

## **LGPA 2017/18**

# Accountability Requirements

Iganga District

(Vote Code: 510)

Assessment	Compliant	%
Yes	2	33%
No	4	67%

**Definition** 

of compliance	Compliance justification	Compliant?
XXX	No, the final annual performance contract for the FY 2017/2018 was not submitted by 30th June according to the required evidence from MoFPED.  However according to date on the cover letter (Ref CR/105), the Final Performance Contract for Iganga DLG for the FY 2017/2018 was submitted to MoFPED on 26th June 2017 and received by the PSST MoFPED on 14th July 2017 as per the signature of the PSST MoFPED on Page 1 of the contract. According to the MoFPED however, 'Receipt for  Acknowledgement of Budget Documents' SN 4097 notes date as 23RD October 2017.	No
e Budget requi	red as per the PFMA are submitt	ed and
XXXXX	No, the draft Performance Contract/ Budget does not include a copy of the Procurement Plan as per the cover letter attached. Refer to cover letter written by the CAO dated 30th March 2017  Reference number CR/105 where all attached annexes are listed. This draft was received by MoFPED ON 31 March 2017as per the date on the Receipt for Acknowledgement of Budget Documents' SN 0514.	No
	e Budget requi	No, the final annual performance contract for the FY 2017/2018 was not submitted by 30th June according to the required evidence from MoFPED.  However according to date on the cover letter (Ref CR/105), the Final Performance Contract for Iganga DLG for the FY 2017/2018 was submitted to MoFPED on 26th June 2017 and received by the PSST MoFPED on 14th July 2017 as per the signature of the PSST MoFPED on Page 1 of the contract. According to the MoFPED however, 'Receipt for  Acknowledgement of Budget Documents' SN 4097 notes date as 23RD October 2017.  Budget required as per the PFMA are submitted as 23RD October 2017.  To the Procurement Plan as per the cover letter attached. Refer to cover letter written by the CAO dated 30th March 2017  Reference number CR/105 where all attached annexes are listed. This draft was received by MoFPED ON 31 March 2017as per the date on the Receipt for Acknowledgement of Budget

LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)	XXXXX	No, Iganga DLG did not submit her annual performance report on 31st July 2017.  The report was submitted on 3rd August. The Annual performance Report for the period FY 2016/2017 was received by MoFPED on 4th Aug 2017 as per the 'Acknowledgement Receipt of Submission of Budget Documents' serial number 4517.	No
LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)	XXXXXX	No. while the FY 2016/2017 performance reports were submitted and included all the four quarters, they were Not submitted on time.  Refer to Quarter 1 Report submitted on 22nd November 2016 to MoFPED as per the 'Acknowledgement Receipt of Submission of Budget Documents,' serial number 0094  Refer to Quarter 2 Report submitted on 21st Feb 2017 to MoFPED as per the Acknowledgement Receipt of Submission of Budget Documents serial number 0375.  Refer to Quarter 3 Report submitted on 8th May 2017 as per the 'Acknowledgement Receipt of Submission of Budget Documents,' number 0689  Refer to Quarter 4 Report submitted on 4th Aug 2017 to MoFPED as per the 'Acknowledgement Receipt of Acknowledgement Receipt of Submission of Budget Documents,' number 0689	No
Assessment area: Audit		Submission of Budget Documents,' serial number 4517	

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	In The LG submitted responses to all the issues raised in the Internal Audit General's findings in the letter submitted to the PS/ST dated 14th March 2017 (Ref. No AUD/251/1) that was received in the office of the Internal Auditor General on 21st/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

Iganga District

(Vote Code: 510)

Score 38/100 (38%)

## Crosscutting Performance Measures

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Planning	g, budgeting and execution		
1	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.	0	No. The District has a Physical Planning Committee which was set up on 24th October 2017 when the 12 members where appointed but it is not functional. The committee is missing two people namely the physical planner and surveyor in private practise.  Refer to official letter written by the CAO on 24th Oct 2017 ref CR/156/1 to the 12 appointed office bearers that are legally supposed to form part of the Committee as per the Physical Planning Act 2010. The Council is supposed to meet quarterly, and since inception has met once on 18th January 2018.  Refer to minutes from the Physical Planning Committee meeting held 18th January 2018. The district has a Building Plan Registration Book and 11 building plan applications were submitted in the FY 2016/2017.  The committee has not reviewed any building plan applications. The plans have been approved by the District Health Inspector, District Engineer, and the District Physical Planner.
		All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2.	0	No, there is no evidence that all new infrastructures with approved plans were built according with the approved plans.

The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles

• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.

Yes, there is evidence that the priorities in the AWP for the current FY were based on the outcomes of the budget conference for FY 2017/2018.

Note: The Budget Conference was held on 13th January 2017 as per budget conference report shared. The priority development investments for Iganga were discussed and agreed upon at the Conference. Thereafter the TPC met on 16th January 2017 and presented on the sector work plans for the BFP for FY 2017/2018.

These same priorities are clearly reflected in the AWP for the same FY. For example during the Conference, the DWO informed the persons present that 21 deep boreholes had been planned for. The community and technical persons present jointly agreed on the location of these water sources.

The locations listed on Page 4 of the Water Wok Plan details in the Final Performance Contract for FY 2017/2018 are aligned to those agreed upon in the Budget Conference report. They are also aligned to those listed on Page 4 of the Water Department Work Plan Details under Output: Borehole Drilling and Rehabilitation within the FY2017/2018 AWP.

No, there is no evidence that indicates that the capital investments in the Approved Annual Work Plan for FY 2017/2018 were derived from the DDP. The changes are additionally not approved by the Council. For example a review of the Iganga DLG DDP on Page 127 – 139 under the summary of the planned investment projects at LLG level specifically within the projected Work plan for the FY 2017/2018 as detailed on Page 131 to 133 under Education, indicates that the district planned to provide 45 three seater desks in Bukongo, Nawanyingi, and Mawagala; 35 three seater desks in Buvule, Naluko and Evidence that the Buwerempe P/S and 40 three seater desks in capital investments in Namundudi P/S. the approved Annual work plan for the current A review of the FY 2017/2018 AWP under the FY are derived from the Page 2 of the Work plan details for Education approved five-year Sector indicates that 54 desks were planned 0 development plan. If for in the schools of Busu, Magogo, Bunyiiro, different, justification has Akanabala, Kiringa, Itua, Kabira, Nabitende, to be provided and Bukooma, Busei, Nabirye, Bugabwe, Nakigo, evidence that it was Nubuwat, Banada, Idudi Muslim, Lubira, approved by Council. Butende Islamic, Mulanga, Bubenge, Busiimo, Score 2. Good Hope and Buwerempe. Only one school selected to receive furniture i.e. Buwerempe was planned for in the DDP. The planning team has noted that this has been due to a lack of alignment of the departmental plans to the priorities highlighted in the DDP. This was noted and will be considered for future plans made. The AWP and Budget for the FY 2017/2018 for Iganga DLG was approved by the District Council at a council meeting held 26th May 2017 under Minute 37/526/17/IDLC on Page 8. No project profiles for investments have been developed and discussed with the DTPC in the AWP for the FY 2017/2018 as per the LG Project profiles have Planning Guidelines. been developed and discussed by TPC for all The Planning Unit (Population Officer) noted investments in the AWP that the project profiles for the investment as per LG Planning projects for FY 2017/2018 were not guideline: score 1. developed. The project profiles for the planned projects for this year were also not discussed.

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 signed officially by the CAO.  The abstract however does not contain gender disaggregated data on parameters outside those specifically looking at gender demographic statistics.  There is evidence to show that the draft the abstract was presented to the DTPC for review.
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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

No the sampled infrastructural projects implemented by Iganga DLG in FY 2016/2017 do not seem to be derived from the Annual Work plan for FY 2016/2017. For example refer to the FY 2016/2017 LG Quarterly Performance Report under the Cumulative Department Work plan Performance for Education and Sports Sector on Page 100 where 10 class rooms, and one office were renovated, as well as 2 class rooms constructed.

A review of the AWP FY 2016/2017 Work Plan Details for the Education and Sports Sector (Page 1) under the output for Classroom Construction and Rehabilitation indicates that only 5 class room blocks were planned for renovations.

The LG Performance Report FY 2016/2017 does not provide any explanation for the variance in the volume of renovations and constructions for example access to more SFG or Donor funding or LR. We can also refer to the FY 2016/2017 LG Quarterly Performance Report under the Cumulative Department Work plan Performance for Water Sector on Page 116 where 1 four stance lined pit latrine was constructed at Kabira RGC under Output on Construction of Pit latrines in RCG.

A review of the AWP FY 2016/2017 Work Plan Details for the Water Sports Sector (Page 4) under the output for Construction of public latrines in RGC however indicates that renovations for one water borne toilet was planned for a the District Headquarters, and the District Water Office. Note: The AWP and Budget for the FY 2016/2017 for Iganga DLG was approved by the District Council at a council meeting held 29th April 2016 under Minute 87/04/29/16/IDLC on Page 7.

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		• 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	4	Yes, data indicates that the investment projects implemented in FY 2016/2017 were completed as per the FY work plan.  A review of the Highlights of Revenue and Expenditure for the FY 2016/2017 indicates 190.5% cumulative annual average absorption under the Domestic Development, and Donor Development grant.  Refer to pages 6, 8, 10, 12, 14, 16, 18, 20, 22, 24, 26, 27 of the 2016/2017 Annual Performance Report.  Causes of variance  Internal Audit 11% absorption: only 54% of the annual budget was realised, and local revenue was allocated only up to 22%, because Admin prioritised use of the money to settle court cases. Community Bases Services 842% absorption.  The department received 60% above budget due to the release of the MoGLSD Youth Livelihood Project.
5	The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects and assets during the previous FY  Maximum 4 points on this Performance Measure.	• Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2	0	No, investment projects in the previous FY were not 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 absorption rate of 190.5% which is a cumulative variance of 90.5% above the budget for total expenditures under Domestic Development Expenditures and Donor Development Expenditures specifically.  To review the data used to calculate the percentage of total expenditure in comparison to the approved Budget, look at the tabular highlights of the Revenue and Expenditure of the 12 departments on 6, 8, 10, 12, 14, 16, 18, 20, 22, 24, 26, 27 of the 2016/2017 Annual Performance Report.

