

## **Local Government Performance Assessment**

## Kapchorwa Municipal Council

(Vote Code: 790)

Assessment	Scores
Accountability Requirements	33%
Crosscutting Performance Measures	41%
Educational Performance Measures	42%
Health Performance Measures	42%
Water Performance Measures	0%

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 submission to confirm.	LG submitted to MoFPED Annual Performance contract for the FY 2018/19     on the 6th August 2018, which was past the due date of 1st August 2018.	No

LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY by 30th June (LG PPDA Regulations, 2006).	• From MoFPED's inventory of LG budget 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.	LG submitted to MoFPED Budget that included Procurement Plan for the FY 2018/19 on the 6th August 2018, which was past the due date of 1st August 2018.	No
Reporting: submission of ann	nual and quarterly bud	dget 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 to MoFPED the Annual Performance Report for FY 2017/18 on 3rd September 2018, which was past the due date of 31st July 2018.	No

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.

• Though the LG submitted to MoFPED the Budget Performance Reports for all four Quarters FY 2017/18 the Performance Report for Quarter 4 was submitted on 3rd September 2018, which was past the due date of 31st July 2018. The reports were submitted on the following dates:

Quarter I report: 8th/12/2017

Quarter II report: 27th/02/2018

Quarter III report: 26th/04/2018.

Audit

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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 recommended the Accounting Officer to take action in lines with applicable laws.

From MoFPED's Inventory/record of LG submissions of statements entitled "Actions to Address Internal Auditor General's findings",

#### Check:

- If LG submitted a 'Response' (and provide details), then it is compliant
- If LG did not submit a' response', then it is non-compliant
- If there is a response for all – LG is compliant
- If there are partial or not all issues responded to – LG is not compliant.

- The LG had provided information to the PS/ST on the status of implementation of Internal Auditor General and Auditor General's findings for the previous financial year 2016/17. By copy of the submission to MOFPED which was acknowledged by Directorate of Internal Audit on 12/4/2018, and by Registry on 11/4/2018 together with minute no.3/4/2018 of DPAC meeting held on 18/4/2018 titled "Examination of Auditor General's Report for the period ending 30/6/2017" confirmed that the required information was provided and in time. Also there was evidence of certified copies being distributed to the following offices:
- MOLG
- RDC
- Mayor Kapchorwa M.C
- IGG
- Town Clerk Kapchorwa

The mandatory deadline for submission was 30th April 2018 (PFMAs 11'2g). Therefore, the LG was compliant.

The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.

• The audit opinion of LG Financial Statement was not adverse or disclaimer.

Yes

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# Crosscutting Performance Measures 2018

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budge	ting 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.	<ul> <li>Though the MC Physical planning Committee was constituted in Town Clerk's letter dated 25th/10/2017, the committee lacked a substantive urban Physical Planner, physical planner in private practice and an architect. The Acting physical planner was a Senior Land Management Officer of Kapchorwa District by substantive appointment.</li> <li>The only set of minutes that was availed for review fell in period before the committee had been constituted, that is, 9-10th/5/2017. Building plans by private developers had been approved under Min. KMC/UPPC/05/05/2017 but the MC had approval of building plans for MC infrastructure projects contained in approved AWP FY 2018/19</li> <li>Though a Plan Registration book was said to be in place it was not availed for review – was said to be misplaced.</li> </ul>	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.	Evidence that district/ MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD score 1.	The MC had not submitted of minutes of Physical Planning committee to MoLHUD.	0

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

 All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0

• Though building plans had been approved in meeting of 9-10th/5/2017 e.g. Sebei Diocese Church building & offices on Kokwomurya road and a storied commercial building by Mr. Chemonges Aliphas on plot 24 Kapchorwa-Mlale road in consistence with the planned land use of Institutional and commercial, respectively, as prescribed in Kapchorwa TC detailed plan, the MC lacked a comprehensive Physical Development plan covering all the 3 MC Divisions. The MC was using the detailed plan for the then Kapchorwa Town Council (2008-2018) which covered only Central Division of the current Municipal Council leaving out East and West Divisions.

Maximum 4 points for this performance measure.

All new

 Action area plan prepared for the previous FY: score 1

or else 0

• MC had not prepared Action Area plans.

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.

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 priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2. • Report of Budget Conference for FY 2018/19 held on 14th/11/2017 identified key priorities in each sector which were captured in the AWP 2018/19 e.g. rehabilitation/construction of Administration blocks, tree planting & tree nursery establishment, Construction of Maternity wards and Health staff houses, classroom rehabilitation & construction, construction of teachers houses, sanitation facilities in schools, opening of service lanes, maintenance and rehabilitation of roads, renovation of office buildings, establishment of a livestock market, Abattoir.

It should be noted that all the Health sector capital investments in the AWP had initially been identified as unfunded priorities at the budget conference.

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 in the approved AWP FY 2018/19 had been drawn from the approved DDP 2015/16-2019/20. They included:

- Completion of Council Hall (pg. 32 of AWP, pg.153 of DDP)
- Livestock health & marketing (pg.35 of AWP, pg 168-169 of DDP)
- Construction of septic tank at Central abattoir (pg.39 of AWP, pg 169 of DDP)
- Construction of Maternity ward and Staff house at Kaplelko HCII (pg. 44-45 of AWP, pg. of DDP)
- Latrine construction in Kapchesombe, Siron, Kaminy, Kapnykew, Yuban & Elgon PS (pg. 49 of AWP, pg 184 of DDP)
- Rehabilitation of Teachers house in Kapchorwa PS. (pg. 50 of AWP, pg 184 of DDP)
- Construction of 2 classroom block at St.Paul Kapchesombe SS (pg. 51 of AWP, pg 185 of DDP)
- Maintenance and clearing of Council roads (pg. 57, 59 of AWP, pg 176-177 of DDP)
- Installation of 4 solar street light points (pg. 59 of AWP, pg 177 of DDP)

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.

