performance measure	• Evidence that the LG has submitted accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports and OBT: score 10	0	Buyende District submission for the HMIS didn't have Wandago HCII. There are 11 public facilities in Buyende District and 9 PNFP. In addition, Wandago HCII was not included in OBT.
Asse	essment area: Governand	ce, oversight, transpa	rency ar	nd accountability
10	The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council Maximum 4 for this performance measure	• Evidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2	2	Yes, Standing Committee for Social Services met and discussed service delivery issues like inspection, department performance etc. For example the committee met on 28th September 2016 and some of the issues discussed were health sector financing, inspection and performance on community health education. The Ag. District Health Officer presented these issues in the health department report for the Period Oct – Dec 2016. Refer to Minute Min No.04/S.C/09/2-16/2017 Pages 8 - 10 where the AG. District Health Officer's report was presented, approved and

discussed.

score 2

		• Evidence that the health sector committee has presented issues that require approval to Council: score 2	2	delivery issues that required approval from the council. For example the committee met on 28th September 2016 and some of the issues discussed were health sector financing and inspection and performance on community health education. The Ag. District Health Officer presented these issues in the health department report for the Period Oct – Dec 2016. Refer to Minute Min No.04/S.C/09/2-16/2017 Pages 8 - 10 where the AG. District Health Officer's report was presented, approved and discussed. Refer to the District Council meeting held 28th Sept 2017 under Minute MIN/DC/015/2016 – Presentation of Standing Committee reports; where the Chairperson for the Standing Committee on Education, Health and Community Based Service Committee presented an issues report dated 28th Oct 2017. This report was generated from the standing committee meeting held 26th Sept 2016 under Minute 5 BDLG/DLC/MIN.NO.06.09.2017/2018 Pages 11 to 12 where the Chairperson for the Social Services Committee presented on health issues derived from the standing committee meeting.
11	The Health Unit Management Committees and Hospital Board are operational/functioning Maximum 5 points			In Buyende of the three facilities visited and files reviewed one of the HUMCs Ngandho HCII was functional resulting in no score. Justification for the score is described below. HUMCs Information at DHOs Office All HUMCs had their terms end in 2015/16 because they were formed in 2012 /13. In the HUMC file there was a communication from the DHO requesting the chairperson to appoint the HUMCs for Kidera HCIV this communication was dated 11th July 2016, in the same file there was communication to three persons inviting them to be members of the HUMCs for Kidera HCIV. There was also communication to the in charges of Irundu HCII and Kagulu HCII introducing them to the members of the new HUMCs. In the file there was a list of HUMCs members for: Bugaya HCIII, Ngandho HCII, Namusikizi HCII and Wandago HCII. There was also a report of the induction of the new HUMCs members of Bugaya HCIII, Irundu HCIII, Nkondo HCII, and Buyende HCIII. The orientations for Ngandho, Wandago,

Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues): • If 100% of randomly sampled facilities: score 5 • If 80-99%: score 3 • If 70-79%: : score 1 • If less than 70%: score 0

0

Namusikize, Kagulu, Iringa and Kakooge all HCIII was done.

HUMCs at facilities

At Buyende HCIII there was a HUMC file and on 17th Jan 2016 there was a meeting and issues related to the askari, maintenance of staff housing windows were discussed, on the 14th April 2017 there was a meeting and the supplementary budget was discussed. On 22nd Dec 2017 structural adjustments to the facility, the medical strike and transfers were discussed, while on 12th Oct 2017 NMS offloading supplies at the facility, lack of accommodation for staffing and the need for a waiting shed for patients were discussed, these minutes were not signed. On 7th July 2017 there was a presentation of the annual budget and workplan and town clerk attended the meeting but wasn't included in the attendance list. On 23rd March 2017 there were discussion on the askari, deliveries from NMS and mvule trees that could be used for patients shed. It is worth noting the chairperson of the HUMCs Mr Moses Bamulutire signed off some of the above minutes but didn't attend the meeting.