		• Evidence that the LG has budgeted and spent at least 80% of O&M budget for infrastructure in the previous FY: score 2	2	Yes, the LG has budgeted and spent at least 80% of the O and M budget on infrastructure. A review of the tabular Cumulative Department Work plan Performance for the FY 2016/2017 indicates that the O and M expenditure for four sampled departmental project activities is at an average of 80%.  For example refer to Page 106, under Roads and Engineering, Budget for periodic maintenance of district roads was utilized by up to 107.14%.  Refer again to Page 107, under Roads and Engineering, Budget for routine maintenance of district roads was utilized by up to 100.36%.  Refer to Page 116, under Water, Budget for Rehabilitation of Deep Boreholes drilled was utilized by up to 100%.
				Refer to Page 78, under Admin Budget for Maintenance of Machine, Equipment and Furniture was utilized by up to 12.5%.
	nt area: Human	Resource Management		
recrui appra of De	as antively ited and aised all Heads partments mum 5 points	Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2	0	#8 out the (10) HoDs were appraised for FY 2016/17 as evidenced by the annual performance reports on file for CFO, DHO, DEO, DCDO, Ag.DE, Ag.DNRO, Ag.DPO, Ag.IA, and Ag.D/Planner, Ag.District Engineer, and Ag.District production officer. There was no evidence of annual performance appraisal reports for FY 2016/17 for the DCAO and
	is Performance			Ag.District Planner

		• Evidence that the LG has filled all HoDs positions substantively: score 3	0	#5 out of (10) positions of HoDs are not substantively filled as per the approved structure. The (5) positions are currently filled with staff in acting capacity (assigned duties/Caretakers) including include District Production Officer, DNRO, District Engineer, District Internal Auditor and District Planner. While the review of personnel files (appointment letters) confirmed that (5) out of (10) HoDs positions were substantively filled as per the approved structure. The filled positions include CFO, DEO, DCDO, CFO, DHO & DCAO respectively. The district has advertised but failed to attract qualified and experienced candidates especially for the positions of District Engineer and Production Officer. Refer to letter to CAO by Secretary DSC dated 2/1/17 (posts which did not attract applicants). The failure to attract was attributed to job specifications which require registered engineer and experience of 3 years at principle level for the District Production officer respectively
7	The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.  Maximum 4 points on this Performance Measure	• Evidence that 100 percent of staff submitted for recruitment have been considered: score 2	2	The CAO submitted to DSC (71) posts to be filled in FY 2016/17. Refer to (5) submission letters dated 1/11/16, 8/11/16, 8/2/17, 7/3/17, and 27/3/17 respectively. The review of the DSC minutes confirmed that all the 71 posts were considered as evidenced by: • Minute extracts of the 914th meeting of IDSC held on 2/3/17 dated 6/3/17 under advert: IDSC/004 & 013/156/16 • Minute extracts of the 903rd meeting of IDSC held on 23/1/17 dated 24/1/17 under adverts: IDSC/001-008/156/16 • Minute extracts of the 906th and 913th meeting of IDSC held on 1/2/17 dated 1/3/17 respectively • Minute extracts of the 924th and 925th meeting held on26/4/17 and 27-28/4/17 respectively • Minute extracts of the 917th meeting of the IDSC held on 28/3/17 dated 29/3/17 • Minutes of the 892nd meeting of the IDSC held on 15/12/16 (Serial no.17/16) under Min.124/2016 • Minute extracts of the 932nd meeting of IDSC held on 30/5/17 dated 31/5/17 under Min.430.

		• Evidence that 100 percent of staff submitted for confirmation have been considered: score 1	1	Yes. Iganga DSC considered all the (110) LG staff submitted for confirmation by the CAO in FY 2016/17. Submission letters for confirmation were in place, dated 20/9/16, 3/1/17, 16/1/17, etc. Refer to the following DSC minutes for evidence: • Minute extracts of the 893rd meeting of IDSC held on 16/12/16 dated 17/12/16 under Min.No.137.1, 137.42, and 137.43 • Minutes of the 907th meeting of IDSC held on 2/2/17 (Serial No.32/2017 under Min.240/2017 • Minutes of the 918th meeting of IDSC held on 5/4/17 (serial no.42/2017) under Min.328/2017 • Minute extracts of the 878th meeting of IDSC held on 27/10/16 dated 9/12/16 under Min.26, etc.
		• Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1	0	No. Iganga DSC did not consider all the (24) cases of disciplinary action submitted between 19/7/16 and 16/3/17 by CAO. The available evidence shows that (8) out of the (24) disciplinary cases submitted on 10/5/17 were considered in the current FY under the IDSC minutes of the 935th meeting held on 19/7/17 (Min.462/17). For disciplinary cases considered in FY 2016/17, refer to: • Minutes of the 917th meeting of IDSC held on 28/3/17 under Min.320/2017. • Minutes of the 882nd meeting of IDSC held on 16/11/16 under Min.57/2016, etc.
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 the review of the list of Iganga LG staff recruited in FY 2016/17, it was found that (8) out of (70) staff recruited did not access the salary payroll within 2 months after appointment. The failure to access the salary payroll within the stipulated timeframe was attributed to delay by staff to make submissions to HR department. Refer to IPPS numbers for the sampled staff recruited in FY 2016/17 for evidence: 1001630, 1001633, 1003496, 1003497, 1004835, 1003547, 1003575, 1004856, 1003887, 1003556, etc. The percentage of staff that accessed the salary payroll within the timeframe of 2 two months after appointment was 88.5%

		• 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	No. From the district retirement list for FY 2016/17 and review of the retirement files, it was found that all the (9) LG staff who retired in FY 2016/17 did not access the pension payroll within two months after retirement. This was attributed to delays by MoPS to make the final approvals e.g. Bwetwali Moses (IPPS No.816614) submitted his personal file to MoPS on 20/01/2017 but accessed on pension payroll in May 2017. Also delays by staff to process the retirement benefits e.g. Baliraine Daniel retired on 28/10/2015 but submitted his application for retirement benefits on 10/10/2016.
Asse	essment area: Revenu	e Mobilization		
9	The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)  Maximum 4 points on this Performance Measure.	• If increase in OSR from previous FY but one to previous FY is more than 10%: score 4 points • If the increase is from 5 -10%: score 2 point • If the increase is less than 5%: score 0 points.	2	From the review of the annual final accounts for FY 2015/16 & 2016/17 it was found out that the LG increased its local revenue collection by 5% from UGX 204,433,561 that was collected in 2015/16 to UGX 214,199,940/= 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.	2	From the review of the LG budget for FY 2016/17 it was found out that the LG had budgeted to collect local revenue of UGX 216,181,102/= in FY 2016/17 but by the end of the financial year it had collected UGX 214,199,940/= hence realizing a budget shortfall of only 1%.

11	Local revenue administration, allocation and transparency	• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2	0	The LG collected Local Service Tax of UGX 148,581,134 on behalf of Lower Local Governments and remitted UGX 83,241,026/= which was 56% of the collection this is below the mandatory 65%.
	Maximum 4 points on this performance measure	Evidence that the LG is not using more than 20% of OSR on council activities: score 2	0	The District spent UGX 46,174,000 UGX in 2016/17 to finance council allowances (including the standing committees) this was 22.6% of the local revenue collections of the previous financial year.
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	2	Yes, there was evidence that Iganga DLG had appointed a Senior Procurement Officer under Ref: CR.156/1 dated 23rd January 2008. It was an appointment on transfer from Jinja DLG to Iganga DLG under Min. 4/2008(a) signed for CAO by Ekachelan Esau.  Secondly, there was a Promotion for Procurement Officer as Ref: CR/167/1 dated 2nd April 2015 under Min.234/2015 signed by CAO- Mara Mukasa Joseph. Conclusively both positions in the PDU were substantively filled at the time of the assessment.
				Yes, there was evidence in Iganga PDU office that the Technical Evaluation Committee (TEC) produced and submitted reports to contracts committee. Sampled Projects included:  • Igan510/wrks/16-17/00007 where TEC report on PP Form 12D was produced, signed by 5 TEC members on 12/8/2016 and presented to DCC for decision at a meeting of 17/8/2016 under Min/DCC/3(iv)17/8/2016. However the SPO signed a date of 8th June 2016.  • However, Igan/510/wrks/16-17/0005 Construction of a 2 unit teachers house at Mbigiti Memorial Technical Institute approved by DCC on 24/3/2017 under Min/DCC/24/24th/03/2017 and Min/DCC/23/24th/03/2017 to two different contractors both signed by CAO Maira Mukasa Joseph on 10th April 2017, lacked the TEC reports and submissions to DCC. The

Procurement Officer could not trace them. They were to a contact value of 87,532,400 · Evidence that the and 87,792,000/= respectively. TEC produced and • Igan510/wrks/16-17/0004 had a TEC report submitted reports to the on PP Form12D signed by all TEC members Contracts Committee for on 12/8/2016 was the same recommendation the previous FY: score 1 by DCC of 17/8/2016 under Min /DCC/3(iii) and signed by SPO on 17/8/2016 Some framework services like electricity installation in Namalemba s/c, renovation of water office (small constructions below 10m are done basing on 3 quotations by user department. Therefore, no TEC reports were in place rather it was direct awarding by DCC. From the sampled files above the TEC and DCC decision documents were not seen by the assessor. Igan 510/wrks/16-17/00029 renovation of school hall at Namusisi Pr. Sch had TEC report signed by TEC on 10/2/2017 but no evidence of submission to DCC much as CAO Maira Mukasa Joseph signed the letter of Bid acceptance on 20/2/2017 referring to MIN/DCC/19/13th /02/2017. In conclusion, the TEC reports were not substantially filed with evidence of submission to DCC from the sampled files. It was evident that record management was lacking. Yes, from all the sampled files as above and others as below; Supply of Construction materials by BATULI Investments worth 58,647,125 had neither TEC recommendation nor DCC decision for award of the framework contract as made on Committee 13/6/2017. The assessor noted that the other considered contract pages are not initialled, a scenario recommendations of the that can be manipulated. TEC and provide justifications for any Some files lacked the DCC submissions but in deviations from those general there were no variations from TEC recommendations: score recommendations by the DCC. 1 This was attested to by the officer as well. Since the issue is deviation, there was none and in all cases DCC upheld TEC recommendations.