- Though project profiles had been prepared they lacked budgets for environmental mitigation. Only one project, completion of Council Hall, had an earmarked 5% for this.
- MC had not discussed project profiles for FY 2018/19

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.
- Though an Annual Statistical Abstract 2017/18 (draft) with gender dis-aggregated data, e.g secondary school enrolment on pg.xi and population distribution on pg. 18, had been compiled, some data was for LLGs outside the MC e,g pg 31-32 functionality of water points by LLG. Though it was said to have been presented to TPC in meeting of 26th/01/2018 under Min. 6/TPC/26/2017 the evidence was not tenable given the inconsistency of the minute numbering and the issues discussed there in, which indicated that the minutes were for an earlier period.

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 in FY 2017/18 were derived from the AWP for the said year. They included:

- MC Office renovation, construction of main gate and flash toilet (pg. 35 of Q4/Annual report, pg. 7,26-27 AWP) [was completion of works started in FY 2016/17]
- Construction of lined VIP latrines in Kapchorwa,
   Kapchesombe, Kwoti & Siron PSs (pg. 53-54 of Q4/Annual report, pg 14, 39 AWP)
- Resealing of Chebrot road 0.4 out of 2km spent 90,606,000= (pg. 58 of Q4/Annual report, pg 15, 42 AWP)
- Routine maintenance and Periodic maintenance of urban roads (pg. 58-59 of Q4/Annual report, pg 15, 43 AWP)

Investment activities in the previous FY were implemented as per AWP.

Maximum 6 points on this performance measure.

 Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY.

o 100%: score 4

o 80-99%: score

2

o Below 80%: 0

Only 5 out of 8 investment projects (62.5%) implemented in the FY 2017/18 were completed as per workplan by end of the said FY. Projects that were completed included:

- MC Office renovation, construction of main gate and flash toilet (pg. 35 of Q4/Annual report, pg. 7,26-27 AWP)
- Periodic maintenance of 21 out of 21 km of urban roads (pg. 58-59 of Q4/Annual report, pg 15, 43 AWP) [PBS reporting tool couldn't allow for correct data capture ref. pg. 19 of Q4/Annual report]
- (3 projects) Construction of 5-stance lined VIP latrines at Kapchorwa and Kwoti PSs & 2-stance at Siron PS (pg. 53-54 of Q4/Annual report, pg 14, 39 AWP)

While the following were not completed within the said FY:

- Construction of 5-stance lined VIP latrine in Kapchesombe PS (pg. 53-54 of Q4/Annual report, pg 14, 39 AWP)
- 0.4km out of 2km on Chebrot road resealed (pg. 58 of Q4/Annual report, pg 15, 42 AWP)
- Routine maintenance of 0.8 out of 3.6 km (pg. 58-59 of Q4/Annual report, pg 15, 43 AWP)

The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects during the previous FY

Maximum 4 points on this Performance Measure.

 Evidence that all investment projects in the previous FY

were completed within approved budget – Max. 15% plus or minus of original budget: score 2 Based on the following sample (excluding roads) with a total expenditure of 135,902,000= against total budget of 135,902,000=, representing 0% variance, projects implemented in the FY 2017/18 were completed within approved budget (0% variance):

- MC Office renovation, construction of main gate and flash toilet spent 81,383,000= against budget of 81,383,000= (pg.34-35 of Q4/Annual report, pg. 7,26-27 AWP)
- Construction of 5-stance lined VIP latrines at Kapchorwa & Kwoti PSs and 2-stance latrine at Siron PS spent 54,519,000= against budget of 54,519,000= (pg. 53-54 of Q4/Annual report, pg 14, 39 AWP)

The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects during the previous FY

Maximum 4 points on this Performance Measure.

• Evidence that the LG has budgeted and spent at least 80% of the O&M budget for infrastructure in the previous FY: score 2

MC had not conducted a systematic review assets and infrastructure that required O&M.

No O&M of infrastructure (except for roads) was planned for and implemented in FY 2017/18. Office renovation stated on pg 26-27 of AWP and pg 34-35 of Q4/Annual report was clarified as completion of works started in FY 2016/17.

No O&M activities were planned and implemented for infrastructure under Health and Education in FY 2017/18.

Human Resource Management

LG has substantively recruited and appraised all Heads of Departments  Maximum 5 points on this Performance Measure.	• Evidence that the LG has filled all HoDs positions substantively: score 3	There are (7) positions of HoDs as per the approved structure of Kapchorwa MC, dated 29/6/17. Only 14% (1 out of 7) positions of HoDs had been substantively filled. The Principal Education Officer (PEO) was appointed under DSC Min No.15/2017 (i). Five positions are filled with staff assigned extra duties including Municipal Engineer, Principal Finance Officer, Principal CDO, Principal Commercial Officer, and Medical Officer of Health Services. The position of Deputy TC is not provided on the approved structure of MC. It was reported that key positions are not yet filled because of transitional challenges-breaking away from the DLG. The MC plans to fill most of the positions in this FY 2018/19	0
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% (All the 7) HoDs (substantive and administratively assigned duties) had been appraised for FY 2017/18. The performance reports for PEO, ME, PFO, PCO, MO, and PCDO were on file and duly filled and signed. For example, the annual performance report for PEO was signed by TC on 27/6/18 and signed by TC. In addition the signed copy of the performance agreement form for FY 2017/18 was on file.	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 staff submitted for recruitment have been considered: score 2	None (0%) of 14 submitted posts were considered by DSC. The TC submitted (14) posts to DSC for filling in FY 2017/18 as per the clearance letter for recruitment by PS, MoPS dated 3/11/17, and subsequent submission letters to Sec/DSC dated between 11/12/17 and 7/5/18 respectively. However, there was no minutes of DSC to prove that the commission considered all posts submitted for recruitment in FY 2017/18. It was noted that DSC was non-functional from June 2017-February 2018 due to lack of quorum-the term of office for two members expired in May 2017.	0

