

Local Government Performance Assessment

Kabarole District

(Vote Code: 513)

Assessment	Scores
Accountability Requirements	67%
Crosscutting Performance Measures	76%
Educational Performance Measures	75%
Health Performance Measures	55%
Water Performance Measures	78%

Accontability Requirements 2018

Summary of requirements	Definition of compliance	Compliance justification	Compliant
Annual performance contract			
LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.	 From MoFPED's inventory/schedule of LG submissions of performance contracts, check dates of submission and issuance of receipts and: If LG submitted before or by due date, then state 'compliant' If LG had not submitted or submitted later than the due date, state 'non- compliant' From the Uganda budget website: www.budget.go.ug, check and compare recorded date therein with date of 	LG submitted APC on 31st July 2018 as per data at MOFPED and within the extended MOFPED deadline of 1st August 2018.	Yes
Supporting Documents for the Budget LG has submitted a Budget that includes a Procurement Plan for the	LG submission to confirm. required as per the PFMA are • From MoFPED's inventory of LG budget	e submitted and available LG submitted the budget that includes the	Yes
forthcoming FY by 30th June (LG PPDA Regulations, 2006).	submissions, check whether: o The LG budget is accompanied by a Procurement Plan or not. If a LG submission includes a Procurement Plan, the LG is compliant; otherwise it is not compliant.	procurement plan for FY 2018/19 on 31st July 2018 as per data at MOFPED and extended deadline.	

Reporting: submission of annual and quarterly budget performance reports

LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)	From MoFPED's official record/inventory of LG submission of annual performance report submitted to MoFPED, check the date MoFPED received the annual performance report: • If LG submitted report to MoFPED in time, then it is compliant • If LG submitted late or did not submit, then it is not compliant	LG submitted APR on 22nd August 2017 as per data at MOFPED.	No
LG has submitted the quarterly budget performance report for all the four quarters of the previous FY by end of the FY; PFMA Act, 2015).	From MoFPED's official record/ inventory of LG submission of quarterly reports submitted to MoFPED, check the date MoFPED received the quarterly performance reports: • If LG submitted all four reports to MoFPED of the previous FY by July 31, then it is compliant (timely submission of each quarterly report, is not an accountability requirement, but by end of the FY, all quarterly reports should be available). • If LG submitted late or did not submit at all, then it is not compliant.	LG submitted the quarterly budget performance reports during FY 2017/2018 as hereunder: Quarter Date of submission Reference Quarter 01 19/12/2017 As per MOFPED Data Quarter 02 04/04/2018 " Quarter 03 01/05/2018 " Quarter 04 09/08/2018 As per printed version found at the District.	No
Audit			
The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General and the Auditor General's findings for the previous financial year by end of February (PFMA s. 11 2g). This statement includes actions against all find- ings where the Internal Audi- tor and the Auditor General	From MoFPED's Inventory/record of LG submissions of statements entitled "Actions to Address Internal Auditor General's findings", Check:	• The LG submitted the responses on the Internal Auditor General's report for the FY2016/17 on 16th April 2018. The responses were received on 20th April 2018 by MOFPED, Accountant General,	Yes

recommended the Accounting Officer to take action in lines with applicable laws.	 If LG submitted a 'Response' (and provide details), then it is compliant If LG did not submit a' response', then it is non- compliant If there is a response for all –LG is compliant If there are partial or not all issues responded 	 IGG, MOLG and Auditor General. On the implementation of Internal Audit reports recommendations, for FY 2016/17 the issues raised were responded to adequately and hence all issues were all resolved. The issues were Two : 	
	to – LG is not compliant.	 (1) Un vouched expenditure of UGX 16,733,060. Cleared. (2) Un accounted for 	
		funds amounting to UGX 161,404,863. Cleared.	
		• The LG submitted responses on the Auditor General's report for 2016/17 on 15th April 2018 which was received on 20th April 2018 by MOFPED, Auditor General and Parliamentary LGAC.	
		• There were Three Queries Raised. These were responded to as detailed below:	
		 1- Expenditure in Excess of warrants (Releases) UGX 2,094,796,293. Cleared. 	
		 2-Utilisation of medicines and medical supplies. Cleared. 	
		 3-Stockouts of Medicine and Health Supplies. Cleared. 	
		• The status of implementation of all the above issues and recommendations, the Accounting officer provided the evidence of the action taken on issues raised.	

The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.	The report from the Auditor General for the FY 2017/18, Local Governments Unqualified Audit Opinion Schedule for Fort Portal Branch No.15, for December 2018.	Yes

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgetin	g and execution		
All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans Maximum 4 points for this performance measure.	Evidence that a district/ municipality has: • A functional Physical Planning Committee in place that considers new investments on time: score 1.	 There is a functional physical planning committee as evidenced by : i. The Physical Planning Committee is fully constituted, as found in the appointment letter of members by the CAO dated 27th September 2018. ii. The building plan register was found in place revealing turnaround time for e.g. the application by Kabarole District Local Government site plan for the Kicwamba sub-county offices was handled within June 2018. However the draft Physical Development Plan is still on display until October 2018 when it will be due for approval by Council. 	1
All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans Maximum 4 points for this performance measure.	• Evidence that district/ MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD score 1.	 The DLG submitted four (4) sets of Minutes of the District Physical Planning Committee meetings to the Ministry of Lands Housing and Urban Development zonal office at Kabarole as shown hereunder: i. Minutes of meeting held on 6th June 2018, submitted on 13th June 2018. ii. Minutes of 28th October 2017, submitted on 4th November 2017. iii. Minutes of 29th June 2017, submitted on 3rd August 2017. iv. Minutes of 27th September 2016, submitted on 16th August 2017. 	1

All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans Maximum 4 points for this performance measure.	• All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0	There is no approved Physical Development Plan for the District hence consistency could not be verified. However infrastructure investments are approved on the basis of national physical planning standards and guidelines.	0	
All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans Maximum 4 points for this performance measure.	• Action area plan prepared for the previous FY: score 1 or else 0	No evidence of action area plan was provided since the Physical Development Plan is not yet approved by Council and the National Physical Planning Board. However the Local area physical plan for Rwengoma-St,Paul Mugunu Kitembe-Butangwa villages was availed during the assessment.	0	

The prioritized investment activities in the approved AWP for the current FY	• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.	Priorities in the AWP/Approved Budget Estimates for FY 2018/19 were based on the outcomes of the Budget Framework Paper Conference Report held on 31s October 2017 and submitted to CAO on 7th November 2017 as shown hereunder:	2
are derived from the approved five-year development plan, are based on discussions in		1. Education: Construction of classrooms at Kasenda PS and Magunga PS is a priority in the AWP (Page 64) and approved budget estimates (Page 36) with a budget of UGX. 728,782,000/= and in the Budget	
annual reviews and budget conferences and have project profiles		 Conference report (Page 8 and Annex II). Health : Construction of a staff house and maternity ward at Nyantabooma HCIII is a priority as found in the approved AWP (Pg. 59). The same project is found in the budget conference report (Page 14). 	
Maximum 5 points on this performance measure.		3. Water: Completion of construction of piped water supply system for Rwetera, Kasenda,Bubandi,Nyakitokolii,Mugusuand Masongora to cost UGX. 356,333,000/= is a priority as found in the AWP (Pages 83) and the Budget Conference Report Annex (Page 4)	

The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles Maximum 5 points on this performance measure.	 Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If differences appear, a justification has to be provided and evidence provided that it was approved by the Council. Score 1. 	Capital investments in the approved AWP for FY 2018/19 were derived from the DDP(FY 2017/18- 2019/2020) as shown hereunder: 1. Education: Construction of classrooms at Kasenda PS and Magunga PS is in the AWP (Page 64) and DDP (Page 251). 2. Health : Construction of a staff house and maternity ward at Nyantabooma HCIII is found in the approved AWP (Pg. 59) and in the DDP (Page 132). 3. Water: Completion of construction of piped water supply system for Rwetera, Kasenda,Bubandi,Nyakitokolii,Mugusuand Masongora is a priority as found in the AWP (Pages 83) and the DDP (Page 72)	1
The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles Maximum 5 points on this performance measure.	 Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2. 	Project profiles for FY 2018/19 were developed and discussed by TPC at its meeting held on 15th May 2018 under Min. 05/05/KAB/TPC/2018: Presentation and Discussion of Project Profile for FY 2018/2019.	2

Annual statistical abstract developed and applied Maximum 1 point on this performance measure	• Annual statistical abstract, with gender- disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum score 1.	Annual Statistical Abstract of 2015/16 FY with gender disaggregated data was compiled and presented to the DTPC at its meeting of 15th May 2018 under Min. 04/05/KAB/TPC/2018: Presentation of Annual Statistical Abstract (2017/18).	1
Investment activities in the previous FY were implemented as per AWP. Maximum 6 points on this performance measure.	• Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2	 All Infrastructure projects implemented by the LG in the previous FY 2017/2018 were derived from the approved Annual Work Plan and Budget as shown in the sampled projects hereunder: Administration: Construction of Bukuku sub-county HQs found in the approved budget (Page 30) and APR (Page 38). Education: Construction of classrooms at Noble Mayombo SS as found in the AWP (Page 45) and APR (Page 63). Construction of classroom block at Bishop Balya Community School as found in the AWP (Page 45) and APR (Page 63). Construction of classrooms at Kinyaruhara PS in Kicwamba sub-county as found in the AWP() and APR (Page 61) Construction of two classrooms in Kiboha PS in Mugusu sub-county as found in the AWP(Page43) and APR (Page 61). Water: Rehabilitation of 13 boreholes in Kicwamba, Harugungu and Karambi sub-counties in the AWP (Page 23) and in the APR (Page 74). Rehabilitation of Bukuku GFS as found in the AWP (Page 23) and in the APR (Page 74). 	2

act pre imp per Ma poi per	restment civities in the evious FY were olemented as r AWP. aximum 6 ints on this rformance easure.	 Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. 0 100%: score 4 0 80-99%: score 2 0 Below 80%: 0 	Out of the 5 sampled investment projects(shown hereunder), all were implemented during the year under review representing 100% performance as found in the APR Administration(1): Construction of Bukuku sub-county HQs found in the approved budget (Page 30) and APR (Page 38). Education (4): Construction of classrooms at Noble Mayombo SS as found in the AWP (Page 45) and APR (Page 63). Construction of classroom block at Bishop Balya Community School as found in the AWP (Page 45) and APR (Page 63). Construction of classrooms at Kinyaruhara PS in Kicwamba sub-county as found in the AWP() and APR (Page 61) Construction of two classrooms in Kiboha PS in Mugusu sub-county as found in the AWP (Page43) and APR (Page 61).	4
exe buc cor inve pro for infr pro the Ma poi	e LG has ecuted the dget for nstruction of estment ojects and O&M all major rastructure ojects during e previous FY aximum 4 ints on this rformance easure.	• Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2	Out of the 5 sampled investment projects(shown hereunder), all were implemented during the year under review representing 7.9% variation in budget performance as found in the APR: Administration: Construction of Bukuku sub-county HQs Budget(UGX. 90,049,000/=) and Expenditure (UGX. 87,820,000/=) Education: Construction of classrooms at Noble Mayombo SS, construction of classroom block at Bishop Balya Community School and construction of classroom block at Bukuku Community School Budget(UGX. 920,000,000/=) and Expenditure (UGX.1,248,695,000/=) Construction of a 2 classrooms at Kinyaruhara PS in Kicwamba sub-county and Kiboha PS in Mugusu sub-county; Budget (UGX.427,442,000/=) and Expenditure (UGX.214,506,000/=)	2

executed the bu budget for lea construction of bu	ne previous FY: score 2	 The LG has budgeted and spent at least 80% of its O&M budget as shown here-under: i. Reviewed assets and projects in need of maintenance as found in the approved AWP & budget estimates FY 2017/18. ii. The LG costed the maintenance of these assets in the various departments at UGX. 189,608,000/= iii. The LG spent on the above roads UGX. 248,763,700/= as found in the annual final accounts. iv. The LG spent 23% more of the O&M budget as found in the AFA FY 2017/18. 	2
Human Resource Man	nagement		