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

Maximum 2 points on this performance measure.

• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2

The Procurement and disposal plan for 2017/18 as prepared and signed by PDU and CAO signed 17th/3/2017 had 75infrastructure projects which were generally found in the AWP and Budget of Iganga district

- on page 28 under education is the plan for desks including Busei Pr.Sch which i visited and found a pleased Deputy with 70 desks.
- Renovation of Namungalwe HC II was on page 17
- On page 4 of water work plan details are the RGCs public latrines and the 21 deep water boreholes to be drilled with 8 rehabilitated
- The roads detailed plan on page 1 and 2 were the roads to be reshaped and periodically maintained.
- However it was noted that the road Walanga
   -Nawampendo (4km) was maintained in
   17/18 as a spill over due to limited finance
   allocation but it was a 2016/17 project.

The PDU had no record of quarterly procurements reports for the Previous FY in electronic nor hard copy. The officer had no Internet provisions to send reports to the government procurement protocol (GPP) of PPDA which has to be done on line. From the draft/incomplete contracts register the projects were found in the proc. Plan for 2016/17;

Examples are; Projects on page 2 of the contracts register were found on pages 1 and 2 of the Procurement plan 2016/17.

Projects on page 8 of contract register were all evident on pages 8 and 10 of the procurement plan 2016/17.

Summarily, the projects by the Iganga LG adhered to the procurement plan.

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 Yes, there was evidence that some bid documents were prepared before 30 August with a closing date of 25th August 2017.

#### Sampled reviewed were;

- solicitation document and drilling supervision of 7 boreholes Lot 2 Igna510/Srvcs/17-18/00014 supplies
- Procurement ref.No.lgan510/Supls/17-18/00025 for desks was issued on 4th August 2017
- From the advert for 2017/18 for works,, services and supplies Notice No. One was closing on 25th August, implying a preparation before 30th August.
- The same documents were given for all the works services and supplies anticipated.

In conclusion, the solicitation documents for the current year were prepared before 30th August.  For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2 The LG had evidence of a contract register for FY 2016/17 but was not yet fully updated at the time of the assessment. The Procurement Officer was working on it at the time of the assessment.

On the other hand there was no evidence of complete procurement activity files for all procurements of the previous FY. The files generally lacked the contract manager reports which are a core basis for payment:

Samples checked included:

- Namungalwe s/c routine mechanised maintenance of Bulumwaki- Bugulumo road. The progress reports, by project managers and user department, payment certificate.
- There was no evidence of completion reports much as it is a requirement in the BoQ for the 10 boreholes under Lot one, item 1.5 There was none on file hence incomplete
- Several documents including form 2 for procurement method was lacking on some files

The limited logistical support via photocopy, team work and general poor record management leads to several incomplete action files in Iganga PDU.

the action files it was evident that the LG adhered with procurement thresholds. Examples: • Igan510/srvc/16-17/000001 at a sum of 73,000,000 was open domestic bidding Partial completion of Nambale sub county administration block at 9,300,760/= by Ms For previous FY, Namunhanha Construction company was evidence that the LG under selective bidding. has adhered with 2 Routine mechanised maintenance of procurement thresholds Bukonko –Buwolomera road (4.5km) under (sample 5 projects): DDEG at 14,730,000/= was under force on score 2. account. Rehabilitation of Nabitende 4 classroom block at 88,670,000/= Vat Incl. Was under open domestic bidding. • Igan510/wrks/16-17/00045 Renovation of community building store at Bukaye by M/s Abaigaga Investments Ltd at 22,118,510/= was under selective bidding.

The PDU lacked compiled quarterly reports but from the previous FY contract register and

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

No, There was no evidence of all works projects implemented in the previous FY being appropriately certified – interim and completion certificates based on technical supervision;

- Namungalwe s/c routine mechanised maintainance of Bulumwaki- Bugulumo road. The progress reports, by project managers and user department. There was only a completion certificate dated 31st march 2017 with a sum of 6,638,150/= from Road fund. The sub county chief though provided for had not signed.
- Several framework and force on account procurements lacked many documents including the interim and completion certificates. the Procurements are managed with a leas fare approach under frameworks.

Sample of nabitende rehabilitation of a 4 classroom block totally lacked any completion certificate.

Bukonko- Buwolomera road had several payment vouchers and agreements but no certificate at all. The two are different

The file for Bukaye store renovation stopped at the contract agreement Igan 510/16-17/000045

• 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

Yes, there was evidence of some projects for current FY labelled but not indication of all the stipulated aspects: namely the contract value and expected duration it was just current FY.

Areas sampled included:

- A 5 stance lined latrine with lined Latrine al at Magogo Pr. Sch (1)in Nawanyingi S/county along Kalilo –Bukaye road LHS. Labelled, with water tank.
- A 5 stance latrine at Kakongoka Pr. Sch (2) in Nakalama S/county.

GPS Latitude- 0.69582

Longitude - 33.56331

Altitude - 1058.3

It was also labelled but with no contract value, contractor and duration. It only showed source of funds and FY 17/18.

The road sector had two roads one of which inspected as Periodic Maintenance of Walanya -Nawampendo (4km) starting at GPS point (Lat: 0.56907; Long; 33.552902: Altitude: 1112.6) It was labelled under Force on Account with funds from Road fund FY 17/18. There was no contract value nor the duration for works.

Water sector had no project for FY 17/18 they had just signed the agreements due to delays arising from budget cuts and project revisions.

The education department planned for desks only for FY 17/18

The sample was at Buseyi Pr. Sch. with 70 pupils desks it is along Iganga -Buseyi - Wanyama Road .H/M office GPS ( Lat-0.618845; Long- 33.4961; Altitude – 1126.2) The desks were labelled with company name, source of funds and FY 17/18. No general signpost was seen by the assessor at the time

Assessment area: Financial management

16	The LG makes monthly and up to-date bank reconciliations  Maximum 4 points on this performance measure.	• Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4	0	It was noted that the district last made bank reconciliation on 30th/11/2017 for the General Fund Account and 05th/12/2017 for the Single Treasury Account these were the only two accounts seen and they had not been reconciled by 30th/12/2017 (not up-to-date)
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.	0	The assessment team was only able to assess 9 projects of all the projects undertaken in 2016/17 this was deemed to be an inadequate sample. Other files were not accessed because the officers holding them were absent during the time of the assessment.  The above no withstanding for all the available projects seen payments were done on time for example:  o Contract to LHM for siting, drilling and supervision of 11 deep boreholes, an invoice was raised on 10th/10/2016 and payment was effected on 15th/11/2016  o Contract to Iseluganda investment for supply and installation of hand pumps of 21 old boreholes, an invoice was raised on 28th/9/2016 and payment was effected on 27th/10/2016  o The contract for rehabilitation of a 4 classroom block at Nabitende PS, an invoice was raised on 5th 12/2016 and the payment was effected on 20th/12/2016

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

0

The District has a substantive Senior Internal Auditor appointed on promotion and transfer of service on 27th January 2011, Min No. 611/2011(I)

The audit department has produced all the four quarter internal audit reports for 2016/17 on the following dates:

- o 1st quarter internal audit report on 12th June 2017
- o 2nd quarter internal audit report on 12th June 2017
- o 3rd quarter internal audit report on 12th June 2017
- o 04th quarter internal audit report on 29th September 2017

• 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 assessment team was not able to find evidence the LG provided information to Council or LG PAC on the status of implementation of the internal audit findings.

Even from clerk to council no such report was obtained.

		• 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 internal audit reports were submitted to CAO and LG PAC on the following dates:  Q1 was submitted on 12th/10/2017  Q2 was submitted on 12th/10/2017  Q3 was submitted on 12th/10/2017  Q4 was submitted on 6th /11/20117  These reports have however not been reviewed by LG PAC and the reasons given was that PAC was still handling queries of the previous financial years.  It was reported that for some time in 2016/17 the District operated without PAC for lack of quorum as some members had retired and not replaced this thus created a big backlog of cases for the previous financial years.
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 existing assets register that was printed from the system is not up-to-date; newly acquired assets not included for example the road works units that were donated by government in 2017 and other existing assets like land and buildings not included too.
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 District 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

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 reports, performance, and monitoring reports.  For example the District Council held a meeting held 22 December 2016 under Minute 24/12/22/16/IDLC where the 5 Standing Committee Chairpersons presented their respective Quarter 2 Departmental Reports. These presentations were extracted from the HODs submissions in the TPC.  As at 2016/17 the LG PAC Committee was not fully constituted because the terms of office for three members had expired. As such the LG PAC report was not received and reviewed by the Council.  The office of the CAO has made arrangements to ensure that the committee is fully constituted on within this quarter.
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 a designated person who has been formally assigned to respond to grievances, feedback from the citizens on the budget website.
23	The LG shares information with citizens (Transparency)	Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2	2	Yes, the LG Payroll and Pensioner Schedules were posted on the public notice board at the Administration block.
	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 and Contract information was displayed at the Administration board.