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	None (0%) of (4) staff submitted for confirmation had been considered by DSC. The TC submitted (4) staff for confirmation in FY 2017/18 as per submission letters dated 28/7/17 and 18/4/18 respectively. The chairperson of the DSC acted on all the (4) submissions but there was no minutes of the DSC and this was confirmed in writing by Secretary DSC on 13/9/18	0
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 submissions on disciplinary cases were made to DSC by Kapchorwa MC for the period under review (FY 2017/18). This was confirmed in writing by –Mr.Chemutai Louis (Ag.DSC) on 13/09/18.	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	None (0%) of 14 posts submitted for filling had been considered by DSC in FY 2017/18. The recruitment process was still pending at DSC by the time of the assessment. It was noted that DSC was non-functional for the period June 2017 to February 2018 due to lack of quorum.	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	From the retired list for FY 2017/18, it was found that 60% (3 out of 5) staff who retired accessed the pension payroll not later than two months after retirement. Refer to IPPS nos.597794-retired on 24/11/17 and accessed in Dec 2017; 850343-retired on 1/5/18 and accessed in June 2018; and 520480-retired on 5/1/18 and accessed in March 2018.	0

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 LG had decreased LG own source local revenues from shs 147,094,053 in the FY 2016/2017 to shs 60,525,075 in the FY 2017/2018, down by shs 86,568,978 representing a decrease of is 58.86% of the year 2016/2017.

This percentage is below the minimum increase of 5% required and recommended by the manual.

Reasons given by LG for poor collection of OSR were:;

- Creation of Kapchorwa Municipality has reduced the sources of revenue from the sub-counties taken over.
- Government policy on management of taxi parks was given to taxi operators.
- Property tax, being a new tax, people were not willing to pay.
- Staffing level in the law enforcement department is not adequate.
- Out of the 3 divisions (Central, East and West), only Central has the potential of paying taxes.

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.

The LG local revenue collection ratio exceeded the acceptable variance of +/- 10% against the budget as required by the manual .This is demonstrated below:

Total Local Revenue Planned/Budgeted for FY 2017/2018 was Shs 121,636,000 (original budget), whereas the total actual local revenue collected was shs 60,525,075, representing a percentage of local revenue collected against planned for the FY 2017/2018 of 49.75% i.e. (60,525,075/121,636,,000)x100%=49.75%).

The uncollected portion was shs 61,110,925 representing -50.25% of the budget, therefore, exceeding the acceptable variance of +/- 10%.

0

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 The District had not remitted the mandatory LLG share of local revenues, instead there was evidence of remittance of the mandatory HLG share of local revenues collected at the LLG.

Examples of remittances from LLG to HLG were as follows:

- On 1/6/2018, Central Division remitted shs 2,434,322 on general receipt no.0373291, cheque no (not recorded) and was banked in Finance Trust Bank on 3/5/2018.
- On 1/6/2018, Central Division remitted shs 2,434,322 on receipt no.0373291, cheque no,194 of Finance Trust Bank and was banked in Finance Trust Bank on 1/6/2018.
- On 18/4/2018, Central Division remitted shs 1,000,000 on general receipt no.0373285, cheque no,165 of Finance Trust Bank and was banked in Finance Trust Bank on 18/4/2018.
- On 16/5/2018, Central Division remitted shs 2,000,000 on general receipt no.0373286, cheque no,171 of Finance Trust Bank and was banked in Finance Trust Bank on 16/5/2018.

ust Bank and was banked in Finance Trust Bank on 16/5/2018.

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

The total council expenditures on allowances and emoluments (including from all sources), exceeded the mandatory 20% of the LG own source revenue collected as demonstrated below:

Total expenditure on council allowances and emoluments during FY 2017/2018 was Shs162,380,000, whereas total actual local revenue collected was only shs 60,525,075, Therefore, total expenditure on council allowances & emoluments of shs 162,380,000 represented 268% of OSR used .This was very unrealistic and unlikely.

Procurement and 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 The position of Procurement Officer and Assistant Procurement Officer is not substantively filled at the Municipality

The Municipality has an acting Procurement Officer (seconded to the Municipality from Kapchorwa District) and an Ag Assistant Procurement Officer.

Kitiyo Benard- Ag Procurement Officer (Substantive Procurement Officer of Kapchorwa DLG recruited under Min No.32/2017(b). Was seconded to Kapchorwa Municipality on 20/1/2017, his secondment was extended on 16th August 2017 and has been extended again to November 2018 (see communication dated 11th September 2018 and referenced CR/160/1)

Adongo Dorcus Brown- Ag Assistant Procurement Officer, (Substantively Stores Assistant, assigned Ag Assistant Procurement Officer with effect from July 2018. The letter of assignment is referenced KMC/200 and dated 2nd July 2018

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 In the previous FY, TEC met on 7/9/2017, 12/1/2018, 16/1/2018, 15/6/2018, 27/6/2018 produced reports and shared them with the Contracts Committee

When Contracts Committee met on 8/9/2017, 16/1/2018, and 18/6/2018, their agenda items included; Approval of Evaluation reports/ Contract award decisions. Under this agenda, TEC reports were reviewed and acted upon

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

Maximum 4 points on this performance measure.