LG has substantively recruited and	• Evidence that the LG has filled all HoDs positions substantively: score 3	100% of heads of department positions are not filled substantively. The position for :-	0	
Appraised all Heads of Departments Maximum 5 points on this Performance Measure.	Substantively. Score 3	 The position for :- District Health Officer was not filled substantively, its headed by Dr Richard Mugahi a Senior Medical Officer Those filled substantively are 7 out of 8 namely:- 1- The Department of Administration – Malinga Alfred. Appointed by Public service commission. 2- The Department of Finance – Nkojo Robert who was appointed on 12/2/2007.Under DSC ///2007. 3- The Department of Education – Rwakaikara Robert who was appointed on 5/8/2011.under DSC/168/2011. 4- The Department of Community Development – Mugisa David who was appointed on 26/9/2005.Under DSC/118/2005. 5- The Department of Natural Resources – Ruyonga Godfrey who was appointed on 12/5/2015. Under DSC/13/2015. 6- The Department of Production and Marketing – Dr Abigaba Salvatory , who was appointed on 10/1/2018.Under DSC/81/2018 7- The Department of works and Engineering – Wakatama Stephen who was appointed on 7/7/2006. Under DSC 330/2006 The position for District Health officer is not filled substantively. Position not filled substantively makes 12.5% 		

The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.• Evidence that 100 % of staff submitted for recruitment have been considered: score 2• 100% of vacancy submissions to DSC for recruitment during 2017-2018•• Had been considered • Reference made to a request for permission to recruit to the MoPs dated 7/12/2017 Ref.ARC 6/293/05 for 65 employees, followed by a Declaration of vacancies by CAO on 19/12/2017 Ref.cr/156/2.••Maximum 4 points on this Performance Measure.•This was considered by the DSC in its 263rd meeting held on 22nd -29th March 2018.•	LG has substantively recruited and appraised all Heads of Departments Maximum 5 points on this Performance Measure.	• Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2	 100% of 8 HoD's , had been appraised for the previous FY, as per the guidelines of MoPS (CICULAR STANDING INSTRUCTION NO1 OF 2016) The Department of Administration – Malinga Alfred. Appointed by Public service commission. 1. The Department of Finance – Nkojo Robert who was appointed on 12/2/2007.Under DSC /7/2007 APPRAISED ON 12/8/2018 2. The Department of Education – Rwakaikara Robert who was appointed on 5/8/2011.under DSC/168/2011. – APPRAISED ON 6/8/2018. 3. The Department of Community Development – Mugisa David who was appointed on 26/9/2005.Under DSC/118/2005. – APPRAISED ON 12/8/2018. 4. The Department of Natural Resources – Ruyonga Godfrey who was appointed on 12/5/2015. Under DSC/13/2015 APPRAISED ON 14/8/2018. 5. The Department of Production and Marketing – Dr Abigaba Salvatory , who was appointed on 10/1/2018.Under DSC/81/2018. – APPRAISED ON 14/8/2018. 6. The Department of works and Engineering – Wakatama Stephen who was appointed on 7/7/2006. Under DSC 330/2006- APPRAISED ON 2/82018. 7. The Department of Health- Ag .Dr Richard Mugahi a Senior Medical Officer – APPRAISED ON 23/7/2018 	2
	considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY. Maximum 4 points on this Performance	staff submitted for recruitment have been	 recruitment during 2017-2018 Had been considered Reference made to a request for permission to recruit to the MoPs dated 7/12/2017 Ref.ARC 6/293/05 for 65 employees, followed by a Declaration of vacancies by CAO on 19/12/2017 Ref.cr/156/2. This was considered by the DSC in its 263rd 	2

The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY. Maximum 4 points on this Performance Measure.	• Evidence that 100 % of positions submitted for confirmation have been considered: score 1	 100% of the staff submitted for confirmation had been considered by the DSC Reference is made to the following submissions by CAO, as below:- 1- 0n 21/6/2018 there was asubmission for 17 Primary teachers recruitment 37 Health workers 33 Traditional staff Then on 29th /6/2018 there was another submission for the recruitment of :- 2 Traditional staff 4 Education Staff 1 Health staff 	1
The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY. Maximum 4 points on this Performance Measure.	• Evidence that 100 % of positions submitted for disciplinary actions have been considered: score 1	 No disciplinary cases were submitted to the DSC in the FY 2017-2018 	1

Staff recruited and retiring access the salary and pension payroll respectively within two months Maximum 5 points on this Performance Measure.	• Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3	 100% of the staff recruited in previous financial year accessed the pay roll with in two month after their appointment and posting instructions, as evidenced in the IPPS and personal files CaseS in point are:- 1 – Harriet Alinatwe (CR/D/12224) – Appointed and posted on 27/4/2018 – Who accessed pay roll on 28/5/2018. 2 – Baguma Deborah (CR/D/12207) – Appointed and posted on 13th /4/2018 – Who accessed pay roll 28/5/2018. 3 – Magambo Moses – (CR/D/12220) – Appointed and posted on 27/4/2018. 4 – Muzoora Kenneth – (CR/D/12204) – Appointed and posted on 27/the Mho accessed pay roll on 28/5/2018. 4 – Muzoora Kenneth – (CR/D/12204) – Appointed and posted on 27/the Mho accessed pay roll on 28/5/2018. 	3
Staff recruited and retiring access the salary and pension payroll respectively within two months Maximum 5 points on this Performance Measure.	 Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2 	Not all pensioners had accessed pensioner's pay roll with in two month, according to the pensioner's soft ware pay roll	0
Revenue Mobilizat	ion		

The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one) Maximum 4 points on this Performance Measure.	 If increase in OSR (excluding one/off, e.g. sale of assets) from previous FY but one to previous FY is more than 10 %: score 4. If the increase is from 5% -10 %: score 2. If the increase is less than 5 %: score 0. 	 The OSR revenue for 2016/17 was UGX 436,408,401 as shown in the Draft Financial statements prepared on 25th July 2018, and received by the Accountant General on 28th August 2018 and Office of Auditor General of Fort Portal Branch on 31st August 2018. Page 7 & 8, Statement of Financial Performance, Page 12, Statement of Appropriation Account and Page 20, Note 2: Local Revenue of the Final Accounts for FY 2017/18. The Local revenue collected in FY 2017/18 was UGX. 484,762,585, there was a one off Disposal of assets worth UGX 57,650,470 Leaving a Net Revenue of UGX 427,112,115. This was a decrease of UGX 9,296,286 (436,408,401-427,112,115). The revenue reduced from the previous FY but one by2.1 %. The LG was not compliant. 	0
LG has collected local revenues as per budget (collection ratio) Maximum 2 points on this performance measure	 If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10 %: then score 2. If more than +/- 10 %: Score 0. 	 From the Draft financial statements 2017/18, page 7 & 8 Statements of Financial Performance, page 12 Statement of Appropriation Account, page 20 Note 2: Local Revenue, and page 28 on Statement of Revenues Collected during the year, the Original Budget for Local revenue was projected at UGX 466,998,000 and the Actual local revenue collection realised was UGX 484,762,585. This translates into a revenue collection ratio of 103.8%, and 3.8% which is within allowable range of +/- 10% range. The LG is Compliant. 	2
Local revenue administration, allocation and transparency Maximum 4 points on this performance measure.	• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2	 Sec 85 of LGA (2) "In rural areas, revenue shall be collected by the sub county councils, and a sub county council shall retain 65 percent, or any other higher percentage as the district council may approve, of the revenue collected by it and pass the remaining percentage over to the district" (4) "A district council may, with the concurrence of a sub county, collect revenue on behalf of the sub county council but shall remit 65 percent of the revenue so collected to the relevant sub county." In this regard to (4) above the DLG collected Local Service tax from District amounting to UGX 	2

30,000,000, which was remitted as follows:

- Bukuuku Sub County 1,989,984
- Busoro Sub County 3,766,363
- Karangura Sub County 1,792,498
- Kasenda Sub County 3,495,720
- Karambi Sub County 3,773,406
- Mugusu Sub County 2,166,564
- Kichwamba Sub County 1,495,536
- Ruteete Sub County 2,604,688
- Hakibale Sub County 3,936,589
- Kabende Sub County 1,387,273
- Harugongo Sub County 3,591,519
- •

• In addition the DLG received funds from Uganda Wildlife Authority as Royalty for two financial years 2014/15 and 2016/17, worth UGX 154,442,692 and it was shared as follows:

- Hakibale Sub County 22,086,722
- Busuro Sub County 37,111,730
- Kiiko Trading Centre 24,599,237
- Ruteete Sub County 21,364,478
- Kasenda Sub County 37,318,391
- Kabende Sub County 2,762,790
- Kaijura Trading Centre 2,665,719
- Harugongo Sub County 6,533,625
- LG was compliant.