The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens	• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national	1	Yes, the hard copies submitted by the ministries for example on LG planning or DDEG are disseminated to LLGs.  For example the District Population Officer issued and oriented LLG on the Guidelines for
Maximum 2 points on this performance measure	level to LLGs during previous FY: score 1		the Distribution of the Discretionary Development Equalisation Grant for the FY 2016/2017 in Nov 2017.  For example refer to the DDEG guidelines acknowledgement registration schedule signed on Friday 11 Nov 2017, and the handwritten minutes developed by the Population Officer.
	• Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc) with the public to provide feed-back on status of activity implementation: score 1.	0	No, there is no physical evidence submitted to show that the district performance results and budget implications are shared and published.  The Population Officer and the District Information Officer were requested for information to validate activities reported on in the LG Performance Report which could provide evidence for this parameter, but no report, audio or minutes were forthcoming.  For example refer to LG Performance Report Cumulative Department Work Plan Performance for the Finance Sector on Page 79 under output on Local Revenue sensitization awareness campaigns.  Please refer to LG Performance Report Cumulative Department Work Plan Performance for the Production Sector on Page 90 under output on awareness radio programs.

The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles

Maximum 4 points on this performance measure.

• Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2.

0

The GFP had no evidence of guidance and support provided to the sector departments to mainstream gender into their activities. What he presented was a communication dated 3/7/2016 informing the Production, veterinary, Commercial officer, SASs and CDOs that Iganga had been brought on board to implement UWEP.

There was an annual progressive report by GFP of one page only with no signatures of attendance nor copy of the activity voucher.

Secondly the guideline was leaning to only the production sector

• 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.

In the current FY work plan given by the HoD and signed by CFO, CAO were several plans for women empowerment on pages 3, 5, 6, 9 and 10. The GFP seemed not involved in his role as a GFP

From the DCDOs report for community based services for FY 2016/17 dated 30th June 2017 on page 2 he reported total quarterly released as 98,597,916.

YLP funds received were 238,000,000 for the groups + 12,740,784 for operations

From the AWP FY 16/17 approved budget was for all the sectors in Community development 106,187,038 (excluding UWEP and YLP because UWEP started FY 17/18

In 16/17YLP budget was 375,000,000 but it has not been included in the calculation.)

The implementation % is 72.6

This is because some of the YLP funds for 2016/17 were actually received in 2017/18 which affects accruals, this is to a tune of 170,030, 000 was rolled over and has actually been received.

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
2

Yes, there was evidence of a staff team including a Senior Environment Officer, Environment Officer, A physical Planner, there is no substantive, DNRO, DSS, Lands and Forest Officer. There are never EIAs for any district development projects under such scope.

The Environment Officer has screening reports for 2016/17 for water and road works. Other that the road fund screening there was no evidence that mitigation measures are planned and budgeted for.

• Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1

Yes there was evidence that the LG integrates environmental and social management plans in the contract bid documents via

- Igan510/Srvcs/17-18/00031 the bidding document for sitting and drilling supervision of 10 boreholes Lot 1 on page 11-12 provided for environmental guidelines and code of conduct but mitigations were not budgeted for explicitly. Refer to BoQs of Maa Technologies in Lot 2.
- Bills of quantities for a 5 stance lined VIP latrine was lacking explicit integration of ESM Plans in the contract bid documents.
- · For desks there was no ESMP
- Previous FY under Igan510/wrks/16-17/00005 construction of a two unit teachers staff house at Mbigiti Technical Institute, the Contract provided for social mitigation under articles15, 16, 17,18,19, 23,33,34 and 37 but none was explicitly environmental in nature. However,

The BoQs provided for several concerns including a lightening arrestor on pg B1/15 of 21 to 21 of 21.

• Under Nabitende rehabilitation of a 4 classroom block is an instruction for safety of all activities on the site. Section 19.1 for Ise luganda investments bid contract.

The bid contracts ought to be more explicit and inclusive by all the sector departments.

• 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	There was no evidence of land ownership for projects. The Ag.DE referred to some water project agreements intimating to community involvement but they were no land agreements per say.  The Ag DNRO alluded to all land being public hence processing free hold titles but none was in place for the projects in schools and health centres.
• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2	0	There was no evidence that all the completed projects had Environmental and Social Mitigation Certification signed by the Environment Officer. She alluded to logistical issues where she has no printer hence no copies.  She hoped to find some with the engineers but came up with only one from FY 14/15



## **LGPA 2017/18**

**Educational Performance Measures** 

Iganga District

(Vote Code: 510)

Score 44/100 (44%)

## **Educational Performance Measures**

No.	Performance Measure	Scoring Guide	Score	Justification			
Asse	ssessment area: Human Resource Management						
1	The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)	• 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 for budgeting in FY 2017/2018 with a wage bill of 14,941,066,300 catering for 153 Primary Schools with a budget for 2,325 Teachers including Head Teachers submitted to MoFPED on 01/03/2017 by CAO  Budget is available for 1 head teacher & minimum of 7 teachers per school.			
	Maximum 8 for this performance measure	Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4	0	There are 2298 Teachers deployed for the 153 schools as per Schools Staff List, annual Census conducted in August 2017 and summary sheet was endorsed by the DEO on 25/8/2017. However all Schools never had substantive Head Teachers, there was a gap of 14 Head Teachers.			
2	LG has substantively recruited all primary school teachers where there is a wage bill provision  Maximum 6 for this performance measure	• Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0	3	The LG has not substantively filled the structure for all primary teachers  There is a Gap of 27 Teachers, of whom some are Head Teachers and others Classroom Teachers.  2298/2325 = 98.83%			

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	<ul> <li>Staff Structure in place as signed by the DEO on 11/10/2017. It clearly shows the provision of the 2 Inspectors.</li> <li>2 Inspectors of schools in place and substantively appointed with Minute numbers below.</li> <li>Min No. 32/2013 (c)</li> <li>Min. DSC/325/2013/dd/3/5/2013 (c)</li> </ul>
4	The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.  Maximum 4 for this performance measure	Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of Primary Teachers: score 2	0	No, However there is evidence of CAO's submission to the DSC declaring Vacant Posts and a write up on regularisation of appointments of Head Teachers & their Respective Deputies under the implementation of the Policy Shift on Primary Schools.  Letter dated 12/07/2017 with ref: AUD/159/1 and signed by CAO  There was no Recruitment Plan in place from DEO's Office to HRM or CAO.  It is noted that the Declaration of vacancies seen was for promotion purposes and could not fully close the present gap especially to cater for Head Teachers.
		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	All the 2 Inspectors of schools are in place and substantively appointed with Minute numbers below.  1. Min No. 32/2013 (c) 2. Min. DSC/325/2013/dd/3/5/2013 (c)

5	The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.	Evidence that the LG Education department appraised school inspectors during the previous FY • 100% school inspectors: score 3	3	The district has two substantively appointed inspectors of schools as per the customised structure for the education department. There is evidence to show that the two inspectors of schools were appraised for FY 2016/17 as detailed below: a) Senior Inspector of Schools (Tigawalana George) was appraised by the DEO on 25/6/17, b) Inspector of Schools (Sekimuli Swaibu) was appraised by the DEO on 28/8/17 and the report was signed & stamped by DCAO on 19/9/17. Refer to performance appraisal reports for FY 2016/17 on file.
	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	0	53% (69) out of the (129) primary head teachers were appraised for the calendar year 2016 using the public service performance agreements. The annual performance reports were signed by the DEO and on file.  Examples of sampled primary head teacher's annual performance reports: • Waiswa Zaidi (Bubbala P/S) • Singa Nuhu (Buwooya P/S • Kyakuita Susan (Nkombe P/S) • Naigaga Madina (Idudi Muslim P/S) • Mutonyi Annet (Dhakaba Memorial P/S) • Musota Robert (Buliganwa P/S) • SR.Josephine Nabachwa (Namunyumya Girls) • Kasiisa Fred (Iganga Boys P/S) • Etc.

Assessment area: Monitoring 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	No, some of the Minutes presented reflect the communication of some of the Policies as shown below  - Minutes of meeting between the Education Department and Head Teachers held on 25/05/2017. It was signed by the Secretary and Chairperson. The DEO communicated about Environmental file, keeping school records, Monthly returns to DEO's office and UPE accountability.  However there is no clear evidence to show that all the Policies, guidelines an Circulars were communicated to the schools in FY 2016/2017
		• Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level, including on school feeding: score 2	0	There was no evidence produced to show that meetings were held to expla Guidelines, policies and circulars issue by the National Level to the Head Teachers.  The available Minutes were not clearly showing in details the communication of these policies to the school Head Teachers.
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	Inspection Reports are in place as Submitted by the DIS to CAO on 7/09/2016 for Q1. Q2 report submitted to CAO on 9/11/2017, Q3 report submitted to CAO on 3/04/2017, Q4 Report submitted to CAO on 5/05/2017 and all were received and fully stampe Out of the 153 Government schools ar 96 Private schools as per EMIS data base giving a total of 249 schools.Inspection details provide that Q1 = 120/249 schools were inspected. Q2 = 140/249 schools were inspected. Q3 = 210/249 schools were inspected. Q4 = 213/249 schools were inspected. In a year this translates to 683/996 = 68.57

8	LG Education department has discussed the results/reports of school inspections, used them to make	• 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	There was no evidence that the LG education department had discussed the inspection reports as prepared by the DIS
	recommendations for corrective actions and followed recommendations  Maximum 10 for this performance measure	• Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2	0	There was no evidence of submission of Inspection reports to DES, MoES
		• Evidence that the inspection recommendations are followed-up: score 4	4	Yes, Inspection follow up evidence was in place as the LG Education department designed school Summary Feedback report tools as below.  1. Follow up to Nawankwaale P/S followed up on 20/6/2017 by IS/AA.  2. Follow up to Buweira P/S in Nabitende S/County on 22/6/2017 followed up by IS/AA
9	The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES	• Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5	5	List of schools submitted in the EMIS report are consistent with those in OBT  1. Dhakaba Memorial P/S  2. Bulowoza P/S  3. New Jerusalem P/S –Nawanyingi  4. Agape Primary School
	Maximum 10 for this performance			

measure

OBT 1. Mulanga P/S – had 561 pupils while it had 561 in EMIS report Evidence that the LG has submitted accurate/consistent Bulunguli P/S – had 806 Pupils and data: • Enrolment data for all 806 in EMIS report schools which is consistent with 3. Akanabala bulanga P/S had 1098 EMIS report and OBT: score 5 pupils and 1098 in EMIS report 4. Itanda P/S – had 614 Pupils and 614 in the EMIS report Assessment area: Governance, oversight, transparency and accountability 10 The LG committee responsible for education met. discussed service issues like sector performance. delivery issues and

Maximum 4 for this performance measure

presented issues

approval to Council

that require

 Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc... during the previous FY: score 2

2

Yes, there is evidence that the Standing Committee on Social Services met and discussed Education service delivery

Sampled school's enrolment data is consistent with the EMIS report and

For example the committee met on 10th October 2016 and discussed issues presented by the DEO on staffing levels, school enrolment, student absenteeism and school inspection.