 Evidence that the Contracts

Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1

There is evidence that the Contracts Committee considered recommendations of TEC. For instance;

The Contracts Committee held on 8/9/2017 recommended firms to be listed as providers for the FY 2017/2018. These were previously proposed by TEC at their meeting of 7/9/2017

Also in the Contracts Committee meeting of 8/9/2017, the construction of Kapchorwa Municipal Council was awarded to Link Investments LTD at a contract sum of UGX 41,851,936/= as proposed by TEC in their meeting of 7/9/2017

Then in the Contracts Committee meeting of 16/1/2018, the construction of a 5 Stance VIP latrine at Kapchesombe P/S in East Division was awarded to Dean Engineering CO.LTD at UGX 18,088,875/= at the recommendation of TEC at their meeting of 12/1/2018

Also the Contracts Committee at their meeting of 16/1/2018 awarded the construction of the 2 stance VIP latrine at Siron P/S in the Eastern Division to M/S Calm Rock LTD at a Contract sum of 8,338,785/= as per the recommendation of TEC at their meeting of 12/1/2018

Then, the Contracts Committee at their meeting of 18/6/2018, awarded the contract for spring protection of Chebany Spring in Kabat Ward, West Division to Rugong LTD at UGX 2,721,00/= as proposed by the TEC that sat on 15/6/2018

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

Maximum 2 points on this performance measure.

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

the previous FY: score 2

The Procurement Plan for the Municipality in place and submitted to MOFPED on line together with the Performance Contract, AWP, Pension list, staff list on 6/8/2018

The AWP and the Procurement Plan have discrepancies. For instance, the completion of the Council Hall appears in the AWP and yet it does not appear as such in the Procurement Plan and is deemed to have been completed

Also the protection of springs in the East and West Division i.e. Onio, Bonio, Ndap, Loch not captured in the procurement plan. The Ag Procurement Officer indicated that actually the protection of Ndap and Bonio were completed in the previous FY.

The Municipality adhered to the Procurement Plan for the FY 2017/2018. Investments of 2017/2018 are captured in the Contracts register of 2017/2018

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

At the time of assessment, the LG had not prepared a single bid document for planned infrastructure projects

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 Municipality has an updated contract register endorsed by the Ag Procurement Officer Kitiyo Benard. It has a record of all procurements made in 2017/2018 captured under No, Item description, Issue Date, Receipt date, Opening date, Delivery date, Name of Supplier/Service Provider, Amount (UGX)

The procurement activity files were complete as is required by the key records to check on the procurement file designed by PPDA, April 2008

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

Maximum 6 points on this performance measure.

 For previous FY, evidence that the LG has adhered with

procurement thresholds (sample 5 projects):

score 2.

For the previous FY, the LG adhered with procurement thresholds i.e. for procurement's over 50m, the LG used the Open Bidding method and the Selective Bidding Method for procurement's below 50m. For instance

- (a) Completion of the Council Hall was awarded at 41,004,046/= under open domestic bidding, (although the estimate was below 50m, the LG took a decision to open up the procurement of this investment) the advert of this procurement was posted in the New Vision of 11th August 2017
- (b) Construction of 2 stance toilet at Siron P/S was awarded at 8,338,785/= under selective bidding;
- (c) Construction of a cliff ladder in Kululu Ward/ West Division was awarded at 8,826,500/= under selective bidding;
- (d) The full rehabilitation of Buyoswo spring was awarded at 2,502,050/= under selective bidding;
- (e) The construction of a 5 stance latrine at Kapchorwa P/S was awarded at 17,896,725/= under selective bidding

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 Works projects were appropriately certified based on technical supervision. For instance;

- (a) The construction of a 5 stance latrine at Kapchorwa was certified twice. The interim certificate No.1 worth 8,150,940 is dated 10/4/2018, while certificate No.2 worth 8,126,620/= is dated 20/6/2018;
- (b) The construction of a cliff ladder in Kululu Ward/ West Division was certified once. The certificate worth 7,467,219/= is dated 23rd April, 2018;
- (c) The construction of a 2 stance toilet at Siron P/S was certified once. The certificate worth 7,928,580/= is dated 7th May 2018
- (d) The construction of the Council Hall was certified twice. The interim certificate No.1 was worth 23,404,000/= while certificate No.2 was worth 12,860,000/=

The LG has certified and provided detailed project information on all investments

Maximum 4 points on this performance measure

• Evidence that all works projects 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

At the time of assessment, the LG had not started the implementation of any project for the FY 2018/2019

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### Financial management

The LG makes monthly and up to-date bank reconciliations

Maximum 4 points on this performance measure.

• Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4

The LG failed to make monthly bank reconciliations. Our attempt to review monthly bank reconciliations (generated by IFMS) failed because there were no hard copies on file, neither could we access the soft copies .The manual demanded that , the LG should have made monthly bank reconciliations up-to-date at the time of assessment .

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.

The LG certified timely payments to suppliers.

Examples of payments verified included;

(1) Procurement ref: no. KMC 790/WRKS/17-18/00001, for completion of council hall by Link Investments, contract price shs 41,851,936, Payment voucher No. PV-EFT 18335542, dated 25/6/2018 for shs 21,947,466, completion date 12/6/2018, certified by CAO/CFO on 18/6/2018.

Duration between completion and certification for payment by CAO was 6 days i.e 12/6/2018 to 18/6/2018. The mandatory requirement is that the delay period should not exceed 2 months, therefore, certification for payment was timely

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(2) Payment voucher No. PV-16292346, dated 1/2/2018, LPO. 0773850/51 dated 20/12/2018 of shs 158,343, receipt no. 044 dated 28/12/2018, in the names of Favour Documentation Kapchorwa, for supply of assorted stationary, certified by CAO/CFO on 28/12/2018.