Local revenue administration, allocation and transparency Maximum 4 points on this performance measure.	• Evidence that the total Council expenditures on allowances and emoluments- (including from all sources) is not higher than 20% of the OSR collected in the previous FY: score 2	From the Draft financial statements of 2017/18 on page 20 (Note 2): Local revenue, page 26 Statement of Revenues collected during the year for 2016/17 was UGX 436,408,401. (20% of this is UGX 87,281,680) The Actual Expenditure on Statutory bodies, page 8, Statement of Financial Performance and page 12, Statement of Appropriation Account, of the Draft financial statements, and Trial Balance, UGX 739,488,577 was spent in total. This figure includes the GOU Grants to this sector. The LG is on IFMS and when you run the "Budget and Actual Report" the amount spent from Local revenue Funding Source: Local Revenue 03, Vote Cost Centre: 030100, 030600 & 030700 and Expenses Account: Allowances 227001: amounts to UGX 83,994,600. Therefore (83,994,600 / 439,405,401) = 19.2% is within the allowable limit of 20%. The LG is not spending above 20% and hence is compliant.	2
Procurement and c	contract management		
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	Whereas the District has the position of a Senior Procurement Officer (Kabanyaka Christine) appointed on 11/05/2017 under DSC Min.48/2017, the position of a procurement officer is not in place.	0
The LG has in place the capacity to manage the procurement function Maximum 4 points on this performance measure.	• Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1	Reports of the Evaluation Committee were submitted to the Contracts Committee during FY 2017/2018 on the following dates, 23/06/2017 and 28/09/2017	1

The LG has in place the capacity to manage the procurement function• Evidence that the ContractsFrom the TEC and Contracts committee minutes, it was established that the Contracts Committee considered recommendations of the TEC for example; 1. Construction of Bishop Balya Polytechnic school was recommended and awarded to M/s Maguru	1
points on this performance measure.deviations from those recommendations: score 1 during TEC and DCC Min.KDLGCC.156/06/17 during TEC and DCC meetings that sat on 14/06/2017 and 23/06/2017 respectively.	
2. Construction of a 2 classroom block at Kinyabuhara P/S was recommended and awarded to M/s Standard Civil works Ltd at a contract sum of UGX 72,910,548 under DCC Min.KDLGCC.155/06/17 during TEC and DCC meetings that sat on 14/06/2017 and 23/06/2017 respectively.	
3. Construction of Noble Mayombo Seed Secondary School was recommended and awarded to M/s K. David & Friends Ltd at a contract sum of UGX 697,567,285 under DCC Min.KDLGCC.163/06/17 during TEC and DCC meetings that sat on 14/06/2017 and 23/06/2017 respectively.	
4. Construction of piped water system in Rwentera- Ruteete`` S/C was recommended and awarded to M/s Richo Investments Ltd at a contract sum of UGX 95,167,500 under DCC Min.KDLGCC.158/06/17 during TEC and DCC meetings that sat on 14/06/2017 and 23/06/2017 respectively.	
5. Rehabilitation of Kichwamba GFS was recommended and awarded to M/s Bamuhumbu water Construction co, Ltd at a contract sum of UGX 45,787,000 under DCC Min.KDLGCC.183/06/17 during TEC and DCC meetings that sat on 27/09/2017 and 28/09/2017 respectively.	
The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previousa)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 previousa)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 previousa)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 previousa)The procurement and Disposal Plan for the current year covers all infrastructure approved annual work plan and budget and b) evidence that the LG has made procurements in previous	2
Maximum 2 FY as per plan (adherence to the procurement plan) 2. Construction of a 2 classroom block at Kasenda	

previous FY: score 2	 Construction of a 2 classroom block at Magunga P/S, appears on page 1 of PDU plan, page 33 of annual budget and AWP under Education sector. Extension of water supply system to kabende S/C appears on page 2 of PDU plan, page 46 of annual budget and AWP under water sector. Extension of water supply system to Karangura S/C appears on page 2 of PDU plan, page 46 of annual budget and AWP under water sector. Extension of water supply system to Karangura S/C appears on page 2 of PDU plan, page 46 of annual budget and AWP under water sector. Construction of maternity ward and staff house at
	 appears on page 2 of PDU plan, page 46 of annual budget and AWP under water sector. 5. Extension of water supply system to Karangura S/C appears on page 2 of PDU plan, page 46 of annual budget and AWP under water sector. 6. Construction of maternity ward and staff house at
	S/C appears on page 2 of PDU plan, page 46 of annual budget and AWP under water sector.6. Construction of maternity ward and staff house at
	Nyantabooma HC II, appears on page 3 of PDU plan, page 26 of annual budget and AWP under Health sector.
	7. Renovation and extension of staff house at Nyabuswa HC III, appears on page 3 of PDU plan, page 25 of annual budget and AWP under health sector.
	b) All procurements in previous FY were implemented according to plan, for example;
	1. Construction of Bishop Balya Polytechnic school appears on page 1 of the PDU plan.
	2. Construction of a 2 classroom block at Kinyabuhara P/S appears on page 1 of the PDU plan.
	3. Construction of Noble Mayombo Seed Secondary School appears on page 1 of the PDU plan.
	4. Construction of piped water system in Rwentera- Ruteete S/C appears on page 2 of the PDU plan.
	5. Rehabilitation of Kichwamba GFS appears on page 2 of the PDU plan. (This however was changed and instead implemented the rehabilitation of water facilities i.e. 11shallow wells and 3 boreholes in Kichwamba, Karambi and Harugongo S/Cs. The change was done during a council meeting held on 23/03/2018 under Min.KDLGCC.267/05/18.)

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 	 The LG had prepared 80% of the bid documents for all investment/infrastructure by August 30, i.e. All major projects' bid documents were submitted for approval to DCC on 05/06/2018 and "Invitation to bid" advert for open national bidding projects was run in the New vision on 30/07/2018 for the following projects; 1. Construction of a 2 classroom block at Kasenda P/S. 2. Construction of seed secondary school at Nyabweya. 3. Construction of a 2 classroom block at Magunga P/S. 4. Extension of water supply system to kabende S/C. 5. Extension of water supply system to Karangura S/C. 6. Construction of maternity ward & staff house at Nyantabooma HC II. 7. Renovation and extension of staff house at Nyabuswa HC III. 	2
The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds. Maximum 6 points on this performance measure.	• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2	 The LG has an updated contract register and has complete procurement activity files for all procurements; for example project completion certificates had been filed and raised as follows; 1. Construction of Bishop Balya Polytechnic School – completion certificate raised on 20/03/2018. 2. Construction of a 2 classroom block at Kinyabuhara P/S – completion certificate raised on 14/03/2018. 3. Construction of Noble Mayombo Seed Secondary School - – completion certificate raised on 19/06/2018. 4. Construction of piped water system in Rwentera-Ruteete S/C – completion certificate raised on 01/09/2018. 5. Rehabilitation of water facilities – completion certificate raised on 01/06/2018 	2

The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds. Maximum 6 points on this performance measure.	• For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.	 The LG adhered with procurement thresholds as evidenced below; 1. Construction of Bishop Balya Polytechnic School - contract sum of UGX 198,124,419 – Open national bidding. 2. Construction of a 2 classroom block at Kinyabuhara P/S - contract sum of UGX 72,910,548 - Open national bidding. 3. Construction of Noble Mayombo Seed Secondary School - contract sum of UGX 697,567,285 – Open national bidding. 4. Construction of piped water system in Rwentera-Ruteete S/C - contract sum of UGX 95,167,500 – Open national bidding. 5. Rehabilitation of Kichwamba GFS - contract sum of UGX 45,787,000 – selective bidding. 	2
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 	 All works projects implemented in the previous FY were appropriately certified – interim certification for all projects was based on technical supervision. For example; 1. Construction of Bishop Balya Polytechnic School - Engineer issued interim and completion certificates on 13/12/2017, 05/10/2017, 13/03/2018 and 20/03/2018 respectively. 2. Construction of a 2 classroom block at Kinyabuhara P/S - Engineer issued interim and completion certificates on 15/09/2017, 14/03/2017 and 14/03/2018 respectively. 3. Construction of Noble Mayombo Seed Secondary School - Engineer issued interim and completion certificates on 01/03/2018, 29/09/2017, 25/01/2017, 03/11/2017, 04/05/2017 and 19/06/2018 respectively. 4. Construction of piped water system in Rwentera-Ruteete S/C - Engineer issued interim and completion certificates on 22/06/2018 and 01/09/2018 respectively. 5. Rehabilitation of water facilities - Engineer issued interim and completion certificates on 04/06/2018 and 01/06/2018 respectively. 	2

The LG has certified and provided detailed project information on all investments Maximum 4 points on this performance measure	• Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2	There was no project implemented yet at the time of assessment.	0
Financial managen	nent		
The LG makes monthly and up to-date bank reconciliations	• Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4	• The DLG had prepared Bank reconciliations for June 2018 (though not on time, refer to LGFAR 73) for all its Eleven Bank Accounts at the time of assessment as detailed below (from the IFMS Test Report) on the dates indicated:	0
Maximum 4 points on this		• KDLG BK -020 Baylor on 16/7/2018	
performance measure.		• KDLG BK -023 BTC/ICB on 16/7/2018	
		• KDLG BK -037 FS&N on 16/7/2018	
		• KDLG BK -008 General Fund on 16/7/2018	
		• KDLG BK -019 Global Fund on 20/7/2018	
		• KDLG BK -035 ISNC on 16/7/2018	
		• KDLG BK -034 TSA on 30/7/2018	
		• KDLG BK -018 UNICEF on 16/7/2018	
		• KDLG BK -036 UWEP on 20/7/2018	
		• KDLG BK -014 Youth Grant on 20/7/2018	
		• KDLG BK -038 Youth Council on 20/7/2018	
		•	
		• However there was no reconciliations for July and August 2018 at the time of assessment, rendering the LG not up to date and hence not compliant.	
		• The migration on IFMS from Navision to Oracle doesn't seem to be at the same pace / status in all LGs. LGs are at different levels of compliance making some unable to reconcile and perform other activities on the (New) System.	

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. 	• From the sample of payments made during the financial year, Education department worth UGX 604,181,523 and Water and Sanitation Department worth UGX 272,946,469. These payments were made within one month of requisitions being raised. The LG was compliant in this area.	2
The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations Maximum 6 points on this performance measure.	 Evidence that the LG has a substantive Senior Internal Auditor: 1 point. LG has produced all quarterly internal audit reports for the previous FY: score 2. 	• The DLG has a substantial District Principal Internal Auditor. In the names of Mr Ndibalema Rwabuhoro Charles who was appointed on 04/10/2006 under minute DSC Min.388/2006.	1
The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations Maximum 6 points on this performance measure.	• LG has produced all quarterly internal audit reports for the previous FY: score 2.	The LG produced all Quarterly reports as follows : Quarter 1 on 06/11/2017 Quarter 2 on 15/02/2018 Quarter 3 on 20/04/2018 Quarter 4 on 20/08/2018	2

The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations Maximum 6 points on this performance measure.	Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries from all quarterly audit reports: score 2.	The LGPAC had not been fully constituted until late June 2018. The fully constituted LGPAC sat on 27/09/2018 and considered all the four quarterly reports on the following dates: Quarter 1 PAC Sitting on 27/09/2018 Quarter 2 PAC sitting on 27/09/2018 Quarter 3 PAC sitting on 27/09/2018. Quarter 4 PAC sitting on 27/09/2018. The LG PAC has produced one report for all the four Quarters, as per LG PAC minutes of 27th September 2018.	2
The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations Maximum 6 points on this performance measure.	• Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1.	The reports were submitted to the LG Accounting Officer and LGPAC on the following dates: Quarter 1 on 06/11/2017 Quarter 2 on 15/02/2018 Quarter 3 on 20/04/2018 Quarter 4 on 20/08/2018 The LGPAC has reviewed all the four Quarters on 27th September 2018 as per minutes of the LGPAC and produced one report.	1