At Ngandho HC11 there was a HUMC file at the facility and there were minutes of a meeting but no date indicated. It seemed in the first meeting members were oriented to how PHC money is accounted for, on 21 Dec 2016 there was another meeting and in this meeting the plan for the bathroom was discussed and a bill of quantities presented. The in charge also talked about PHC accountability. On 11th June 2017 there was a discussion on the kitchen, the bathroom and kitchen shelter. The workplan and budget were presented to the members for 2017/18 and it totalled to 4, 639,925/=. On 12th Nov 2017 there was the approval of quarterly budget of 1,119,000/=. It was also worth noting that in these minutes the health facility and HUMCs had worked together on development of the budget and workplan before it was submitted to the district. This to me seemed the best HUMCs in the district.

In the Kidera HCIV file there were minutes of two meetings. There were minutes of a meeting without a date but year was documented as 2016. In this meeting the list of members who attended is missing but it was signed off by the secretary. The second meeting minutes like the first one didn't have a date, but were a one pager. didn't have the attendance list and nothing related to resources was discussed. There were

				introductions and a brief communication from the chair and signed off by secretary.
12	The LG has publicised all health facilities receiving PHC nonwage recurrent grants Maximum 3 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 3	0	The PHC non-wage funds for 17/18 were not published on the notice board. At all facilities visited the PHC funds not published on notice boards
Asse	essment area: Procureme	ent and contract man	agemen	t
13	The LG Health department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget	• 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	There were three capital investments for Buyende at Mpande, Ikanda and Nkone HCII for the year 2017/18 and they were two stance toilets. These investements were through DDEG.
	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 health sector had no procurement requests for the PDU.

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	This activity was coordinated from NMS. NMS visited the district and worked with district staff to develop plans. The procurement plans therefore were submitted on time on 2nd Feb 2016 and were all available on file.
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 department had only one project in 2016/1 FY for renovation of health facilities of Kidera an Bugaya. The contract for this project specified that payment was supposed to be done within 3 days after presentation of the invoice. The invoice was presented on 31st/05/2017 and was certified on the same day.
Asse	essment area: Financial r	nanagement and rep	orting	
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	No, there is no evidence that the department submitted the annual report for the previous FY to the planner by mid -July for consolidation.

Ass.	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	0 uards	The practice in the LG is that queries are addressed to individual persons to answer not to the department so each individual responds to the queries raised on him individually The above notwithstanding, not all audit queries raised were responded to.
18	Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities. Maximum 4 points	• Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2	2	The list of committees found at the DHOs office show that gender was considered in constituting the HUMCs. All the lists considered the gender compositions. Irundu HCII had one female and two males, Kagulu HCII had two females and two males, Bugaya HCIII had two females and five males, Ngandho HC11 had two females and three males, Namusikizi HCII had three females and two males and Wandhago had three females and two males. Please note the guidelines are silent on proportion of females to males but mention gender should be considered.
		• 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	These guidelines were not available at the DHO office and there was no circular related to these guidelines on file. At the facilities visited namely Bugaya HCIII, Buyende HCIII and Ngandho HCII these guidelines had not been issued.

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	These guidelines were not available at the DHO office and there was no circular related to these guidelines on file. At the facilities visited namely Bugaya HCIII, Buyende HCIII and Ngandho HCII these guidelines had not been issued. At Ngandho HCII there was a chart of SOP on the wall.
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LGPA 2017/18

Water & Environment Performance Measures

Buyende District

(Vote Code: 583)

Score 74/100 (74%)

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Plannir	ng, budgeting and execut	tion	
1	The DWO has targeted allocations to subcounties 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	There is evidence that the LG Water department has targeted sub-counties with less safe water coverage than the district average of 44.24%. The Sub-counties of Kidera with safe water Coverage of 38.5%, followed by Kagulu with coverage of 40.7% and Buyende coverage of 41.2% are below the District Coverage. The LG has targeted these Sub-counties with below safe water average coverage (Kidera – 4 new boreholes and 3 borehole rehabilitation; Kagulu – 4 new boreholes and 2 borehole rehabilitation; and Buyende – 5 new boreholes and 3 borehole rehabilitation).
2	The LG Water department has implemented budgeted water projects in the targeted subcounties (i.e. subcounties 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	Yes, the LG water department implemented budgeted water projects in the targeted subcounties with safe water coverage below the district average in FY 2016/17. Evidence can be traced from the following: (a) The LG Water department budgeted for 19 Deep Borehole Drilling (Hand pumps); and rehabilitation of 4 boreholes as per report for borehole drilling to the CAO by the District Engineer/DWO referenced CR/583/750, showing that Sub-counties of Kidera, Kagulu and Buyende were each allocated the high numbers (4-5) of boreholes in the FY 2016/17; (b) Submitted Quarter Four Progress Report to the Permanent Secretary MoWE dated 12/07/2017 received and stamped on 20/07/2017 in addition to Quarter one, two and three progress reports for FY 2016/17; (c) Annual performance Report for FY 2016/17; (d) Borehole Drilling reports submitted to CAO by DWO, dated 05/01/2017 and 30/06/2017; (e) Contract management files and requests for payment by contractor.