Duration between delivery and certification was 8 days i.e 20/12/2017 to 28/12/2017. The mandatory requirement is that the delay period should not exceed 2 months, therefore, certification for payment was timely

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 LG had a substantive senior internal auditor, as per the DSC appointment minute ref: 85/2005, salary scale U 3, effective date of appointment 29/12/2005 in the names of YESHO JIMMY CHEMTAI, for the post of Senior Internal Auditor, appointment letter ref: TG/159,

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 had produced all quarterly Internal Audit Reports for FY 2017/2018 as indicated below:  • Quarter 1 internal audit report was dated 10/10/2017.  • Quarter 2 internal audit report was dated 31/1/2018  • Quarter 3 internal audit report was dated 2/4/2018  • Quarter 4 internal audit report was dated 3/8/2018.	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 LG had provided information to the council and LG PAC on the status of implementation of internal audit findings, however, all the quarterly internal audit reports submitted to PAC had never been discussed, therefore, issues were yet to be raised by LG PAC for implementation and follow-up. The internal Auditor Mr Yesho Jimmy Chemtai informed us that all reports will be jointly discussed the week following this assessment, but there was no evidence to support the allegation	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 internal audit reports for the previous FY 2017/2018 were submitted to LG Accounting Officer, LG PAC, but LG PAC had not reviewed them and followed up. The reports were submitted to LG PAC on the dates indicated below:  • Quarter 1 internal audit report was submitted on 10/9/2017.  • Quarter 2 internal audit report was submitted on 10/9/2018  • Quarter 3 internal audit report was submitted on 10/9/2018  • Quarter 4 internal audit report was submitted on 10/9/2018	0

The LG maintains a detailed and updated assets register Maximum 4 points on this performance measure.	Evidence that the LG maintains an updated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4	The LG had not maintained any assets register at all.	0
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 LG Financial Statement 2017/2018 was unqualified opinion.	4
Governance, ov	ersight, transparency and	d accountability	
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	<ul> <li>Review of six (6) sets of minutes of Municipal Council for 30th/08/2017, 3rd/10/2017, 31st/10/2017, 21st/12/2017, 15th/03/2018 and 25th/05/2018 affirmed that though Council had considered some service delivery issues, Council had not however discussed performance assessment results for FY 2017/18 and LG PAC reports.</li> <li>Some of the issues discussed included:</li> <li>30th/08/2017: discussed and approved committee reports under Min. KMC/07/08/2017 including for Gender and Social Services recommended construction of latrine in Tigrim HC II (lacked one)</li> <li>3rd/10/2017 –recommended Mr. Kitiyo Paddy Kamunyeke for District Council approval as member of District service Commission under Min.KMC/03/10/2017.</li> </ul>	0

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.	• MC had not designated a person to coordinate response to feedback (grievance/complaints) as at time of assessment.  Nonetheless evidence of response to complaints was reviewed e.g. a community meeting had been held on 15th/02/2018 and another by MC leaders on 28th/02/2018 in response to a complaint to Town Clerk by Zubeta Yakwobei on hostile actions of officers dated 15th/01/2018. Another land related complaint addressed to Town clerk by Karenget Aksoferi Kulany on 9th/01/2018 which led to claim for damages worth 1,500,000= was forwarded as a pending issue by the out-going Town Clerk to the in-coming Town Clerk in his hand over report (pg.3-4) dated 16th/07/2018.	0
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	MC had not specified, displayed and made publically available a system for recording, investigating and responding to complaints from the citizens at the time of assessment.	0
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	Payroll and Pensioner schedule August 2018 had been displayed at the MC headquarters – outside HR office.	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.	MC had not displayed the Procurement plan for the current FY 2018/19 and awarded contracts. Instead only the Procurement plan for previous FY 2017/18 and awarded contracts had been displayed.	0
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.	MC had not published assessment results for FY 2017/18 and their implications. No such information had been posted on the noticeboards at the MC headquarters.	0
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	Although communication of guidelines and circulars was made to HoDs and LLGs in letters by Town Clerk dated 21st/02/2018, 15th/02/2018 and 6th/3/2018, it was not evident that they had been explained.	0

points on this performance measure.

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. For the current FY, the planned activities for the LG include; Functional Adult Literacy, provision of children and youth services, FGM/GBV Campaigns, training MTPC and Political leaders in gender and development, supporting women and youth councils

In the financial statement for the FY ended 30th June endorsed by the Town Clerk on 29th August 2018, the approved budget for the department for Community Based Services was 262,682,679/=. The funds released against the approved budget totalled 249,237,263/= which translates into 95% of the budget implemented.

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

At the time of assessment, only a few of the environmental screening forms were seen. For instance the screening form and the ESMP for the cliff ladder in Kululu Ward/ West Division dated 22/5/2017 and 23/5/2017 respectively.

Most of the screening forms for the projects were not availed

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	There was no evidence that the LG had integrated environmental and social management, health and safety into the bid documents	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 projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc): score 1	The LG indicated that the process of securing Government land had started. Meanwhile, projects being implemented on church, community and or private land did not have any type of documentation spelling out the terms on the use of that land by the LG	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	Completed projects have environmental certification endorsed by the environment officer from the district, Meanwhile, the CDO did not endorse the form for any of the 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 the contract payment certificated includes prior environmental and social clearance (new one): Score 1	There was no evidence of environmental and social clearance in this regard	0

LG has established and maintains a functional system and social impact and land acquisition  Maximum 6 points on this performance measure  • Evidence that environmental officer and CDO we and CDO monthly report, includes a) completed checklists, b) deviations observed with pictures, c) corrective actions taken. Score: 1	-
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### Education Performance Measures 2018