Refer to committee meeting report developed on 10th Oct 2016 and signed by the Committee Chairperson Hon. Luganda Paul, and minutes from meeting held 22 Sept 2016.

Refer to Minute 3/SS/3/17 on page 1 where a presentation was submitted by the DEO.

		Evidence that the education sector committee has presented issues that requires approval to Council: score 2	2	Yes. The sector committee presented issues that require approval from council.  Refer to District Council meeting held 10th Oct 2016, Minute 24/10/210/16/IDLC where the Chairperson of the Standing Committee for Social Services presented a report to the fuller District Council for discussion.  The report included among others Education sector issues namely school enrolment levels, teacher and student absenteeism and school inspection where the Council proved guidance on recommendations to address challenges identified.  This submission was extracted out of a standing committee meeting report for meeting held 10th Oct 2016. Refer to Minute 3/SS/3/17.
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	95 schools out of 153 government schools had functional SMC's, i.e SMC lists and minutes, there was no Minutes or SMC lists for the 96 Private schools in Iganga District.  95 schools with SMC Lists & Minutes out of 249 schools in total. 95/249 = 38.15%
12	The LG has publicised all schools receiving non-wage recurrent grants  Maximum 3 for this performance measure	• Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3	3	Evidence was in place of schools displayed for FY 17/18 on the education department notice boards. The School Lists for FY 16/17 were available on file and were signed and stamped by the DEO on 20/4/2017.
Asse	essment area: Procur	ement and contract management		

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	not in Place.  No document could be seen to provide evidence about submission to PDU.  There was no filed copy in the DEO's office and copies in PDU could not be accessed.
The LG Education department has certified and initiated payment for supplies on time  Maximum 3 for this performance measure  • Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points	The assessment team was only able to obtain files of only two projects of the 6 projects implemented in 2016/17 other files were not accessible because the CFO had locked them in his office and he was absent at the time of the assessment. This was considered an inadequate sample.  Of the two contracts the Education Officer had approved payment on time as per the contract for example:  The contract for construction of 5 stance and 2 lined latrine at Mbigiti tech, an invoice was raised on 9th 12/2016 the Education officer approved payment on 14th/12/2016 and the payment was effected on 28th/12/2016  The contract for rehabilitation of a 4 classroom block at Nabitende PS, an invoice was raised on 5th 12/2016 the Education officer approved payment on 20th/12/2016 and the payment was effected on 20th/12/2016

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 of Education submitted annual performance reports for all fou quarters 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	Although a number of audit queries were raised in the internal audit report by the time of the assessment the teadid not find responses from the department addressing these queries. The queries included among others:  Missing payment vouchers  Charging fuel to a wrong expenditure code  Nugatory expenditures
Asse	essment area: Social a	and environmental safeguards		
17	LG Education Department has disseminated and promoted adherence to gender guidelines  Maximum 5 points for this performance	• Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc: Score 2	2	Yes, there was evidence of Training of SMT & SWT and a report was produce on 15/04/2016 with ref: ED/161/1. Signed by the SEO and signed by the CAO on 15/4/2016  Disseminated Circular No. 01/2015, issued on 24/01/201 issued by MoES signed by the PS – MoES. List of distribution of the circular evident as signed on 21/04/2015 by the CCT of Pupyling CC
	measure	• Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2	0	Bunyiiro CC.  There was no evidence for guidelines issued for PWD's and sanitation for girto the schools

		• Evidence that the School Management Committee meet the guideline on gender composition: score 1	0	All the sampled schools with SMC lists never met the Guideline on Gender Composition  1. Kabuko P.S does not meet gender Guideline and signed by DEO on 16/5/2019  2. Itanda P/S – School had no SMC list on file  3. Kigulamo P/S – Meets guidelines on Gender and signed on 6/8/2015 by DEO  4. Buvule P/S – It was meeting the gender guidelines and signed by DEO on 19/8/2015  It was noted that some of the sampled schools met the gender guidelines, however the others did not meet the required guidelines on composition of the Foundation Body of the SMC of atleast 2 women on the Foundation Body
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 to show clear collaboration of the Education department and the Environment department.  However they shared minutes where the DEO highlighted on each school having an environment Files. This meeting was held on 25/05/2017.  However these minutes were not elaborate enough to give details of how the guidelines and policies on environments were communicated.



Health Performance Measures

Iganga District

(Vote Code: 510)

Score 50/100 *(50%)* 

## Health Performance Measures

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Human re	source planning and r	managei	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	6	All positions planned to be filled were advertised and filled. A file for advertisements and list of positions and the current staff list were reviewed.
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	The health department submitted a comprehensive recruitment plan to HR on 22nd Aug 2016, there was a submission to public service on 4th Nov 2016. On 6th Oct 2016 there was communication from the public service commission to the district to fill critical positions to fall within 274,916,654/(PHC) 145,766,259/ (unconditional grant) and 13,597,788/= (District Urban Unconditional grant).  On 28th Oct 2016 district responded to public service request with a list of critical positions to be filled and clearance was given on 31st Oct 2016 to fill the positions,

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	Iganga district has two HC IVs (Busesa and Bugono) and Iganga Hospital. #2 out of the 3 health facility in-charge were appraised for FY 2016/17 as indicated below: a) The health facility in-charge for Busesa HC IV (Dr.Nakiwunga) was appraised and performance appraisal report signed by DCAO on 10/7/17. b) The health facility in-charge for Bugono HC IV (Dr.Mulidho John) was appraised by DHO on 11/11/17 c) However, the health facility in-charge for Iganga Hospital (Dr.Waako James) was last appraised during FY 2015/16, and report signed by DHO on 17/8/16. The above evidence gives a 67% of the appraised health facility in-charge staff
4	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	4	Yes, the health department deployed all health workers recruited. The current staff list and list of advertised positions was reviewed for consistency.
Asse	essment 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			The following policies were available at the DHOs office and at the facilities similar policies were available at different facilities even at some HCIIs.  Mass Distribution of long lasting Insecticide Treated Nets to Achieve Universal Coverage in Uganda District Guide oct 2016, Uganda Public Health service Protocols May 2016, Health Sector Quality Improvement Framework and Strategic Plan 2015/16-20119/20 June 2016, A guide for Reaching Every District and Every Child in Uganda 2017, Self-Regulatory Improvement System Tool for Quality Improvement in the Private Sector Uganda 2016, Tetanus Toxoid Vaccination Guidelines for Safe Male Circumcision Program In Uganda 2016Consolidated Guidelines for Prevention and Treatment of HIV in Uganda, National HIV Testing Services Policy and Implementation

Guidelines Uganda 0ct 2106, The Quality Improvement Methods 2016, Immunisation in Practice Uganda 2017

There were four circulars on file from MOH to the district: 1ST June communication on supervision of the roll out of the consolidated guidelines for preventing and Treating HIV, 16th January 2017 communication on effective use of Resources provided by Health Development Partners, 31st August 2016 communication on Family Planning Study

At the facilities the following policies and guidelines were found:

Iganga Islamic HCIII: National Policy on Public Private Partnerships in Health for PNFP 2016, Health Sector Quality Improvement Framework and Strategic Plan June 2016, Tetanus Toxoid Vaccination Self Regulator Quality Improvement System Tool for Quality Improvement in the Private Sector Uganda Feb 2017

Iganga Hospital: Uganda National Guidelines for the Programmatic Management of Drug Resistance Tuberculosis and Leprosy Program 2016, Uganda Clinical Guidelines 2016

Busesa HCIV: Consolidated Guidelines for Prevention and treatment of HIV IN Uganda 2016, Integrated Management of Neonatal and Childhood Illness with care for child Development 2016

Ibulanku HCIII: Consolidated Guidelines for Prevention and Treatment of HIV in Uganda 2016, Health Sector Quality Improvement Framework and Strategic Plan 2015/16-2019/20, Primary Health Care Grants Guidelines 2016.