The LG maintains a detailed and updated assets register Maximum 4 points on this performance measure.	 Evidence that the LG maintains an up- dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4 	 The DLG maintains a detailed and updated Asset register as per format in the Accounting Manual. All the Assets acquired during the FY2017/18 were posted in the Register at the time of assessment. All additions during the year, from the Draft financial statements (Page 21 Note 8: Consumption of Property, Plant and Equipment (Fixed Assets) and page 35 of : Summary statement of stores and other assets (physical assets) as at end of the year-June 2018) detailed below were all included : Non Residential Buildings UGX 1,829,130,840, Residential Buildings UGX 307,500,000, Roads and Bridges UGX 23,818,496, other Transport Equipment UGX 10,000,000, Furniture and fittings UGX 41,379,000 and other Fixed Assets UGX 339,707,000 all cumulatively totalling UGX 2,551,535,336. The LG was compliant. 	4
The LG has obtained an unqualified or qualified Audit opinion Maximum 4 points on this performance measure	Quality of Annual financial statement from previous FY: • Unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0	The report from the Auditor General for the FY 2017/18, Local Governments Unqualified Audit Opinion Schedule for Fort Portal Branch No.15, for December 2018.	4
Governance, overs	sight, transparency and accou	untability	
The LG Council meets and discusses service delivery related issues Maximum 2 points on this performance measure	• Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2	The LG met and discussed service delivery related issues. At the District Local Government Council meeting held on 29th June 2018, it met and discussed service delivery issues e.g. under i. Min. KAB COU 201/06/18:"Address by the District Chairperson and Reactions thereafter", where Council approved the appointment of the Health Management Committee for Bukuuku HC IV.	2

The LG has responded to the feedback/ complaints provided by citizens Maximum 2 points on this Performance Measure	 Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 1. 	The LG had designated person to coordinate response to feedback as evidenced by the letter dated 18th July 2018 from the CAO appointing Mr. Mwesige Michael.	1
The LG has responded to the feedback/ complaints provided by citizens Maximum 2 points on this Performance Measure	• The LG has specified a system for recording, investigating and responding to grievances, which should be displayed at LG offices and made publically available: score 1	The LG has a specified system for recording and response as evidenced by i. Grievances register ii. A display of resolved complaints during FY 2017/*18 relating to stockouts and the response from National Medical Stores.	1
The LG shares information with citizens (Transparency) Total maximum 4 points on this Performance Measure	Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2	The payroll and pensioner schedule for August 2018 were found on display at the time of assessment.	2
The LG shares information with citizens (Transparency) Total maximum 4 points on this Performance Measure	• Evidence that the procurement plan and awarded contracts and amounts are published: score 1.	The procurement plan for FY 2018/19 and notice of awarded contracts were found on display at the PDU/Administration notice board at the time of assessment.	1

The LG shares information with citizens (Transparency) Total maximum 4 points on this Performance Measure	• Evidence that the LG performance assessment results and implications are published e.g. on the budget website for the previous year (from budget requirements): score 1.	The LG published results from the last assessment since as a found on display at the administration block notice board.	1	
The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens Maximum 2 points on this performance measure	• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1	The HLG communicated and explained national guidelines and circulars as found in the minutes of TPC meeting held on 13th September 2017 under Min: DTPC/Min.5/09/2017 where the DDEG grant guidelines were disseminated and explained by the District Planner.	1	
The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens Maximum 2 points on this performance measure	• Evidence that LG during the previous FY conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc.) with the public to provide feed- back on status of activity implementation: score 1.	The LG during the previous FY conducted discussions with the public by through the Kabarole District Annual Leaders Conference 2017-2018 held on 26th June 2018 as evidenced by the activity performance report 17-2018.	1	
Social and environ	Social and environmental safeguards			

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 and CDO have provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities score 2.	From the LG TPC minutes, it was established that gender focal person and CDO provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities, For example; During a TPC meeting held on 15/05/2018 under Min. 06/05/KAB/TPC/2018, DCDO made a presentation on gender situation analysis with action plan on gender gaps to HoDs.	2
The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles Maximum 4 points on this performance measure.	• Evidence that the gender focal point and CDO have planned for minimum 2 activities for current FY to strengthen women's roles and address vulnerability and social inclusions and that more than 90 % of previous year's budget for gender activities/ vulnerability/ social inclusion has been implement-ted: score 2.	 From the AWP FY 2018/19 under the Community based services sector page 97, it was established that the gender focal person and CDO had planned activities to strengthen women's roles and address vulnerability and social inclusions as follows; Planned to train women councils on their roles and responsibilities, to mobilize fellow women for social, economic and political development. Train women project leaders in group dynamics, financial management, leadership skills, resource mobilization and proposal writing. The LG performed at 100% budget execution on gender mainstreaming. I.e. budgeted UGX 4,000,000 and spent it all. 	2
LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition Maximum 6 points on this performance measure	• Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 1	Environmental screening or EIA was not done for any of the implemented projects, activities and plans last FY 2017/18	0

LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition Maximum 6 points on this performance measure	• Evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1	 The LG integrated environmental and social management and health and safety plans in the contract bid documents, for example; 1. Construction of Bishop Balya Polytechnic School – provided for safety against damage and theft, health and welfare for workers, planting of 10 trees. 2. Construction of a 2 classroom block at Kinyabuhara P/S – provided for lightening protection and earthing, planting trees and grass. Etc 3. Construction of Noble Mayombo Seed Secondary School – provided for lightening protection, installation of a water tank, wash out complete facility with soap valve. 4. Construction of piped water system in Rwentera-Ruteete S/C – Provided for backfilling of trenches, site clearance, grass planting around the stand taps. 	1
LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition Maximum 6 points on this performance measure	• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc): score 1	LG had no proof of land ownership for all the implemented projects.	0

LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition Maximum 6 points on this performance measure	• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1	For all the implemented projects, no ESM forms were completed.	0
LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition Maximum 6 points on this performance measure	• Evidence that the contract payment certificated includes prior environmental and social clearance (new one): Score 1	The contract payment certificated for all implemented projects didn't include prior environment and social clearance.	0
LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition Maximum 6 points on this performance measure	 Evidence that environmental officer and CDO monthly report, includes a) completed checklists, b) deviations observed with pictures, c) corrective actions taken. Score: 1 	There were no monthly reports availed for review by the Environmental Officer and CDO for all the implemented projects during FY 2017/18.	0

Education Performance Measures 2018

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource plan	ning and management		
The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school) Maximum 8 for this performance measure	• Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4	 The approved LG budget FY 2018/2019 pg 34, indicate a wage of 4.954.bn budgeted for teaching staff. The staff list in DEOs office for 63 schools with a wage bill indicates 812 teachers On average 812/63= 13 teachers per school which is above the minimum standards. 	4
The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school) Maximum 8 for this performance measure	• Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school (or minimum of a teacher per class for schools with less than P.7) for the current FY: score 4	 Basing on random sampling done on the staff deployment list, the department meets minimum standards as indicated in the following schools against their teachers: Bagaya p7- 15, Butebe p7- 19,Hope p7- 15, Kibyo Hill p7- 8, Kitarasa p7- 16, Mashoro p7- 8, Mugusu p7- 16, Nyansozi p7- 9, Kamabala p7- 9. Also the schools sampled for visiting to verify deployment conforms with minimum standards as below; (Key:- SL- Staff List, and PV- Physical verification of deployment on ground) Mugusu- SL- 16, PV- 16, Butebe SL- 19, PV- 19, Karambi SL- 15, PV- 15, Nyakasura SL- 18, PV- 18. 	4

LG has substantively recruited all primary school teachers where there is a wage bill provision Maximum 6 for this performance measure	 Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100%: score 6 o If 80 - 99%: score 3 o If below 80%: score 0 	 The Approved budget for 2018/2019, pg 147, budgeted for a wage 4.954. bn to cater for 829 outpost staff However the department currently operates with 812 staff Coverage is (812/829)*100= 98% 	3
LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision. Maximum 6 for this performance measure	• Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6	 The Approved and adopted staff structure as advised CAO by MoPS in a letter on 18/9/2017, after the creation of Bunyangabo district to implementation within the wage FY 2017/2018. The costed staff establishment Indicates 1positions of schools inspector filled by Mutambuzi William, and The positions of Senior Inspector of schools filled by Rujumba Joseph. 	6
The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY. Maximum 4 for this performance measure	Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of • Primary Teachers: score 2	 The department claims to operate at full capacity even over and cannot recruit any more staff. However according to HR recruitment plan indicate 9 teachers, but later after submission, when data capture was carried out, the department was found to have realized its ceiling for both teachers, and then was cancelled. The inspectors positions are filled up as indicated above PM 3. 	2

The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY. Maximum 4 for this performance measure	Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of • School Inspectors: score 2	 The department claims to operate at full capacity even over and cannot recruit any more staff. However according to HR recruitment plan indicate 9 teachers, but later after submission, when data capture was carried out, the department was found to have realized its ceiling for both teachers, and then was cancelled. The inspectors positions are filled up as indicated above PM 3. 	0
Monitoring and Inspect The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY. Maximum 6 for this performance measure	Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY • 100% school inspectors: score 3	 100% of their schools inspector s had been appraised by CAO Namely:- 1- Rujumba Joseph (CR/D/11611) – Who was appraised on 8/8/2018 2- Angwena Harriet (CR/D/11653) – Who was appraised on 8/8/2018 	3

The LG Education department has	Evidence that the LG Education department	100% of Primary school head teachers had been appraised DEO	3
conducted performance appraisal for school inspectors and	has ensured that all head teachers are appraised and has appraised all school inspectors during	10 Primary school head teachers files were sampled out of 63 primary schools, namely:-	
ensured that performance	the previous FY	1- Musinguzi Moses (CR/D/31246) – For Kasisi PS – Was appraised on 10/8/2018	
appraisal for all primary school head teachers is	Primary school head teachers o 90 - 100%: score 3	2- Kabege Grace (CR/D/30981) – For Kyanyawala PS – Was appraised on 10/8/2018	
conducted during the previous FY.	o 70% and 89%: score 2	3- Biira Druscillah (CR/D/30884) – For Mahyoro PS – Was appraised on 28/7/2018	
Maximum 6 for this performance measure	o Below 70%: score 0	4- Kyota Thomas (CR/D/31803) – For Mutuuli PS – Was appraised on 30/7/2018.	
measure		5- Mwesige Alphonse (CR/D 30135) – For Kamabale PS – Was appraised on 27/7/2018.	
		6- Kusemererwa David (CR/D/30096) – For Bgaya PS – Was appraised on 2/8/2018.	
		7- Rwambale Salvano (CR/D 30040) – For Kinyankende PS – Was appraised on 14/7/2018.	
		8- Kakwezi Harriet (CR/D/31615) – For Harugongo PS – Was appraised on 27/7/2018.	
		9- Apecho Florence (CR/D/31626) – For Mpinga PS – Was appraised on 30/6/2018	
		10- Bagamba Robinah (CR/D/31029) – For Komyampere PS – Was appraised on 10/8/2018	