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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	15	The LG Water Department monitored 491 water point sources out of 508 (96.7%) during the fourth quarter of FY 2016/17 as seen in a report of Update of Functionality status for 491 water sources done in fourth quarter and reported in Quarter four Progress Report for FY 2016/17 submitted to the Permanent Secretary MoWE on 12/07/2017; Supervision and Monitoring of WATSAN Facilities (old hand-pumps rehabilitated, new hand pumps constructed FY 2016/17; and old water sources tested for water quality FY 2016/17) in Buyende District for facilities implemented in Kidera, Bugaya, Nkondo Buyende, and Kagulu Sub-counties.
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	The list of water facilities submitted for the FY 2017/18 in the sector MIS, the Performance contract reports and in the Out Budgeting Tool are accurate and consistent.
Asse	essment area: Procure	ement and contract man	agemen	t
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	There is evidence: the DPU had a file that contained the submitted list of all investment items from the DWO in the approved sector AWP and Budget on time; the DWO submitted a Water Department Annual Procurement Plan for FY 2017/18 to the CAO; Procurement requisition forms from the DWO.

6	The DWO has appointed Contract Manager and has effectively managed the WSS contracts	• If the DWO prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2	0	The CAO appointed the DWO as the Contract Manager and there are the Contract Management Files with clear contract implementation plans at the District Water Office but there were no Field reports seen regarding monthly field visits made for the different WSS infrastructure projects.
	for this performance measure	• If water and sanitation facilities constructed as per design(s): score 2	2	Yes, the water and sanitation facilities were constructed as per the design(s). The sampled and visited Hand pump Deep Boreholes (Bulungana in Kagulu Sub-county DWD# 56380; Bukonoka in Buyende Sub-county DWD# 56384; Nakabembe in Buyende Sub-county DWD# 56385; Buwanga in Bugaya Sub-county DWD# 56378; and Buseranda in Bugaya Sub-county DWD# 56379) were found to have been constructed as per designs and were all functioning well. The committee members of each facility were asked the numbers of pipes installed and these numbers could tarry well with the depth of installations as indicated in the Borehole drilling, pump testing and log sheet information in the contract management files and records with the DWO. The communities were also asked the number of households being served by the facility and in each case would give estimates close to the targeted water demand coverage.
		If contractor handed over all completed WSS facilities: score 2	2	Yes, the contractor handed over all completed WSS facilities. This is supported by requests for payment dated 11/12/2017 and 12/12/2017 from contractor (Galaxy AgroTech (U) Ltd) with certificate of work under contract No. BUYE 583/WRKS/2017-18/00005 and from consultant for Borehole siting; Annual performance report for FY 2016/17 was seen on file and other written evidence of facility completion and payment were seen in the Contract management file/records.
		If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2	2	Yes, the DWO Certified all WSS projects, prepared and filed completion reports as seen from a sample of WSS projects checked. It was found that all WSS projects were clearly labelled on the concrete casting indicating the name of the source (Village), the DWD Number, the date of casting/construction, and the source of funding (DWSCG).

7	• Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points	• Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points	3	The department approved/certified projects for payment on time as per the contracts for example: o The contract for supply of assorted spare parts the invoice was supposed to be paid within 30 days after its presentation. The invoice was thus presented on 9th/1/17 and was certified on the same day o Construction of a 5 stance lined pit latrine at Kabonge RGC, the invoice was supposed to be paid within 30 days after its presentation. This particular invoice was presented on 20th/04/2017 and was certified on the same day.
Ass 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	orting 0	No, there is no evidence that the department submitted the annual report for the previous FY to the planner by mid -July for consolidation.