Bunyiiro HCIII: Health Sector Quality
Improvement Framework and Strategic Plan
2015/16-2019/20, Achieving Equity in
Immunisation Coverage by Reaching Every
Community 2017, Guidelines to Acute
Malnutrition Uganda 2016, Immunisation in
Practice in Uganda UNEPI June 2017,
Consolidate Guidelines for Prevention and
Treatment of HIV in Uganda

Namugalwe HCIII: Achieving Equity in Immunisation Coverage by Reaching Every Community 2017, Consolidated guidelines for Prevention and Treatment of HIV in Uganda 2016, Uganda Eligibility Criteria Wheel for Contraception Use 2016, A guide for Reaching Every District and Reaching Every Child in

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

Uganda 2017, Uganda Clinical Guidelines 2016, Essential Medicines and in Uganda 2017, Consolidated Guidelines for Prevention and Treatment of HIV in Uganda. Bugono HCIV: Guide for Reaching Every District and Every Child in Uganda 2017, Achieving Equity in Immunisation Coverage By Reaching Every Community 2017, Uganda Clinical Guidelines 2016, Immunisation in Practice in Uganda 2017, Consolidated Guidelines for Prevention and Treatment of HIV in Uganda 2016. Itanda HCII: Uganda Clinical Guidelines 2016, Achieving Equity in Immunisation Coverage by Reaching Every Community With regard to circulars Busesa HCIV, Ibulanku HCIII and Iganga Hospital, Bunyiiro HCIII there were no circulars from the DHOs office. Namugalwe there were three circulars on date 31st Aug 2016 on FP study, 22nd June 2016 for Management of medical supplies and drugs, and 6th Jan 2016 the Adolescent Mapping Exercise in 112 Districts. Bugono HCIV there was a circular dated 24th Oct 2017 on Evaluation of the Impact of National Guidelines for TB/HIV Collaborative Activities in Uganda, on 14th Aug 2017 a circular on General Supply Chain Guidance on the Roll Out of Consolidated Guidelines and on 22nd Aug 2017 Training in Community Data Tools. While Itanda HCII were two circulars on Use of the UNEPI Cold Chain for Oxytocin dated 14th June 2017 and Discontinuation of Vitamin Supplementation in Post-Partum Mothers in Uganda dated 25th May 2016. Evidence that the DHO has held meetings with health facility in-There were no minutes of meeting where the charges and 0 among others DHO disseminated the policies, guidelines and circulars to facility in charges and other staff. explained the guidelines, policies, circulars issued by the national level:

score 3

		I		I
6	The LG Health Department has effectively provided support supervision to district health services  Maximum 6 points for	Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3	3	The DHO supervised all the HCIV namely Buses HCIV, Bugono HCIV, and Iganga Hospital. Bugono and Busese HCIV between 6th and 9th July 2016. Bugono and Busese between 26th and 29th Sept 2016, between 19th May and 15th June Busesa HCIV, Bugono HCIV and Iganga Hospital and lastly 11th Jan and 15th Dec 2017 Iganga Hospital
	this performance measure	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	2	The DHT supervised lower facilities and information on file at DHOs office was consisten with information at the facilities.  Three integrated support supervision reports were found on file. The report dated 20th June 2016b the supervision was conducted between 6th and 9th June 2016. The facilities supervised were: Nambale HCIII, Bugono HCIV, Lubira HCIII, Nawandal HCIII, Busembatia HCIII, Bulumagi HCIII, Namugalwe HCIII, Bunyiiro HCI Namugalwe HCIII, Busowobi HCIII, Makuutu HCIII, Nakalama HC, Busesa HCIV, Iganga Tow Council HCIII, Ibulanku HC III, Kasambika HCIII and Iganga Islamic HCIII. The second report dated 3rd October 2016 support supervision wa conducted between 26th and 29th Sept. The following facilities were supervised Nambaale HCIII, Bugono HCIV, Lubira HCIII, Nawandala HCIII, Busowobi HCIII, Bunyiro HC II, Namungalw HCIII, Busowobi HCIII, Makuttu HCIII, Nakalama HCII, Busesa HCIV, Iganga Town Coucil HCII, Ibulanku HCIII, Nawasiga HC III, Namungalw HCII, Igombe HCIII, Nasuti HCII, Nawanzige HCII, Buyonga HCII, Nasuti HCII, Nawanzu HCII Nambale HCIII, Naibiri HCII, Bukwaya HCII and Iganga Islamic HCIII. The report dated 15th Dec 2016 supervision was conducted between 7th and 13th Dec and the following facilities were supervised. Nambaale HVIII, Lubira HCIII, Busembatia HCIII, Bulamagi HCIII, Busesa HCIV, Iganga Town Coucil HCIII, Ibulanku HCIII, Igombe HCIII, Iganga Islamic HCIII, Nawandala HCIII, Igombe HCIII, Iganga Islamic HCIII, Nawandala HCIII, Iganga Town Coucil HCIII, Ibulanku HCIII, Iganga Town Coucil HCIII, Ibulanku HCIII, Iganga Hospital HCIII, Nakalama HCIII, Nawandala HCIII, Bunyiiro HCIII, Nakalama HCIII, Bulamagi HCIII, Bunyiiro HCIII, Nakalama HCIII, Buny

attached to the report is follow up report from action points of previous quarter. In addition, all reports were signed off. At the facilities Iganga Islamic HCIII, three was a DHT supervision on 29th Sept, 11th June of 2016 and 10th Feb 2017. Iganga Hospital there was one DHT support supervision on 11th Jan 2017, Busesa HCIV there were DHT supervisions on 7th July, 26th Sept, 12th Dec of 2016 and 9th Jan 2017. At Namungalwe HCIII there was a DHT supervision on 26th Sept, 25th Nov, 7th Dec of 2016 and 7TH Dec of 2017. Bugono HCIV was supervised by the DHT on 16th Sept and 25th Sept of 2016 and 13th Dec of 2017. At Itanda HCII there was no evidence of DHT supervision. 7 The Health Sub-Iganga Hospital, Bugono HCIV and Busesa HCIV district(s) have are the HSD in Iganga District. Of the four effectively provided facilities visited only two had an HSD supervision support supervision to therefore a no score and justification is described lower level health units below. Evidence that There was one supervision report from the HSD health facilities Iganga Hospital was written by the administrator have been Maximum 6 points for of the hospital, dated 26th October 2017. In the supervised by HSD this performance report the facilities mentioned were Bunyiiro and reports measure HCIII, Nawanyingi, Mawagala and Busowobi. produced: • If There was also a mention of schools supervised 100% supervised in this report Nakigo, Buwongo, Musana all score 6 points • 80 primary schools. - 99% of the health facilities: score 4 • At Bugono HCIV and Busesa HCIV there were no 60 - 79% of the reports for HSD support supervision. health facilities: score 2 • Less than At Namungalwe HCIII and Itanda HCII both 60% of the health supervised by Bugono HCIV, there was evidence facilities: score 0 of HSD supervision on 2nd April and 3rd July 2017 respectively. At Ibulanku HCIII there was no evidence of supervisions from the HSD Busesa HCIV.

	8	The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make	• Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4	0	There was no evidence at Bugono HCIV, Iganga Hospital, Busesa HCIV and even the facilities that supervision reports have been discussed and action plans developed.
		recommendations for 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	In absence of action plans there was no evidence of action plan implementation.
•	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	10	Both OBT and HMIS were reviewed and the list of facilities in the HMIS was consistent with list of facilities 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, there is evidence that the Standing Committee on Social Services met and discussed Health service delivery issues like sector performance.  For example the committee met on 10th October September 2016 and discussed issues presented by the DHO on staffing levels, absenteeism, Mother to child health, financing for health centres, disease burden as well as sanitation.  Refer to committee meeting report developed on 10th Sept 2016 and signed by the Committee Chairperson Hon. Luganda Paul, and Standing Committee meeting held 22 Sept 2016 Minute 3/SS/3/17 Page 2 where the DHO submitted the

health status report.

		• Evidence that the health sector committee has presented issues that require approval to Council: score 2	2	Yes. The sector committee presented issues that require approval from council.  Refer to District Council meeting held 10TH Oct 2016, Minute 24/10/210/16/IDLC where the Chairperson of the Standing Committee for Social Services presented a report to the fuller District Council for discussion.  The report included among others issues sector staffing gaps, role of the health centre management committees and the gaps within sector financing. This submission was extracted out of a committee meeting report for meeting held 10th Oct 2016. Refer to Minute 3/SS/3/17.
11	The Health Unit Management Committees and Hospital Board are operational/functioning  Maximum 5 points	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	There is no functional HUMC in Iganga District of five facilites visited only one HUMC was functional.  There was no HUMC file at the DHOs office however at facilities: Iganga Islamic HCIII there were meetings on a quarterly basis on 1st Sept, 22nd May and 20th Mar all of 2016. While in 2017 a meeting was held on 16th April. In all the meetings issues related to resources were discussed worth noting a finance committee of the HUMC also holds a monthly meeting. At Iganga Hospital there were three meeting minutes dated 27th Oct 2017, 21st Dec 2017, 2nd April 2016 all minutes were not signed, and there was only one minute were there was a mention of PHC funds.  At Bunyiiro HCIII there was no HUMC in place.  At Namungalwe HCII there were three meeting minutes dated 13th Oct 14th April of 2017 and June 2016 but all minutes were not signed.  At Bugono HCIV there minutes of meetings dated 16th Octo, 24th April of 2017 and 19th Dec of 2015 and 17th May 2014 and all minutes were not signed.  At Itanda HCII there were minutes for one meeting dated 6th October and 1st Dec 2016 and 26th Nov 2017.

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	There was nothing posted on the notice board regarding the PHC non-wage recurrent funds for all facilities at the DHOs office.
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	2	Procurement requests were submitted to PDU. The request was dated 14th March 2017 with all relevant signatures. The request included Computers, machinery for vehicles, renovation of ward at Lubira HCIII, construction of pit latrine and maintenance of machinery and equipment.
	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	There was no evidence regarding submission of procurement request for PP5 to 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	<ul> <li>Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time:</li> <li>100% - score 8</li> <li>70-99% - score 4</li> <li>Below 70% - score 0</li> </ul>	8	This activity was supported from the centre and all facilities (Bugono HCIV, Busesa HCIV and Iganga Hospital had procurement plans for health supplies and were dated 11th Jan 2017. Even a procurement amendment for Bugono HCIV was on file dated 1st Nov 2017.