			1
The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools Maximum 3 for this performance measure	• Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1	 Circulars communicated in 2017/2018 include; 1. Enforcing closure of illegal schools, dated 26/3/2018. 2. Immunisation against cancer of cervix (HPV Vaccine), dated 21/3/2018. 3. Registration of learners in schools aged 5 years and above, date 18/7/2017. 4. Teacher support supervision for tool in schools; Basic routine for p/s inspection, dated 11/8/2017. 5. Guidelines on school charges , dated 24/10/2017. 6. Verification of staff on payroll, dated 30/4/2018. However the schools visited to verify receipt of circulars from MDAs are as indicated below. The following circulars were found (Key for circulars- as serialized above) Butebe p/s- 1, 3, 5, 6 Mugusu p/s- 1, 2, 3, 5, 6, Karambi p/s- 2, 3, 4, 5, Nyakasura p/s- 1, 2, 3, 5, Good Life p/s- 3, 4, 5. 	1

The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools Maximum 3 for this performance measure	• Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level: score 2	 The department means of communication include; Re-write Circulars, Head teachers meetings, Notice boards, SMS, Calls, and through sub county coordinators. Department circular; To all head teachers; Encourage parents to register learners for National Identification cards, dated 18/8/2017, signed by DEO. Circular by CAO 0n 11/8/2017; To all head teachers: Dissemination of teachers' support supervision in schools, a basic routine for teachers inspection. 	2
		• Circular by DEO on 23/3/2018; To all head teachers, Parents, and care takers: Immunization against cancer of the cervix (HPV vaccine)	

The LG Education	Evidence that all	The LG operates 63 government and 42 private	3
De- partment has effectively inspected	licenced or registered schools have been	licensed and registered schools officially submitted to DEOs office, total to 105 schools.	
all registered primary schools2	inspected at least once per term and reports produced:	• Term 3 inspection report on 20/11/2017 indicates 63 schools.	
Maximum 12 for this performance measure	o 100% - score 12	• Term 1 inspection report, on 8/5/2018 – 83 schools.	
	o 90 to 99% - score 10	• Term 2 report, on 29/6/2018, shows 69 schools.	
	o 80 to 89% - score 8	• Average inspection per term; (63+63+69)/3= 65	
	o 70 to 79% - score 6 o 60 to 69% - score 3	• 65/105*100= 62%	
	o 50 to 59 % score 1	However the schools sampled to verify on inspection minimum standards of once per term	
	o Below 50% score 0.	is as seen below: - Nyakasura junior was inspected in term 3 on	
		5/10/2017, term 1 on 24/4/18, and term 2 on 12/6/2018. =(3/3)	
		- Good life private p/s: No evidence of inspection at all. =(0/3)	
		- Butebe p/s; Term 3 on 22/11/2017; Term 1 on 24/4/2018; and Term 2 on 12/6/2018.= (3/3)	
		- Mugusu p/s; Term 3 on 26/10/2017; Term 1 on 26/3/2018; Term 2 on 11/6/2016.= (3/3)	
		- Karambi p/s; No inspection evidence was identified. (0/3)	
		• Average inspection in sampled schools (3/3+0/3+3/3+3/3+0/3)/5*100= 60%.	
		• Overall % inspection= Average of inspections both from sampled schools and termly percentages (62+60)/2= 61%	

LG Education department has discussed the results/ reports of school inspec- tions, used them to make recommendations for corrective actions and fol- lowed recommendations Maximum 10 for this performance measure	• Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4	 Inspection report of 29/6/2018; Recommendations; Inadequate capitation grants to schools Staffing gaps due to retirement, death, and transfers Lack of accommodation for teachers in hard to reach/stay is leading to absenteeism. Department report to council and TPC on 30/6/2018; Council and development partners to assist school development areas of accommodation. LG should supplement on funds from the centre. 	4
LG Education department has discussed the results/ reports of school inspec- tions, used them to make recommendations for corrective actions and fol- lowed recommendations Maximum 10 for this performance measure	• Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2	• Term 3, 2017; Term 1, 2018; Term 2, 2018 reports were submitted and received by DES secretary on 2/10/2018.	2
LG Education department has discussed the results/ reports of school inspec- tions, used them to make recommendations for corrective actions and fol- lowed recommendations Maximum 10 for this performance measure	• Evidence that the inspection recommendations are followed- up: score 4.	 Foe example: At Mugusu p/s, inspection report recommendations on 11/6/2018 by DIS; Fill gaps in P.3 and P.4 classroom environment missing instructional materials. Follow up; Staff meeting on 24/8/2018; Min. 2/2018; Head teachers communication: Schemes of work must be fully completed. Lesson accountability must be implemented. Now schemes of work are approved, well arranged and children can ably read sentences on their own. 	4

The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES Maximum 10 for this performance measure	• Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and PBS: score 5	OBT data submitted to MOES and MOFPED FOR IPFs of primary schools as at April 2017 indicate 63 P/S. While EMIS data from MOES also indicate 63 schools, the numbers are consistent.	5
The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES Maximum 10 for this performance measure	Evidence that the LG has submit- ted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and PBS: score 5	Enrollment data in DEOs office used for IPFs for UPE disbursement for FY 2017/2018 indicate 35,919, while EMIS data from MOES shows 36,131, the numbers are not consistent.	0
Governance, oversigh	t, transparency and account	tability	
The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council Maximum 4 for this performance measure	• Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc. during the previous FY: score 2	At the meeting of the Health and Education Committee held on 2nd October 2017, the Committee discussed service delivery issues under Min. 9/2017/18(b): Reports Presentation". The Committee discussed the status of school inspection in public and private schools.	2

The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council Maximum 4 for this performance measure	• Evidence that the education sector committee has presented issues that require approval to Council: score 2	At the District Council meeting of 29th June 2018, it met and discussed recommendations from the Health and Education Committee under MIN KAB.COU/205/06/18: Presentation of Sectoral Committee Recommendations on the Budget, the Committee requested Council to approve the ceasing of children going to school to early or returning home late.	2
Primary schools in a LG have functional SMCs Maximum 5 for this performance measure	Evidence that all primary schools have functional SMCs (estab- lished, meetings held, discussions of budget and resource issues and submission of reports to DEO/ MEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80 % schools: score 0	 The current SMCs are established and appointed by DEO on 1/8/2016 as the Education ACT warrants. All schools sampled (Karambi p/s, Nyakasuura Junior, Good life, Butebe, and Mugusu p/s) Held SMC meetings and discussed resource issues in almost all their meetings ranging from Fundraising, UPE budget approvals, Expenditures accountabilities, PTA, and donor grants etc as indicated below. (Selected/Sampled one meeting (term 1, of 2018 in all schools) as representative for SMC meetings, out of the 3 mandatory meetings in a year to check if resource related issues discussed.) Karambi p/s has 3 SMC meeting but Term 1 on 15/2/2018, Min.8/2018; A call to PTA to fundraise for each pupil from Shs. 1000 to 2000 to cater for teachers and school requirements. Nyakasura Junior has 3 meetings, but Term 1 SMC on 21/3/2018, Min. 6/2018; Approval for UPE budget. Good life private p/s has 2 SMC meeting but no meeting for term 1. Butebe p/s has 3 SMC meeting, but term 1, held on 23/2/2018, Min.4&5/2/2018; Approving for UPE funds, and planning for smooth running of school. Mugusu p/s held 3 SMC meetings, but Term 1 held on 13/3/2018, Min. 7&8/2018, Planning for 2018 and drafting budget for 1st term. 	3

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 	 Provide/quote/verify evidence. UPE 4th Quarter release FY 2017/2018 worth 113,927,944. was seen displayed on department notice board. However the schools sampled and visited, had displayed UPE grants as evidenced below: Karambi p/s 3rd term 2017, received 1.805m, and Term 1 and 2 of 2018 same amount. Butebe p/s received 2.45m for 3rd term; Term 1 received 2.448m; 2nd term 2.438m. Mugusu p/s received 1.905m throughout all terms. 	3
Procurement and cont	tract management		

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. 	 From the sampled payments made during the year to various vendors worth UGX 604,181,523, which was spent on: K David and Friends Ltd: Construction of facilities, three classroom blocks, administration block, two unit science laboratories, five stance lined VIP Latrines at Noble Mayombo Memorial School at Kijura Town Council, VR.No.399, 343 & 339. Maguru Construction Limited: Construction of a five stance lined VIP Latrine, carpentry, metal work, Block laying and concrete practice workshop and two offices at Bishop Balya Polytechnic at Hakibale Sub County, VR.No.341 & 362. All these payments were made on time and mostly within a week after requisition for payment was raised. 	3
The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure	• Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by 15th of July for consolidation: score 4	The Department submitted the APR to Planner by 15th July 2018 as evidenced by a letter from the DEO to the District Planner dated 9th July 2018 submitting the Education Sector Annual Performance Report for the FY 2017/2018.	4

			2
LG Education has	• Evidence that the sector	Eight Queries	-
acted on Internal Audit recom-	has provided information to the internal audit on	• (1) Staffing gaps in Primary Schools.	
mendation (if any) Maximum 4 for this	the status of implementation of all audit findings for the	 (2) Un accounted for UPE funds worth UGX 60,039,713 	
performance measure	previous financial year	• (3) Failure to bank PTA collection funds.	
	o If sector has no audit query	• (4) Un accounted for administrative advance of UGX9, 582,300.	
	score 4 o If the sector has	 (5)Failure to prepare Accounts and posting Books of Accounts in Most Schools 	
	provided information to the internal audit on the	• (6) Un updated Asset Registers in Schools	
	status of imple- mentation of all audit findings for the	• (7) Un remitted PAYE & 6% Withholding Tax to Uganda Revenue Authority	
	previous financial year: score 2	• (8) Non production of back to school reports	
	o If all queries are not respond- ed to score 0	 All these queries were responded to and the status of implementation was submitted to LGPAC. LGPAC in its meeting on 29th September 2018 discussed and cleared all of them. 	
Social and environme	ntal safeguards		
LG Education Department has disseminated and promoted adherence to gender guidelines Maximum 5 points for this performance measure	• Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills, etc.: Score 2	 Workshop training for senior women teachers on menstrual hygiene management on 6/9/2017 at DLG chambers by MOES. On 1/6/2018; 'KADIPSHA general meeting, Min. 6/2018; DEO communication on menstrual hygiene should be taken seriously to avoid girls drop out of school due to lack sanitary materials 	2