Summary of requirements	Definition of compliance	Compliance justification	Score	
Human resource pla	uman resource planning 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 Performance Contract for Kapchorwa Municipal Council FY 2018/2019, provided a budget of UGX 1,637,180,000 for 248 teachers in 16 primary schools of the municipality. Therefore, the Approved wage bill for teachers in FY 2018/19 for the municipal council can cater for a minimum of 8 teachers with a head teacher inclusive.	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	The staff list dated 11th September 2018 indicates that the MC has deployed a minimum of 7 teachers and head teacher to each of the 15 schools. Currently, there are 248 teachers in 16 primary schools. The school with least number of teachers is Kapnyikew primary school.	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	Kapchorwa Municipal Council has a total ceiling of 256 teachers, in Staff Establishment and Recruitment Plan FY 2018/19. Of the 256 primary school teachers, 248 (97%) are in post with a wage bill provision.	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	On 24th may 2017, Ag TC submitted the approved staff structure for Kapchorwa Municipal Council proposing one position of "Senior Inspector of schools", which is not substantively filled.	0
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 Staff and establishment and Recruitment Plan FY 2018/19, was submitted to HRM to fill the following positions in primary schools: 1 Deputy Head teacher and 256 Educational Assistants, of which 6 are to be, filled FY 2018/19. 248 teachers were to transfer from the payroll of Kapchorwa District LG to Municipality.	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 Staff and establishment and Recruitment Plan FY 2018/19, has been submitted to HRM to fill 1 position of senior Inspector of Schools as provided in the structure.	2
Monitoring and Inspection			

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 the inspectors of schools had been appraised. The education department approved structure dated 29/6/17 provides for a Senior Inspector of schools. The position is not substantively filled. However the annual performance report (2017/18) for the Ag.Senior Inspector of schools (Mr.Siwa A. Dan-DSC Min.no.56/2011) was on file, duly filled and signed on 26/6/18 by ATC

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

- Primary school head teachers o 90 - 100%: score 3
- o 70% and 89%: score
- o Below 70%: score 0

87.5% (14 out of 16) head teachers had been appraised for calendar year 2017.

Kapchorwa MC has (16) Government aided Primary Schools with (12) substantively appointed Head Teachers. The annual performance appraisal reports for the (14) primary head teachers/ Care Takers were on file. For example:

- a) HT-Ngambirir P/S appraised on 10/12/2017
- b) HT-Kapteret P/S appraised on 7/12/17
- c) HT-Teryet P/S appraised on 15/12/17
- d) HT-Elgon P/S appraised on 13/12/17
- e) Etc.

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

The LG Education department communicated circulars, guidelines and policies issued. The received circulars included:

- (a) Circular on 24th October 2017 about guidelines on school charges and cautioning headteachers and school proprietors not to overcharge parents on school fees.
- (b) Circular on 26th March 2018 enforcing closure of illegal schools. Action meeting was held on 29th-May-2018, where the MEO reported 7 unlicensed schools and on 31st -May 2018, the schools were closed with support from the RDC office.
- (c) Circular No. 8/2017 cautioning schools on adherence to school calendars.
- (d) circular No 16th October 2017 cautioning the schools on over testing of learners

The headteachers of the sample schools had copies of most these circular, but they were aware of the event therein mentioned.

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

According to the DEO, the received circulars, guidelines and policies issues are usually put on the notice boards or/and communicated to headteachers in meeting. For example on 23rd - August-2018, in a stakeholders' meeting, where headteachers in private and government schools attended to over testing the learners and adherence to school calender

The LG Education De- partment has effectively inspected all registered primary schools2

Maximum 12 for this performance measure

 Evidence that all licenced or registered schools have been inspected at least once per term and reports produced:

o 100% - score 12

o 90 to 99% - score 10

o 80 to 89% - score 8

o 70 to 79% - score 6

o 60 to 69% - score 3

o 50 to 59 % score 1

o Below 50% score 0.

The number of schools inspected per were as follows:

Term 1-2018 ( 22nd -March - 2018) 37 out of 49 schools

Term III-2017 (September - Government) - 43 out of 49 schools

Term II-2018 - 25 out of 49 schools

(105/147)\*100 = 71.4%

In the selected schools, there was evidence of school inspection in:

(1) Kapchorwa PS, 12/02/2018,(33.3%%)

(2) Tuban PS , on 28th /02/2018 (33.3%

(3) Testimony PS, no evidence of inspection (0%)

(4) Alpha PS, 22/03/2018 and 16th /11/2017 (67%)

(5) Kapteret PS, 9th -7 - 2018 (0

Inspection coverage in sampled schools = (33.3 + 33.3 + 0 + 33.3 + 0 + 67)/5 = 27%

Average inspection coverage = (71.4 + 33.4)/2 = 52.4%

LG Education
department has
discussed the
results/ reports of
school inspections, used them to
make
recommendations
for corrective
actions and followed
recommendations

Maximum 10 for this performance measure

• Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4

The education department discussed the inspection reports to make recommendation. For example, term I 2018 inspection report was discussed on 22/3/2018. The keys in the reports were teachers' inadequate preparation, lack of feeding pupils in schools and absenteeism of pupils.

The department recommended that LG should have a budget provision to increase on latrine coverage.

They noted that pupils' absenteeism was rampant due to lack of midday meals, and resolved to forward issue to council sensitize communities to feed the children at schools.