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	There were no projects reported to have been undertaken by the health department in the financial year.
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 of Health submitted annual performance reports for all four quarters to the planner by Mid - July for consolidation.
17	LG Health department has acted on Internal Audit recommendation (if any)  Maximum 4 for this performance measure	Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0	0	By the time of the assessment, the assessment team was not able to find responses from the department to the internal audit queries yet there were a number of issues raised especially in the management of the health centres.

Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.	• Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2	2	The composition of the HUMCs was Iganga Islamic HCIII two females and seven males, Iganga Hospital was two females and seven males, Busesa HCIV was four females and seven males, Ibulanku HCIII was three females and seven males, Bunyiiro HCIII was three females and seven males, Itanda HCII one female and three males and only Bugono had only males.	
	Maximum 4 points	• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2	0	There was no evidence at the DHOs office or at facilities showing issuance of sanitation guidelines.
19	The LG Health department has issued guidelines on medical waste management  Maximum 2 points	• Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal : score 2 points.	0	There was no evidence at DHOs office or at facilities showing issuance of medical waste management guidelines including guidelines for construction of medical waste facilities



## LGPA 2017/18

Water & Environment Performance Measures

Iganga District

(Vote Code: 510)

Score 83/100 (83%)

## Water & Environment Performance Measures

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Plannir	ng, budgeting and exe	cution	
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 subcounties with safe water coverage below the district average in the budget for the current FY: score 10	10	Yes, the LG Water department has targeted the less safe coverage Sub-counties. The District safe water coverage average is 69.0% and all the Sub-counties with safe water coverage below the District average safe water coverage (Nambale – 46.5%; Buyanga – 51.5%; Nakalama – 53.7%; Namungalwe – 57.4%; Nawandala – 58.0%; Nakigo – 64.7%; and Makuutu – 66.0%) have been targeted to receive the following new Boreholes (Hand Pump) out of the total of 17 Boreholes: Nambale (2); Buyanga (1); Nakalama (1); Namungalwe (2); Nawandala (1); Nakigo (2); and Makuutu (1); there are no boreholes rehabilitated within in the current FY 2017/18 (because of budget cuts) as indicated in the: (i) Annual Workplan and budget for FY 2017/18 received and stamped by DWD on 14/07/2017; (ii) Submitted Annual Work Plan Water and Sanitation Conditional Grant (DWSCG) for FY 2017/18 to the Permanent Secretary MoWE by the CAO on 10/07/2017; and (iii) Target water coverage for FY 2017/18.

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 subcounties 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 targeted sub-counties of Nambale (46.5%) which was far below the District average of 69% in the FY 2016/17 was allocated 2 new and 4 rehabilitated deep boreholes; followed by Buyanga (51.5%) that was allocated 3 new and 1 rehabilitated deep boreholes; Buyanga (51.5%) that was allocated 3 new and 1 rehabilitated deep boreholes; Nakalama (53.7%) that was allocated 1 new and 2 rehabilitated deep boreholes: Namungalwe (57.4%) allocated 1 new and 3 rehabilitated deep boreholes; Nawandala (58.0%) allocated 3 new and 2 rehabilitated deep boreholes; Nakigo (64.7%) allocated 1 new and 1 rehabilitated deep boreholes; and Makuutu (66.0%) allocated 2 new and 2 rehabilitated deep boreholes out of 22 new and 21 rehabilitated deep boreholes for the FY 2016/17. Evidenced from the performance Contract Form B for Q4 FY 2016/17; Annual Workplan/ Budget for Iganga District Water and Sanitation Sector for FY2017/18 submitted to the Permanent Secretary MoWE and received by DWD on 14/07/2017; Annual Workplan/ Budget for Iganga District Water and Sanitation Sector for FY2016/17 submitted by the CAO to the DWO on 15/07/2017; Fourth Quarter Progress Report for FY 2016/17 submitted to the Permanent Secretary MoWE and received by DWD on 20/07/2017; Third Quarter Progress Report for FY 2016/17 submitted to the Permanent Secretary MoWE and received by DWD on 11/04/2017; Second Quarter Progress Report for FY 2016/17 submitted to the Permanent Secretary MoWE and received by DWD on 10/01/2017; and First Quarter Progress Report for FY 2016/17 submitted to the Permanent Secretary MoWE and received by DWD on 11/10/2016.

Assessment area: Monitoring and Supervision

3

The LG Water department carries out monthly monitoring and supervision of project investments in the sector

Maximum 15 points for this performance measure

There is evidence of monitoring each WSS facilities annually as evidenced from the following documents with the DWO:

- First Quarter Progress Report for FY 2016/17 submitted to the Permanent Secretary MoWE and received by DWD on 11/10/2016.
- Minutes for District Water and Sanitation Coordination committee meeting held on 23/04/2017;
- Minutes for District Water and Sanitation Coordination committee meeting held on 04/07/2017;
- Minutes for social mobilizers' meeting held on 30/06/2017 at VIC shelter: MIN.05/2017 which

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

indicated that most of the projects have been completed (Drilling, casting and installation of 21 deep boreholes; one BH was re-sited and rolled to 2017/18; 1 public latrine was constructed at Kabira Trading Centre in Nabitende S/C; 21 water sources rehabilitated under DWSCG:

- Inspection report on LOT 2 boreholes for FY 2016/17 from Borehole Maintenance Technician to the Acting District Engineer on 20/06/2017;
- Activity report on Follow up on WATSAN activities to the DWO, dated 13/02/2017 covering rehabilitation works and supervision monitoring on newly constructed boreholes being test pumped;
- Activity report on Follow up on WATSAN activities from Borehole Maintenance Technician to the Ag. District Engineer, dated 15/06/2017 covering rehabilitation works and supervision monitoring on newly constructed boreholes being test pumped and construction of the public latrine at Kabira Trading Centre;
- Inspection report on 21 boreholes for rehabilitation for FY 2016/17 in Iganga District from Borehole Maintenance Technician to the Ag. District Engineer, dated 16/06/2017;
- Forms of Completion for installation of Hand pump, dated 16/06/2016; 20/06/2016; 22/06/2016; 06 – 16 /06/2017;
- Report on water quality monitoring and analysis to the CAO by the Ag. District Engineer, dated 20/10/2016; and
- Report on monitoring and monitoring of water sources to the CAO by the Ag. District Engineer, dated 28/02/2017.
- Inception and siting report for LOT 2on siting, design and drilling supervision of 11 deep wells by LHM Groundwater Exploration and Geomapping Services Ltd, dated 22/09/2016.

Overall, the supervision and monitoring reports of each project matches with the plans.

15

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

Yes, the LG has submitted accurate/consistent data for the FY 2017/18. The list of water facilities submitted for the FY 2017/18 (construction of 1 public VIP Latrine at Kabira Trading Centre; 17 Deep Borehole drilling (Hand pump); and 130 Water quality testing for old sources in the sector MIS, the Performance contract reports and in the OBT are accurate and consistent. The numbers of facilities tarry well with those filled in the procurement requisition forms.

Assessment area: Procurement and contract management

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

- The PDU 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;
- User Department Procurement Plan for consultancy services approved by DWO and CAO and received by the Head of PDU on 22/03/2017;
- Procurement requisition (LG PP Form 1) filled by the DWO and submitted to the PDU for all investment; Procurement Request Form for Wrks/supls/srvcs/2017-18 for siting and drilling supervision of 10 deep wells LOT 1 received by the PDU on 22/03/2017;
- Procurement Request Form for Wrks/supls/srvcs/2017-18 for siting and drilling supervision of 07 deep wells LOT 2 received by the PDU on 22/03/2017;
- Procurement Request Form for Wrks/supls/srvcs/2017-18 for drilling, casting and installation of 10 deep boreholes (Hand pump) LOT 1 received by the PDU on 22/03/2017;
- Procurement Request Form for Wrks/supls/srvcs/2017-18 for drilling, casting and installation of 07 deep boreholes (Hand pump) LOT 2 received by the PDU on 22/03/2017;
- Procurement Request Form for Wrks/supls/srvcs/2017-18 for renovation of one lined pit Latrine received by the PDU on 22/03/2017;
- Procurement Request Form for Wrks/supls/srvcs/2017-18 for Design of a piped water system received by the PDU on 22/03/2017;
- Procurement Request Form for Wrks/supls/srvcs/2017-18 for a Spring Protection received by the PDU on 22/03/2017;
- User Department Procurement Plan for consultancy services approved by DWO and CAO and received by the Head of PDU on 24/03/2016.

4

The DWO has appointed Contract Manager and has effectively managed the WSS contracts

Maximum 8 points for this performance measure

• 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

The CAO variously appointed the Contract Managers in four letters who prepared the contract management plans for implementation of the WSS infrastructure projects:

- Letter of CAO for appointment of Iganga Borehole Maintenance Technician as the contract manager for casting, supply and installation of 21 hand pumps old boreholes for rehabilitation for the FY 2016/17, dated 22/09/2016.
- Letter of CAO for appointment of Iganga Ag. District Engineer as the contract manager for drilling of 10 deep hand pumps boreholes under LOT 1 for the FY 2016/17, dated 22/09/2016.
- Letter of CAO for appointment of Iganga Assistant Engineering Officer as the contract manager for construction of a four stance lined pit latrine at Kabira Trading Centre in Nabitende Sub-county for the FY 2016/17, dated 22/09/2016.
- Letter of CAO for appointment of Iganga Ag. District Engineer as the contract manager for drilling of 11 deep hand pumps boreholes under LOT 2 for the FY 2016/17, dated 22/09/2016.
- There is evidence that monthly site visits were conducted for all the WSS infrastructure projects following the contract management plans as seen from a Report on supervision monitoring of WATSAN activities during the month of September 2016, dated 17/10/2016; the 2nd Quarter report on Water Quality Monitoring and Analysis to the CAO by the Ag. District Engineer, dated 06/01/2017; the Report on supervision monitoring of WATSAN activities during the months of November and December 2016, dated 09/01/2016; the HPM Monthly Report for the month of October 2016 to the AEO-Water received on 03/02/2017 and the Activity report for reactivation of WSCs by the ADWO to the DWO, dated 11/01/2016.