D di pr tc M fc	G Education epartment has isseminated and romoted adherence o gender guidelines laximum 5 points or this performance leasure	• 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	 Guidelines for implementing three star approach for WASH in schools. October 2017 All school construction either for latrine or classroom must have provision for accessibility for PWDs like ramps, support iron bars in toilets, and 1 stance for PWD on every 5 stance latrines Department has supported PWDs to participate in athletics and ball games competition 	2
D di pr tc M fc	G Education epartment has isseminated and romoted adherence gender guidelines laximum 5 points or this performance leasure	• Evidence that the School Management Committee meets the guideline on gender composition: score 1	 Basing on schools sampled and visited, the results indicate that SMCs conform to gender guidelines of 1/3 of members on the founding body to be females, as shown below. Butebe p/s has 2 females out of 6 founding members; Mugusu p/s has 3/6; Karambi p/s- 3/6; Nyakasura Junior p/s- 2/6; and Good Life p/s has 3/6 	1
di er lir er di co M	G Education epartment has nsured that guide- nes on nvironmental anagement are issemi- nated and complied with laximum 3 points or this performance neasure	• Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 1:	 On 14/2/2018 department meeting, Min. 6/2/2018; DEOs communication; Urged head teachers incorporate environment protection and conservation. Natural resources department; Environment screening for Green valley primary school, dated 18/8/2017, signed by DEO and EO. It is by policy; before department award license to any private school it must have to be screened by environment officer. 	1

LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with Maximum 3 points for this performance measure	• Evidence that all school infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: Score 1	• No evidence availed on environmental screening of projects under education FY 2017/18.	0
LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with Maximum 3 points for this performance measure	 The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 1 	• No environmental monitoring report for projects executed FY 2017/18 was availed during assessment.	0

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource plann	ing and management		
LG has substantively recruited primary health care workers with a wage bill provision from PHC wage Maximum 8 points for this performance measure	Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY • More than 80% filled: score 8 • 60 – 80% - score 4 • Less than 60% filled: score 0	 The LG has 88.8% posts filled MoH approved structure provides for 367 posts (Including DHO's Office) to operate at 100% capacity. DHO payroll for July 2018 with stamp showed 326 posts filled. This meant that 41 posts were vacant in relation to the approved MoH staffing norms. 	8
The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department Maximum 6 points for this performance measure	Evidence that Health department has submitted a comprehensive recruitment plan/re- quest to HRM for the current FY, covering the vacant positions of primary health care workers: score 6	• Recruitment Plan for FY 2018/19 with letter of submission from the Ag. DHO dated 31st July 2018 was availed. It proposed 5 critical positions to prioritise for recruitment and attached a comprehensive 3 year plan which indicated 326 filled and 41 vacant positions	6

The LG Health department has conducted performance appraisal for Health Centre IVs and Hospital In- charge and ensured performance appraisals for HC III	Evidence that the all health facilities in- charges have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4	 100% of Health Unit in charges had been appraised, According to the 8 sampled personal files out of 11, all had been appraised by Senior Assistant Secretary for the FY 2017-2018 Namely:- 1 – Kabahenda Norah (CR/D/10331) – For 	8
and II in-charges are conducted	o Below 70%: score 0	 Kicwamba HCIII was appraised on 30/7/2018 Asiimwe Deogratious (CR/D/10227) – For 	
		Kabende HCIII was appraised on 307/2018	
Maximum 8 points for this performance measure		3 Rujumba Ronald (CR/D/11767) – For Mugusu HCIII was appraised on 26/7/2018	
		4 Bahuma Wilson (CR/D/11261) – For Nyantaboma HCIII was appraised on 25/7/2018	
		5 Musinguzi Andew (CR/D/11330) –For Kaswa HCIII was appraised on 25/7/2018	
		6 Amora Evans (CR/D/12040) -For Karambi HC III was appraised on 23/7/2018	
		7 Mugisa Thomas (CR/D/11772) -For Ruteete HCIII was appraised on 20/7/2018	
		8 Dr Asiimwe Solomon (CR/D/18772) – For Bukiiku	
		HC IV	

The Local Government Health department has deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY. Maximum 4 points for this performance measure	• Evidence that the LG Health department has deployed health workers in line with the lists submitted with the budget for the current FY, and if not provided justification for deviations: score 4	 4 out of the 5 facilities sampled had deviations in staff and there was no justification provided by the DHO at the time of assessment. • 23 Gov't facilities (1 HCIV, 11 HCIIIs & 11 HCIIs) exist in the district where staff on PHC Wage are deployed. 1. Bukuku HCIV staff list dated 1st June 2018 was availed with 54 staff recorded as attached to the facility. The staff list availed at DHO's office recorded 45 staff as deployed to this facility. 2. Kichwamba HCIII staff list was availed with 17 staff listed. Staff list at DHO's office showed 17 staff deployed to this facility. 3. Mugusu HCIII staff list was availed with 23 staff attached. DHO's staff list showed 22 staff deployed. 4. Nyabuswa HCII staff list was availed with 15 staff recorded as attached. DHO staff list indicated 14 staff deployed to this facility. 5. Karambi HCIII staff list dated 08/AUG/2018 was availed with 18 staff recorded as attached. DHO staff list indicated 20 staff deployed to this facility. 	0
Monitoring and Supervi	sion		
The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities Maximum 6 for this performance measure	• Evidence that the DHO/ MHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3	 Sector Grant and Budget Guidelines 2018/19 were availed . A letter dated 4th October 2018 from the DHO to show communication of these guidelines to facilities was availed and attached to it were names, contacts & signatures of 18 health facility in-charges. However, from the sampled facilities, there was no evidence of presence of the above guidelines 	3

The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities Maximum 6 for this performance measure	• Evidence that the DHO/ MHO has held meetings with health facility in- charges and among others explained the guidelines, policies, circulars issued by the national level: score 3	• No evidence from DHO at the time of assessment.	0
The LG Health Department has effectively provided support supervision to district health services Maximum 6 points for this performance measure	Evidence that DHT/MHT has supervised 100% of HC IVs and district hospitals (including PNFPs receiving PHC grant) at least once in a quarter: score 3	 The district has 1 HCIV and 2 Hospitals that receive PHC NWR, no hospital was supervised in any of the 4 quarters and the HCIV was supervised 3 out of 4 times as evidenced below i.e. the Q1 supervision report was never availed at the time of assessment The district has 1 HSD (Bukuku). The total number of HFs (Including PNFPs) that receive PHC NWR herein are 26 (Gov't – 1HCIV, 11HCIIIs, 7HCIIs; PNFP – 2 Hospitals, 2HCIIIs, 2HCIIs & 1 Nursing School – Verika). Q2 integrated support supervision report dated 20th November 2017 was availed. 16 facilities were visited i.e. 2 HCIVs, 14 HCIIIs. Q3 integrated support supervision report dated 26thFebruary 2018 was availed. 17 facilities were supported (2HCIVs, 15HCIIIs). Q4 integrated support supervision report dated 24th May 2018 was availed. 16 facilities were supported (2 HCIVs, 14 HCIIIs). 	0

The LG Health Department has effectively provided support supervision to district health services Maximum 6 points for this performance measure	Evidence that DHT/MHT has ensured that HSD has super- vised lower level health facili- ties within the previous FY: • If 100% supervised: score 3 • 80 - 99% of the health facilities: score 2 • 60% - 79% of the health facilities: score 1 • Less than 60% of the health facilities: score 0	 The HSD supervised only 50% of the health facilities The district has 1 HSD (Bukuku). The total number of HFs (Including PNFPs) that receive PHC NWR herein are 26. Q1 report for supervision carried out from 8th to 10th August 2017 was availed. 3 facilities were visited i.e. 2 HCIIIs and 1 HCII Q2 report for supervision carried out from 20th to 22nd December 2017 was availed. 3 facilities were supervised i.e. 2 HCIIIs & 1 HCII. Q3 report for supervision carried out from 2nd to 5th January 2018 was availed. 4 HCIII facilities recorded as visited but only 1 facility report seen. Q4 report for supervision carried out from 18th to 20th June was availed. It recorded 3 facilities (2 HCIIIs & 1 HCII) were visited however, the individual reports were never availed. 	0
The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up Maximum 10 points for this performance measure	• Evidence that all the 4 quarterly reports have been discussed and used to make recommendations (in each quarter) for corrective actions during the previous FY: score 4	 The DHT only discussed 3 out of the 4 mandatory reports even though at HSD level all 4 reports had been discussed. Negative findings for each facility during the Q2 & Q3 DHT supervision were discussed immediately and general action points were outlined at the end of the report without responsible persons & time frames given. Recommendations were made for the negative findings in each facility visited during the Q4 DHT supervision and general action points outlined at the end of the report but no responsible persons & time frames were identified. Negative findings for each facility visited during the Q1, Q2, Q3 & Q4 HSD supervision were discussed and action plan with responsible person & time frame identified 	0

The LG Health department has submitted accurate/ consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH• Evidence that the LG has submitted accurate/consistent data regarding: • List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10• The district has 1 HSD (Bukuku). The total number of HFs (Including PNFPs) that receive PHC NWR herein are 26 (Gov't – 1HCIV, 11HCIIIs, 7HCIE; PNFP – 2 Hospitals, 2HCIIIs, 2HCIIs & 1 Nursing School – Verika). • List of facilities that received PHC NWR in Q1 FY2018/19 with DHO stamp was availed with 26 facilities (Including PNFPs) to receive a total of UGX 84, 686,445• The PBS LG Approved Budget Estimates FY 2018/19 generated on 29/07/2018 were availed. It listed 26 facilities on Pages 26, 27 & 29 and the total PHC NWR was UGX 338,626,000 • HMIS report from DHIS2 for period April to June 2018 on OPD attendance dated 12/10/2018 was availed. It indicated the 25 facilities among other reporting facilities. The 26th facility is Virika Nursing School which receives PHC funds (UGX 970,383 per quarter) for outreaches. The Ag. DHO explained that the nursing school submits their reports through Virika Hospital which was among the 25 facilities reporting as per the HMIS report.	The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up Maximum 10 points for this performance measure	 Evidence that the recom- mendations are followed up and specific activities undertaken for correction: score 6 	• No acceptable evidence was availed at the time of assessment	0
	department has submitted accurate/ consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH	has submitted accurate/consistent data regarding: o List of health facilities receiving PHC funding, which are consistent with both HMIS reports and	number of HFs (Including PNFPs) that receive PHC NWR herein are 26 (Gov't – 1HCIV, 11HCIIIs, 7HCIIs; PNFP – 2 Hospitals, 2HCIIs, 2HCIIs & 1 Nursing School – Verika). • List of facilities that received PHC NWR in Q1 FY2018/19 with DHO stamp was availed with 26 facilities (Including PNFPs) to receive a total of UGX 84, 686,445 • The PBS LG Approved Budget Estimates FY 2018/19 generated on 29/07/2018 were availed. It listed 26 facilities on Pages 26, 27 & 29 and the total PHC NWR was UGX 338,626,000 • HMIS report from DHIS2 for period April to June 2018 on OPD attendance dated 12/10/2018 was availed. It indicated the 25 facilities among other reporting facilities. <i>The</i> <i>26th facility is Virika Nursing School which</i> <i>receives PHC funds (UGX 970,383 per quarter)</i> <i>for outreaches . The Ag. DHO explained that the</i> <i>nursing school submits their reports through</i> <i>Virika Hospital which was among the 25 facilities</i>	10