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	There was no evidence that school inspection reports were sent to DES	0
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.	In the visit to Kapchorwa primary school, the inspectors had cautioned the school about inadequacy latrine coverage. This issue was discussed by the SMC of Kapchorwa primary school on 27th /10/2017and resolved to mobilize resources to construct new latrine block. The incomplete structure of 5 stances was under construction by the time of assessment.  In all schools, some parents had started to contribute between 5 kg and 10kg of maize, 5kg of beans and sh. 2000/= and 4000/= to feed their children.	4

department has submit-submitted accurate/consistent and inaccurate with EMIS example, taking note of P1 of all the 16 primary schools PBS recorded 1618 w	department has submitted accurate/consistent reports/date for school lists and enrolment as has accurate accurate accurate.	vidence that the LG is submitted curate/consistent ta: List of schools which is consistent with both all S reports and PBS: Dre 5	The list of 16 government-aided primary schools at the office of the DEO was accurate and consistent with that of EMIS report from national level.	5
school lists and enrolment as  • Enrolment data for all schools which is consistent with EMIS  per formats  • Enrolment data for all schools which is consistent with EMIS  report and PRS: score 5	department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES  Maximum 10 for this performance	s submit- I accurate/consistent ta: nrolment data for all nools which is nsistent with EMIS	PBS data of school enrolment in some schools was inconsistent and inaccurate with EMIS reports. For example, taking note of P1 of all the 16 government primary schools PBS recorded 1618 while EMIS recorded 1689. In P2, PBS data 1797 while EMIS report indicated 1454 and in P7, the PBS recorded 2064 pupils while EMIS recorded 1295 pupils. Although, in all the visited 4 sampled schools; Kapchorwa P/S, Tuban P/S, Kapteret P/S, Testimony Christian P/S, the data was consistent with EMIS national data.	0

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
- Review of three (3) sets of minutes of the Gender and Social Services Committee of 28th/08/2017, 19th/10/2017 and 13th/12/2017 affirmed that though some service delivery issues had been considered, the Committee had not discussed performance assessment results for FY 2017/18 and LG PAC reports. Examples of issues discussed included:
- In meeting of 13th/12/2017 Education department report was considered under Min. 4/12/2017 discussed school supervision and inspection report and planned activities e.g. construction of latrines in Kwoti, Kapchesombe, Kapchorwa and Siron PSs.

Note: Two additional Committee meetings had been held on 20th/02/2018 and 16th/05/2018 but Minutes were still in draft form.

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

• Gender and Social Services Committee report and recommendations were presented to Council for approval under Min.KMC/05/10/2017 of 31st/10/2017 e.g. Town Clerk was to follow up emptying of the filled up latrines in Kapchorwa P.S. and Principal Education Officer was to sensitize stakeholders on fee of 10,400 charged in primary schools.

Primary schools in a LG have functional SMCs

Maximum 5 for this performance measure

Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO/ MEO)

- 100% schools: score 5
- 80 to 99% schools: score 3
- Below 80 % schools: score 0

There was no evidence to establish if all primary schools had SMCs since the LG education department had no school files, and none of the schools submitted minutes to the MEO.

0

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	There was no evidence that LG displayed non-recruitment grants for all schools.	0
Procurement and con	ntract management		
The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements, to the Procurement Unit that cover all items in the approved Sector annual work plan and budget  Maximum 4 for this performance measure	Evidence that the sector has submitted procurement input to Procurement Unit that covers all investment items in the approved Sector annual work plan and budget on time by April 30: score 4	The Education Sector has not submitted any procurement input for investments in the Sector citing late approval of Budget (Municipality budget approved in August 2018)	0

Financial management and reporting

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. • The LG Education department timely certified and recommended suppliers for payment as per the contract terms and conditions.

Examples of contracts verified included:

- (1)-Procurement Ref:Kmc 790/wrks/17-18/00005 dated 3/1/2018, a contract price of shs 17,896,725, date of completion and requisition for payment 15/6/2018, date of payment 28/6/2018,payment voucher no.18335537, amount paid shs 6,403,553,.Delay period was 5 days i.e (15/6/2018 up-to 20/6/2018).The delay period is within the recommended 2 months limit, therefore, payment was timely,
- (2)- Procurement Ref: Kmc 790/wrks/17-18/00014, by Spah Investments & construction Ltd, for construction of 5 stance lined latrine, contract price shs 17,172,540, completed and requisitioned for payment on 13/6/2018, certified for payment by CAO on 18/6/2018, payment voucher no.18335539 of shs 15,455,286 net of wht. Delay period 5 days i.e (13/6/2018 up-to 18/6/2018). The delay period is within the recommended 2 months limit, therefore, payment was timely,

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

• PBS system administrator messages indicated that though quarter I-III reports had been submitted on time by Municipal Education department to Planning unit for consolidation, the quarter IV/Annual performance report was submitted past the deadline of mid-July as follows:

Quarter I report: 7th/12/2017

Quarter II report: 27th/02/2018

Quarter III report: 30th/03/2018

Quarter IV/Annual report: 3rd/09/2018

LG Education has acted on Internal Audit recommendation (if any)

Maximum 4 for this performance measure

 Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year

o If sector has no audit query

score 4

o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2

o If all queries are not respond-

ed to score 0

The sector had not provided information to the internal audit on the status of implementation of all audit findings for the year 2017/18.

## Social and environmental 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 There is no deliberate engagement of the gender focal point and the education department to support the senior woman and man teachers. No clear guideline for girls and boys to handle hygiene, reproductive health and life skills although in some sampled schools visited indicate that NGO such as Better Life for Girls by Straight Talk Foundation, Teacher Action for Girls by UNATO have engaged SWT and SMT teachers to manage gender issues