2

 If water and sanitation facilities constructed as per design(s): score 2 Water and Sanitation facilities were constructed as per the designs. Five Hand pump Deep Boreholes (Namusenwa DWD58578; Walukuba PS DWD58592; Buwongo DWD58576; and Nambale 1B DWD58597) were sampled and visited. The facilities 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 households served, and these numbers were tarrying with the depth of installations as indicated in the Borehole drilling, pump testing and log sheet and information in the contract management files/records with the DWO. The Fourth Quarter Progress Report for FY 2016/17 submitted to the Permanent Secretary MoWE and received by DWD on 20/07/2017 also indicates under subsection 4.3.1 on "Construction of Public Latrine in RGC" that the work for construction of the 4 stance lined pit latrine at Kabira RGC in Nabitende S/C was executed as planned and on visiting the site, this was verified. This facility was completed, awaiting handing over but is currently being used due to the high sanitation facility need.

facilities as seen in the written evidences of facility completion and payment in the Contract management file/records; • Maa Technologies (U) Ltd Borehole completion Reports for 01 Deep borehole drilling, pump testing, casting and installation with procurement ref No. Igan510/wrks/16-17/00007 (LOT 3). Maa Technologies (U) Ltd Borehole completion Reports for 10 Deep borehole drilling, pump testing, casting and installation with procurement ref No. Igan510/wrks/16-17/00007 (LOT 1). If contractor • Maa Technologies (U) Ltd Borehole completion handed over all Reports for 11 Deep borehole drilling, pump testing, 2 completed WSS casting and installation with procurement ref No. facilities: score 2 Igan510/wrks/16-17/00008 (LOT 2). • Request for payment from Maa Technologies (U) Ltd to CAO for drilling, pump testing, casting and installation of 11 boreholes under procurement ref. N. Igan510/wrks/16-17/00008 (LOT 2).; • Payment certificates 22 new and 21 Old rehabilitated deep boreholes) drilled in FY 2016/17; However, the Installation/record cards provided were never filled in and stamped by the LC 1

Chairperson of the beneficiary community.

Yes, contractors handed over all completed WSS

		• If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2	2	Yes, the DWO appropriately certified all WSS projects and prepared and filed completion reports with examples of Certificate sent together with payment requisition forms for facilities implemented in FY 2016/17; Contract management plans dated 06/02/2017 and 10/05/2017 in the contract management files/record for the various contracts; Completion report for hydrogeological survey, drilling, test pumping and installation of 6 deep wells under Lot 1 in Iganga District FY 2016/17. The examples of contracts listed included:  • Iganga District LG Contract document for siting and drilling supervision of 11 deep boreholes LOT 2 Contract No. Igan510/srvcs/16-17/00007.  • Iganga District LG Contract document for siting and drilling supervision of 11 deep boreholes LOT 1 Contract No. Igan510/srvcs/16-17/00006.  • Iganga District LG Contract document for casting and installation of 21 old boreholes Contract No. Igan510/srvcs/16-17/00001.re was also
7	Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points  Passment area: Finances	• Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points	3	From the review of the contract files and payment vouchers of all the projects undertaken in the sector for 2016/17 it was observed that DWO approves invoices for payment on time for example:  The contract to LHM for sitting, drilling and supervision of 11 deep boreholes an invoice was raised on 10th/10/2016 and the department approved it for payment on 11th/10/2016  The contract to Agola General Enterprises for casting, supply and installation of 21 old boreholes an invoice was raised on 28th /09/2016 and the department approved it for payment on 29th/09/2016  The contract to Maa technologies for drilling, casting and installation of deep boreholes an invoice was raised on 15th/05/2017 and the department approved it for payment on 19th/06/2017.

8	The LG Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit  Maximum 5 for this performance measure	• Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5	0	No, there is no evidence that the Department of Water submitted annual performance reports for all four quarters to the planner by Mid - July for consolidation.
9	LG Water Department has acted on Internal Audit recommendation (if any)  Maximum 5 for this performance measure	• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 5 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0	0	From the review of the internal audit reports only one query was raised against the department in the 1st quarter 2016/17 which was:  UGX 21,004,000 was paid to LHM ground water exploration Geo Mapping Services for geographical survey of 10 deep boreholes without verification/inspection by the internal audit.  There was no evidence seen that this query was addressed by the department.

Assessment area: Governance, oversight, transparency and accountability

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

Maximum 6 for this performance measure

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

3

3

Yes, there is evidence that the Standing Committee on Works, Water and Technical Services met and discussed Water service delivery issues like inspection, sector budgeting and sector performance.

For example the committee met on 26th May 2017 and discussed issues presented by the DWO as evidenced on page 1 and 2 of the Report for Works, Water and Technical Committee to the District Council.

The report was signed off by the Committee Chairperson Hon. Nkolawano Kuzama. The Chairperson of the Standing Committee for Works, Water and Technical Services presented a report from the committee meeting to the fuller District Council in a meeting held 26th May 2017.

Refer to Minute 37/5/26/17/IDLC on Page 6 where the report was received and discussed.

• Evidence that the water sector committee has presented issues that require approval to Council: score 3

Yes. The sector committee presented issues that require approval from council. For example sector issues were discussed by the district Council in a meeting held 26th May 2017.

Refer to Minute 37/5/26/17/IDLC on Page 6 where the report was presented to the fuller District Council to discuss key issues i.e. the budgetary allocations and the priority sector investment areas for the FY 2017/2018.

The council was able to advice on key priority areas for consideration on water coverage.

This submission was extracted out of a committee meeting held on 26th May 2017 where the DWO presented the budget, investment projects for the sector.

11	The LG Water department has shared information widely to the public to enhance transparency  Maximum 6 points for this performance measure	• The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2	0	There were no such information on the district notice boards (at the DPU and the CAO). The Water Department did not have a notice board. There were no minutes found to indicate that the AWP, budget and Water Development releases and expenditures were advocated for in meetings. However, the AWP, budget and Water Development releases and expenditures are available in files and records with the DWO.
		• 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 platform concrete casting indicating the name of the source (Village), the DWD Number, the date of casting/construction, 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. 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 UGX 45,000 in case of a spring well or a GFS tap stand; 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 spring protection) have to be made within 2 weeks. 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 2 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 five water supply facilities visited, the WSCs were found to be well constituted of 7 to 9 members and were active (i.e. conduct regular meetings, collecting UGX1000 per household per month for carrying out O&M, preventive maintenance and minor repairs).
Asse	essment area: Social	and environmental sa	feguard	S
13	The LG Water department has devised strategies for environmental conservation and management  Maximum 4 points for this performance measure	• Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2	2	Environmental screening were followed for the new and old boreholes and Public Latrines in RGCs in selected Sub-counties in Iganga District for the FY 2016/17 and FY 2017/18; and the screening results were included in the BOQs used by the contractors in drilling, test pumping, construction and casting, and rehabilitation as well as in supervision and monitoring by the consultant/Supervisor. There was an EIA Report for all WSS projects as quoted from an Activity report on environmental screening of proposed sites for drilling, casting and construction of boreholes by the District Environmental Officer, dated 16/01/2017; with Environmental and Social Management plan for FY 2016/17.
		• Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1	1	There was the incidence of Ngemeraku Investment Company processing bottled water. Inspection findings in the catchment area showed the environment is littered with cow dung. It was recommended to improve on hygiene of environment, plant grass around the catchment area and protect it by fencing as evidenced in Min.06/2017 Status of water sources in the District by the Social Mobilizer's meeting held on 30/06/2017; and the minutes for the District water

and sanitation coordination committee meetings held

on 16/04/2017 and 04/07/2017.

		• Evidence that construction and supervision contracts have clause on environmental protection: score 1	1	There were Environmental guidelines and code of conduct as written statement of intent for contractors to adhere to and to which course can be made in the event of a perceived undesirable impact. The guidelines for drilling site, points out that each drilling site should be completely cleared of all waste after use. Drilling waste (chippings and muds) should be buried; rubbish waste oil and chemicals should be returned to the main camp for disposal as outlined in the guidelines; no spillage of oils or fuels should occur; On completion of each borehole the site must be left clean and free from all debris, hydrocarbons and waste, and all pits filled to satisfaction of the supervisor. screening guidelines for drilling/rehabilitation of Boreholes and Public Latrines in RGCs in selected Sub-counties in Iganga District for the FY 2016/17 and 2017/18 as seen in the contract agreements and supervision consultancy reports and a clause on Environmental protection of the site under Technical specifications No. 3; Environmental guidelines and code of conduct
14	The LG Water department has promoted gender equity in WSC composition.  Maximum 3 points for this performance measure	• If at least 50% WSCs are women as per the sector critical requirements: score 3	3	The facilities sampled and visited met the sector critical requirements of women on the WSCs to be at least 50%. For the facilities visited, the composition of women on the WSCs of Namusenwa DWD58578 was 4/8; Walukuba PS DWD58592 was 5/8; Buwongo DWD58576 was 5/9; and Nambale 1B DWD58597 was 5/7.
15	Gender- and special-needs sensitive sanitation facilities in public places/RGCs.  Maximum 3 points for this performance measure	• If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3	0	The sanitation facility visited at Kabira Trading Centre was constructed in FY 2016/17 with funding by the DWSCG and it has four stances with a urinal. However, there is no ramp for facility access by PWDs and a separate stance for PWDs. Even though there are separate stances for men and women, there are no labelling to show the gender sides.