The LG committee responsible for health met, discussed service delivery issues and presented is- sues that require approval to Council Maximum 4 for this performance measure	• Evidence that the LG committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2	At the meeting of the Health and Education Committee held on 2nd October 2017, the Committee discussed service delivery issues under Min. 9/2017/18(a): Reports Presentation". The Committee discussed improvement of staff performance at all HCs and the General Referral hospital; the need to manage the mushrooming private clinics and reduced maternal mortality rate.	2
The LG committee responsible for health met, discussed service delivery issues and presented is- sues that require approval to Council Maximum 4 for this performance measure	• Evidence that the health sector committee has pre- sented issues that require approval to Council: score 2	At the District Council meeting of 29th June 2018, it met and discussed recommendations from the Health and Education Committee under MIN KAB.COU/205/06/18: Presentation of Sectoral Committee Recommendations on the Budget, the Committee requested Council to approve the new indicative planning figures for health infrastructure improvement and recommended redistribution of funds for development to Health facilities of Nyantaboma,Nyabuswa and Kijura HC IIIs.	2
The Health Unit Management Committees and Hospital Board are operational/functioning Maximum 6 points	Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discus- sions of budget and resource issues): • If 100% of randomly sampled facilities: score 6 • If 80-99 %: score 4 • If 70-79: %: score 2 • If less than 70%: score 0	 3 out of 5 sampled facilities qualified as required by this performance measure. This is 60% performance 1. Bukuku HCIV HUMC list was availed with 14 members (3 females & 11 males). Q1 minutes for meeting held on 6th October 2017 were availed; resource issues were discussed under Min 75/6/HSD/2017. Q2 minutes for meeting held on 6th December 2017 were availed; budget & resource issues were discussed under Min 88/12/HSD/2017. Q3 minutes for meeting held on 23rd March 2018 were availed; budget & resource issues were discussed under Min 99/03/HSD/2018. Q4 minutes for meeting held on 22nd June 2018; resource issues were discussed under Min 110/06/HSD/2018. 2. Kichwamba HCIII HUMC list with 8 members (4 female & 4 males) was availed Q1 minutes for meeting held on 29/9/2017 were availed; budget & resource issues were discussed under Min. 31/9/2017. 	0

Q2 minutes for meeting held on 04/12/2017 were availed; budget & resource issues were discussed under Min. 38/12/2017. Q3 minutes for meeting held on 15/03/2018 were availed; budget & resource issues were discussed under Min. 44/3/2018. Q4 minutes for meeting held on 29/6/2018 were availed; budget & resource issues were discussed under Min. 53/6/2018 & Min 55/6/2018.

3. Mugusu HCIII HUMC list was availed with 7 members (3 females & 4 males). Q1 minutes for meeting held on 25/07/2017 were availed, budget & resource issues were discussed under Min 03/HUMC. Q3 minutes for meeting held on 19/1/2018 were availed, budget & resource issues were discussed under Min 05/MHUMC/01/2018. Q4 minutes for meeting held on 29/6/2018 were availed; budget & resource issues were discussed under Min 05/MHUMC/06/2018.

<u>4. Nyabuswa HCII HUMC list with 7 members (2</u> <u>females & 5 males) was availed.</u> No HUMC minutes were availed at the time of assessment

5. Karambi HCIII HUMC list as of April 2018 was availed with 10 members (4 females & 6 males).

Q1 minutes for meeting held on 28/09/2017 were availed, budget & resource issues were discussed under Min 03/KAR/2017.

Q2 minutes for meeting held on 21st December 2017 were availed, budget & resource issues were discussed under Minute 3.

Q3 minutes for meeting held on 28th March 2018 were availed, budget & resource issues were discussed under Minute 3.

Q4 minutes for meeting held on 26th June 2018 were availed, budget & resource issues were discussed under Minute 3.

The LG has publicised all health facilities receiving PHC non- wage recurrent grants Maximum 4 for this performance measure	• Evidence that the LG has publicised all health facilities receiving PHC non- wage recurrent grants e.g. through posting on public notice boards: score 4	• A list of 26 facilities (Gov't – 1HCIV, 11HCIIIs, 7HCIIs; PNFP – 2 Hospitals, 2HCIIIs, 2HCIIs & 1 Nursing School – Virika) that received PHC NWR in Q1 FY 2018/19 with CFO's stamp was availed and was displayed on the public notice board at the time of assessment.	4
Procurement and contra	act management		
The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	• Evidence that the sector has submitted input to procurement plan to PDU that cover all investment items in the approved Sector an- nual work plan and budget on time by April 30 for the current FY: score 2	The plan was submitted late i.e. after April 30 for the current FY • A Procurement Plan for FY 2018/19 was availed dated 24/07/2018. It had 8 investment items listed (4 PHC NWR, 2 Local Revenue and 2 PHC Development)	0

The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget 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.	 Six PP1 forms for FY 2018/19 investment menu items were availed and all were submitted by 1st Quarter of the current FY Maternity ward, general ward & staff house at Nyantabooma HCIII worth UGX 500,000,000 dated 24/07/2018. Two unit staff house at Nyabuswa HCIII worth UGX 65,000,000 dated 30/07/2018 Fuel for DHT Supervision & Coordination worth UGX 5,000,000 dated 24/07/2018 Water & Electricity for DHO's Office worth UGX 5,000,000 dated 24/07/2018 Stationery worth UGX 2,000,000 dated 24/07/2018 Cleaning Services & Ambulance Fuel worth UGX 12,000,000 dated 24/07/2018 Note: Two of the items were combined on one PP1 form i.e. Nos. 4 & 6 	2
The LG Health department has certified and initiated payment for supplies on time Maximum 4 for this performance measure	• Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4.	• During the FY there were no Projects Invested in.	0
Financial management	and reporting		

LG Health department has acted on Internal Audit recommendation (if any)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• Three queries: • (1) Poor Book keeping and non-Accountability of PHC Funds in most HCIIIs & HCIIs. • (2) Drug stock Outs of essential drugs at Mugusu, Kicwamba and Ruteete Health facilities. • (3) Absenteeism of health workers from their duty stations. • (3) Absenteeism of health workers from their duty stations. • All queries were responded to and status of their implementation and action plans for the long ter previous financial year: Score 2 points • If all queries are not responded to Score 0• Three queries: • (1) Poor Book keeping and non-Accountability of PHC Funds in most HCIIIs & HCIIs. • (2) Drug stock Outs of essential drugs at Mugusu, Kicwamba and Ruteete Health facilities. • (3) Absenteeism of health workers from their duty stations. • • All queries were responded to and status of their implementation and action plans for the long ter solutions were submitted to LGPAC which discussed them in their meeting on 27th September 2018.	The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure	• Evidence that the depart- ment submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4	The Department submitted the APR to Planner by 15th July 2018 as evidenced by a letter from the DHO to the District Planner dated 9th July 2018 submitting the Health Sector Annual Performance Report (Q4) for FY 2017/18 departmental progress report.	4
	has acted on Internal Audit recommendation (if any) Maximum 4 for this	 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 	 (1) Poor Book keeping and non-Accountability of PHC Funds in most HCIIIs & HCIIs. (2) Drug stock Outs of essential drugs at Mugusu, Kicwamba and Ruteete Health facilities. (3) Absenteeism of health workers from their duty stations. All queries were responded to and status of their implementation and action plans for the long term solutions were submitted to LGPAC which discussed them in their meeting on 27th 	2

Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities. Maximum 4 points	 Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines (i.e. minimum 30 % women: score 2 	 2 out 5 facilities sampled failed to meet the required 30% gender composition as per the guidelines 1. Bukuku HCIV HUMC list was availed with 14 members (3 females & 11 males). This is 27.3% composition 2. Kichwamba HCIII HUMC list with 8 members (4 females & 4 males) was availed. This is 50% composition 3. Mugusu HCIII HUMC list was availed with 7 members (3 females & 4 males). This is 42.9% composition 4. Nyabuswa HCII HUMC list with 7 members (2 females & 5 males) was availed. This is 28.6% composition 5. Karambi HCIII HUMC list as of April 2018 was availed with 10 members (4 females & 6 males). This is 40% composition 	0
Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities. Maximum 4 points	• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2.	• No evidence was availed at the time of assessment.	0
LG Health department has ensured that guidelines on environmental management are disseminated and complied with Maximum 4 points for this performance measure	• Evidence that all health facility infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: Score 2	 Project screening was not applicable since there were no infrastructure projects the previous FY The procurement plan FY 2017/18 dated 29th July 2017 was availed. It listed 6 investment menu items and none of them was an infrastructure project. 	0

LG Health department has ensured that guidelines on environmental management are disseminated and complied with Maximum 4 points for this performance measure	• The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 2	• Site visits & inspections were not applicable since there were no infrastructure projects done the previous year	0
The LG Health department has issued guidelines on medical waste management Maximum 4 points	• Evidence that the LG has is- sued guidelines on medical waste management, including guidelines (e.g. sanitation charts, posters, etc.) for construction of facilities for medical waste disposal2: score 4.	 A letter communicating medical waste management guidelines from the DHO dated 4th January 2018 was availed. A distribution sheet with 13 names, contacts and signatures of staff representatives from different facilities dated 14/01/2018 was availed . 	4

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Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and	execution		
The DWO has targeted allocations to sub- counties with safe water coverage below the district average. Maximum score 10 for this performance measure	 Evidence that the district Water department has targeted subcounties with safe water coverage below the district average in the budget for the current FY: o If 100 % of the budget allocation for the current FY is allocated to S/Cs below average coverage: score 10 o If 80-99%: Score 7 o If 60-79: Score 4 o If below 60 %: Score 0 	 From the Uganda Water Supply Atlas (wateruganda.com), safe water coverage in Kabarole averages 79% Six of the 11 rural sub-counties are below the district average: Harugongo 52%, Kabende 68%, Kichwamba 70%, Karambi 76%, Karagura 40%, and Kasenda 71% As per FY 2018/19 approved workplan and budget submitted August 20, 2018, funds have been allocated to four of the low-coverage sub-counties: Kabende: UGX 119m for extension of gravity flow scheme (GFS) Karambi: UGX 4m for rehabilitation of 1 No. shallow well (SW) Kasenda: UGX 134.5m for extension of GFS to Bubandi and Nyakitokoli parishes Kasenda: UGX 20m for rehabilitation of 3 No. SWs The total investment in low- coverage sub-counties of UGX 278m represents 67% of the FY 2018/19 water and sanitation development grant (UGX 416 million) 	4