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	0	The practice in the LG is that queries are addressed to individual persons to answer not to the department so each individual responds to the queries raised on him individually The above notwithstanding, not all audit queries raised were responded to.
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Assessment area: Governance, oversight, transparency and accountability

10	
	The LG committee
	responsible for
	water met,
	discussed service
	delivery issues and
	presented issues
	that require
	approval to Council

Maximum 6 for this performance measure

 Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3

Yes. The council committee met and discussed service delivery issues including the DTPC reports. Refer to the Standing Committee for Finance, Planning, Administration and Works meeting held 28th Sept 2016 under Minute MIN.NO.04.09.FPAW:2016/2017 on Page 5 where the Ag District Engineer presented a report for Works, Water and Technical Services.

		• Evidence that the water sector committee has presented issues that require approval to Council: score 3	0	No. While the Standing Committee Finance, Planning, Administration and Works meets, there is no clear evidence that the sector specific issues discussed within the subcommittee are presented and discussed in the fuller District Council. A review of the DC meeting minutes held 28TH Sept 2017 indicates that while other standing committee issues were raised like finance, admin and works, issues for water sector were not deliberated upon. This is the case even when a Quarter 1 Progress Report was developed on 21 Nov 2017 and presented to the Standing Committee of Finance, Planning, Administration and Works as indicated under Minute BDLC/FPAW/MIN.NO.05.09/2017/2018 on Page 8 - 10
11	The LG Water department has shared information widely to the public to enhance transparency Maximum 6 points for this	• The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2	0	There were no such information on the district notice boards (at the DPU and the DWO as well as at the Registrar). Any Notices put on the Notice boards had no found copies kept on file with both the DWO and the DPU.
	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	From a sample of WSS projects checked, it was found that all WSS projects were clearly labelled on the concrete platform casting indicating the name of the source (Village), the DWD Number, the date of construction/casting, and the source of funding (DWSCG).
		• Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2	0	No such information was displayed on the District Notice boards.

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	Yes, the communities make applications for water sources and each application found in a file with the DWO, clearly spelt out that in case of the offer, community contributions (of UGX 200,000 in case of Deep borehole or Motorized Augur well; or UGX 100,000 in cases of Shallow well or rehabilitation of a borehole or shallow well; or UGX 50,000 to 100,000 in case of a protected spring) have to be made within 3 months. During the visits to the sampled facilities, it was confirmed that for every community that received a facility, they actually made community contribution, set up WSC within 3 weeks from the village feedback meeting and fulfilled all other requirements.
		• 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	For each of the four water supply facilities visited, the WSCs were found to be well constituted of 7 to 9 members (LC I inclusive) and were active (conduct regular meetings, collecting UGX1000 to UGX3000 per household per month for carrying out O&M, preventive maintenance and minor repairs), and are yet to open up bank accounts for keeping the funds.
Ass	essment area: Social	and environmental safeg	uards	
13	The LG Water department has devised strategies for environmental conservation and management	Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2	0	There is no evidence of Environmental and Social Management Plan for Boreholes and Public Latrines in RGCs in selected Sub-counties in Buyende District for the FY 2016/17 and 2017/18.
	Maximum 4 points for this performance measure	• Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1	0	No evidence was identified to this effect since environmental concerns were not adequately pointed out in detail in the submitted EIA report and the Natural Resources Department AWP, Budget and Memorandum of Understanding by the District Environmental Officer to the CAO regarding new water sources development.

		• Evidence that construction and supervision contracts have clause on environmental protection: score 1	0	There was no Environmental and Social Management Plan for Boreholes and Public Latrines in RGCs in selected Sub-counties in Buyende District for the FY 2016/17 and 2017/18. One of the EIA report seen was just a collection of forms that were carelessly filled without any synthesis and write-up of key findings and their implications on the designs and construction.
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	0	The facilities sampled and visited did not meet the sector critical requirements of women on the WSCs to be at least 50%. The composition of women on the WSCs for the facilities visited were, Bukonoka DWD56384 with 3/9; Nakabembe DWD56385 with 3/7; Buwanga DWD56378 with 1/7; Bulungana DWD56380 with 3/7 and Buseranda with 4/9.
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	3	Yes, the sanitation facility visited has a ramp for facility access by PWDs and there are separate stances for men, women and PWDs; though there is no labelling to show the gender sides.