The district Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average) Maximum 15 points for this performance measure	 Evidence that the district Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY. o If 100 % of the water projects are implemented in the targeted S/Cs: Score 15 o If 80-99%: Score 10 o If 60-79: Score 5 o If below 60 %: Score 0 	 The LG reported its FY 2017/18 achievements in the Q4 report submitted August 20, 2018 As per aforesaid progress reports, four major WSS projects were implemented in FY 2017/18, viz.: o Construction/extension of three GFS to serve communities in Kasenda, Rutete and Karagura sub- counties o Rehabilitation of 11 No. point sources to serve communities in Kichwamba, Karambi and Harugongo sub-counties As per quarterly reports, all but one (Kabende) of the six low-coverage took the bulk of FY 2017/18 WSS projects 	10
Monitoring and Supervis	ion		
The district Water department carries out monthly monitoring of project investments in the sector Maximum 15 points for this performance measure	Evidence that the district Water department has monitored each of WSS facilities at least annually. • If more than 95% of the WSS facilities monitored: score 15 • 80% - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60% - 69% monitored: score 5 • 50% - 59%: score 3 • Less than 50% of WSS facilities monitored: score 0	 Implementation monitoring reports for the FY 2017/18 WSS investments (presented in PM #2) were reviewed: o Construction of Kasenda GFS (by Richo Investments): progress report dated March 16, 2018 authored by the Senior Water Officer (SWO) o Construction of Rweitera/Rutete GFS (by Richo Investments Ltd): status report dated April 18, 2018 authored by the SWO o Construction of Karagura GFS (by Vijocoi Ltd): supervision and monitoring report dated February 13, 2018 authored by SWO o Rehabilitation of 11 No. point sources (by Bamuhumbu Water Constructions Ltd): supervision and monitoring report dated February 13, 2018 authored by SWO • A out of 4 Projects: 100% 	15

The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE Maximum 10 for this performance measure	 Evidence that the district has submitted accurate/consistent data for the current FY: Score 5 List of water facility which are consistent in both sector MIS reports and PBS: score 5 	 LG reported its FY 2017/18 achievements in Q4 report submitted August 20, 2018 The report highlighted achievements with respect to construction of 3 No. GFS and rehabilitation of WSS facilities 	5
The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE Maximum 10 for this performance measure	• List of water facility which are consistent in both sector MIS reports and PBS: score 5	 The list of FY 2017/18 achievements is consistent with both MWE and PBS records as follows: o Construction of Kasenda GFS o Construction of Rutete GFS o Construction of Karagura GFS o Rehabilitation of 11 No. point sources The relevant MoWE MIS file: Quarterly Achievements FY 2017/18 	5
Procurement and contra	ct management		

The district Water department has submitted input for district's procurement plan, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	Evidence that the sector has submitted input for the district procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4	 The following WSS investments are planned for FY 2018/19: o Extension of Rweitera/Buheesi GFS o Extension of Karagura GFS to Bubandi and Nyakitokoli parishes o Extension of Kasenda GFS o Extension of Busoro GFS o Rehabilitation of Kabende GFS o Rehabilitation of 15 No. shallow wells o Construction 3-stance VIP latrine of Kiburara Procurement requisitions for FY 2018/19 investments were raised by DWO on the same date: September 17, 2018 PDU records confirm PRs were submitted well-past the April 30 deadline 	0
The district has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	• If the contract manager prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2	 The DWO was appointed Contract Manager/Supervisor for WSS projects highlighted in Performance Measures #2 and #4 on the following dates: o Construction of Karagura and Kasende GFS: July 25, 2017 o Rehabilitation of WSS facilities: May 16, 2018 Implementation monitoring (site) visits were conducted as highlighted in Performance Measure 3 	2

The district has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	 If water and sanitation facilities constructed as per design(s): score 2 	 Contract documents for GFS, the predominant technology in the LG, entail specifications to guide construction Contracts Kabr513/Wrks/2017-18/005 for Rutete GFS, Kabr513/Wrks/2017-18/006 for Kasenda GFS and Kabr513/Wrks/2017-18/007 for Karagura GFS were reviewed Field assessment was done for construction of the gravity flow systems serving Kasenda and Rutete sub-counties It was established the GFS were built as per designs Details of assessed WSS facilities are presented in Performance Measure 11 	2
The district has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	If contractor handed over all completed WSS facilities: score 2	 At the time of assessment, the 2017/18 WSS facilities were within defects liability period Practical completion reports (details in section that follows) for all completed WSS facilities are on file 	2

The district has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	• If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2	 The Contract Manager (DWO) certified WSS facilities upon completion – and filed practical completion reports as follows: o Construction Rweitera/Rutete GFS (by Richo Investments Ltd) – June 22, 2018 o Construction of Kasenda GFS (by Richo Investments) – April 10, 2018 o Construction of Karagura GFS (by Vijocoi Ltd) – November 9, 2017 o Rehabilitation of 11 No. point sources (by Bamuhumbu Water Constructions Ltd) – June 19, 2018 	2
The district Water depart- ment has certified and initi- ated payment for works and supplies on time Maximum 3 for this performance measure	• Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points	 From the sampled payments made during the year worth UGX 272,946,469 to various vendors here below : Vijoca Limited: Payment of construction of piped water system in Karangura Sub County, VR. No.338 & 329. Richo Investments Limited: Construction of Rwiatera piped water system in Rwaitera, Ruteete Sub County. VR.No.401. Richo Investments Limited: Construction of Kasenda Gravity Flow Scheme from Kabota Trading Centre to Rusoma Trading Centre. VR. No.370 & 362. Bamuhumbu Water Construction Co Ltd: Rehabilitation of Water facilities. VR.No.388. All these payments were made on time and mostly within a week after requisition for payment was raised. 	3

Financial management a			
The district Water department has submitted annual reports (including all quarterly reports) in time to the Plan- ning 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	The Department submitted the APR to Planner by 15th July 2018 as evidenced by a letter from the SWO to the District Planner dated 9th July 2018 submitting the Water Sector Annual Performance Report (Q4) for FY 2017/2018.	5
The District Water Department has acted on Internal Audit recommendation (if any) Maximum 5 for this performance measure	 Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 5 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0 	 Three Queries (1) Piped water in Kasenda Sub County was found to be with a low water yield. Generator was repaired and there is use of solar pump and the yields were rejuvenated. (2) Piped water in Karangura Sub County, the water catchment source in the mountains was not protected. The catchment source has now been fenced as a protective measure. (3) Water yield at Busokwa Gravity Flow scheme was not sufficient in the tap stands where no water was received. National Water and Sewage Corporation took over the facility and the water supply was boosted on all tap stands. These queries were responded too by the Water office and cleared by LGPAC as per their minutes dated 27th September 2108. 	3

The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council Maximum 6 for this performance measure	• Evidence that the 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	At the Works Committee held on 25th April 2018, the Committee discussed service delivery issues under Min. 06/04/18: Report on Kasenda – Kabata Extension". The Committee discussed the report from the field visit to assess the implementation status of the extension of water by gravity flow scheme	3
The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council Maximum 6 for this performance measure	• Evidence that the water sector committee has presented issues that require approval to Council: score 3	At the District Council meeting of 29th June 2018, it met and discussed recommendations from the Works Committee under MIN KAB.COU/205/06/18: Presentation of Sectoral Committee Recommendations on the Budget, the Committee requested Council to approve the termination by CAO of the Rwaitera Water Project.	3
The district Water department has shared information widely to the public to enhance transparency Maximum 6 points for this performance measure	• The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2.	 At the time of assessment, the Q2 release for water development (UGX 139.8 million) was on the notice board The Q2 release was dated October 8, 2018 	2

The district Water department has shared information widely to the public to enhance transparency Maximum 6 points for this performance measure	• All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2	 The details of sampled WSS projects are as follows: Public sanitation facilities in Kijura TC and Karago TC Reservoir 30m3 in Rwankenzi village, Kasenda sub-county Two Pipe Stands in Mahoma village and Kabata TC, Kasenda sub-county Intake works in Rwetera, Rutete sub-county None of the above-mentioned WSS facilities were labelled 	0
The district Water department has shared information widely to the public to enhance transparency Maximum 6 points for this performance measure	 Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2 	 At the time of assessment, the list of firms pre-qualified for water-related construction services was displayed on the LG notice board The nine firms are: Elon Ltd Pride Trading Ltd S and S General Services Ltd Richo Investments Limited Richart Partners Ltd Vijocoi Ltd Mighty Construction Ltd Damazo Ltd Bamuhumbu Water Constructions Ltd A notice dated September 27, 2018 showed Bamuhumbu Constructions Ltd as the best evaluated bidder for extension of Karagura GFS 	2

Participation of communities in WSS programmes Maximum 3 points for this performance measure	• If communities apply for water/ public sanitation facilities as per the sector critical requirements (including community contribu- tions) for the current FY: score 1	 Community applications for WSS facilities received by the LG include: o Kihembo village (Karambi subcounty): proceedings of meeting held March 15, 2018 to raise O&M funds o Rwenkubu village (Karambi subcounty): request dated June 9, 2017 with details of shallow wells due for rehabilitation o Kamabale village (Karagura subcounty): request for GFS dated October 26, 2017 	1
Participation of communities in WSS programmes Maximum 3 points for this performance measure	 Water and Sanitation Committees that are functioning evidenced by either: i) collection of O&M funds, ii(carrying out preventive mainte- nance and minor repairs, iii) facility fenced/protected, or iv) they an M&E plan for the previous FY: score 2 Note: One of parameters above is sufficient for the score. 	• All the sampled WSS facilities are fenced, indicating respective WSCs are functional	2
Social and environmenta	al safeguards		
The LG Water department has devised strategies for environmental conservation and management Maximum 4 points for this performance	• 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	• No evidence of environmental screening was provided	0

The LG Water department has devised strategies for environmental conservation and management Maximum 4 points for this performance measure	• Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1	• No evidence of follow-up with regard to environmental concerns was availed	0
The LG Water department has devised strategies for environmental conservation and management Maximum 4 points for this performance measure	 Evidence that construction and supervision contracts have clause on environmental protection: score 1 	 Contracts Kabr513/Wrks/2017- 18/005 for Rutete GFS, Kabr513/Wrks/2017-18/006 for Kasenda GFS and Kabr513/Wrks/2017-18/007 for Karagura GFS were reviewed – and provided for environmental protection The respective contractors (presented in performance measures #3 and #6) were bound by the aforesaid documents 	1
The district Water department has promoted gender equity in WSC composition. Maximum 3 points for this performance measure	• If at least 50% WSCs are women and at least one occupying a key position (chairperson, secretary or Treasurer) as per the sector critical requirements: score 3	 Two reports, one for formation, other for sensitization of WSCs were reviewed The reports dated March 5 and March 15, 2018 were both prepared by the Community Development Officer – and detail composition and positions of WSC members Of the sampled WSCs, one has a woman as chairperson, while the rest have women in treasurer and secretary roles Composition of women for all sampled WSCs meet the sector requirement of 50% 	3

Gender and special needs-sensitive sanitation facilities in public places/ RGCs provided by the Water Department. Maximum 3 points for this performance measure	 If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3 	 Kabarole LG's water department has not developed public sanitation facility (PSF) in the last two financial years, but one is planned in FY 2018/19 (at Kiburara TC) Assessed PSFs at Kijura TC and Karago TC were developed by AMREF and central government, respectively The assessed facilities are sex- separated and have adequate access for PWDs 	3
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