LG Education Department has disseminated and promoted adherence to gender guidelines Maximum 5 points for this performance measure	• Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2	There is no deliberate engagement of the gender focal point and the Education department as far as generating, issuing and explaining guidelines on how to manage sanitation for girls and PWDs in primary schools is concerned. No such guidelines were seen at the time of assessment.	0
LG Education Department has disseminated and promoted adherence to gender guidelines Maximum 5 points for this performance measure	Evidence that the School Management Committee meets the guideline on gender composition: score 1	The requirement of the gender composition as per the 2nd Schedule of the Education Act 2008 is at least 2 women on the Foundation Body which has a total of 6 people. There was no evidence that LG Education has SMCs for each school. Tuban P/S — with acting headteachers had less knowledge about the SMC guidelines, especially the number of women expected on the committee and Kapchorwa P/S did had only one woman on the SMC instead of the 2 woman in the act. Kabore P/S did not indicate a clear SMC based on the guideline at the time of assessment.	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	• 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:	There is no evidence of issue of guidelines on environmental management to the schools by the Education Department in collaboration with the Environment Department	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	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	The school infrastructure projects that were implemented last FY are;  (a) Construction of 5 stance VIP latrine at Kapchorwa P/S (Central Division)  (b) Construction of 5 stance VIP latrine at Kapchesombe P/S (East Division)  (c) Construction of 2 Stance VIP latrine at Siron P/S (East Division)  (d) Construction of 5 stance VIP latrine at Kwoti P/S (East Division)  No screening form was availed for any of these investments at the time of assessment	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	There was no single report to indicate that the environmental and community development officer had made site visits at the education investments to check whether mitigation plans are complied with	0

## Health Performance Measures 2018

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning	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 Performance contract 2018/19 FY indicates the PHC wage bill provision of UGX 393,572,000 and the wage bill for staff in post is UGX 370,468,440 as per the staff list leaving a balance of UGX 23,103,560. From the approved work plan 2018/19, the filled posts are 65% of approved positions in the staff structure.	4
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	No evidence of submission of a recruitment plan of file for 2018/19 FY. Recruitment request for 2017/18 FY dated 3/8/2017 is still pending at the DSC without being handled.	0

Maximum 8 points for

The Local Government

Health department has

across health facilities

and in accordance with

the staff lists submitted

together with the budget

deployed health workers

Evidence that the all health facilities in-charges have been appraised during the previous FY:

o 100%: score 8

o 70 - 99%: score 4

Below 70%: score 0

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

Maximum 4 points for this performance measure

in the current FY.

Monitoring and Supervision

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

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 on file for a meeting that explained any policies, guidelines to lower facilities 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 Municipality has no Hospital and no HCIV. This implies that the MHT did not fail their duty to supervise hence cannot be penalised.	3
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 supervised lower level health facilities within the previous FY:  If 100% supervised: score 3  80 - 99% of the health facilities: score 2  60% - 79% of the health facilities: score 1  Less than 60% of the health facilities: score 0	Supervision reports for quarters covering all four facilities were on file e.g. reports dated 9/9/2017, 2/3/2018 and 22/6/2018. In addition, integrated support supervision was done with DHOs office as per the log books obtained at the facilities.	3

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  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 recommendations are followed nor propt/minutes on action undertaken. In any case there was discussion conducted.  At the time of assessment, there were no report/minutes on action undertaken. In any case there was discussion conducted.  The MC still submits data through the District system for its health facilities. HMIS forms 105 and 108 for July 2018 were submitted through DHIS2 and MTRAC online systems (100%) and hard copies for August exist at DHO's office from the three (3) health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10	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	At the time of assessment, there was no report/minutes where support supervision was discussed and recommendations made	0
<ul> <li>Evidence that the LG has department has submitted accurate/ consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH</li> <li>Evidence that the LG has submits data through the District system for its health facilities. HMIS forms 105 and 108 for July 2018 were submitted through DHIS2 and MTRAC online systems (100%) and hard copies for August exist at DHO's office from the three (3) health facilities receiving PHC funds under the MC. The list of facilities is consistent with PBS (</li> </ul>	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	mendations are followed  – up and specific activities undertaken for correction:	report/minutes on action undertaken. In	0
Maximum 10 for this performance measure  Governance, oversight, transparency and accountability	department has submitted accurate/ consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH  Maximum 10 for this performance measure	submitted accurate/consistent data regarding:  o List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10	District system for its health facilities. HMIS forms 105 and 108 for July 2018 were submitted through DHIS2 and MTRAC online systems (100%) and hard copies for August exist at DHO's office from the three (3) health facilities receiving PHC funds under the MC. The list of facilities is consistent with PBS (	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
- Review of three (3) sets of minutes of the Gender and Social Services Committee of 28th/08/2017, 19th/10/2017 and 13th/12/2017 affirmed that though some service delivery issues had been considered, the Committee had not discussed performance assessment results for FY 2017/18 and LG PAC reports. Examples of issues discussed included:
- In meeting of 28th/08/2017 Qtr 4 report for FY 2016/17 & workplan Qtr 1 for FY 2017/18 –health department under Min. SSC/03/08/2017 and SSC/04/08/2017 lack of latrine in Tigrim HC II, and Kwoti and Tigrim HC HCs were not getting PHC funding thus implementation of activities was constrained.

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

- Evidence that the health sector committee has presented issues that require approval to Council: score 2
- Gender and Social Services Committee report and recommendations were presented for Council approval in meeting of 30th/08/2017 under Min. KMC/07/08/2017 e.g construction of latrine in Tigrim HC II since it lacked a functional one.

Maximum 4 for this performance measure

Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discus- sions of budget and resource issues):

Maximum 6 points

The Health Unit

Committees and Hospital

operational/functioning

Management

Board are

- If 100% of randomly sampled facilities: score 6
- If 80-99 %: score 4
- If 70-79: %: score 2
- If less than 70%: score 0

None of the four (4) health facilities in the MC had all the four mandatory quarterly meetings. Kokwomurya HCII, Tigrim HCII, Tegres HCIII held two meetings each while Kapleiko HCII held three during the previous FY.

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	No evidence of notices on health facilities receiving PHC non-wage were displayed on the notice board. The LG has no functional website.	0
Procurement and contract	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 projects were captured in the District procurement plan as per the performance contract 2018/19 FY. However, there was no letter of submission on file.	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.	No evidence of submission of PP form1 on file	0

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.	The DHO had no contracts under health during the previous FY 2017/18. Therefore, there was nothing to certify as far as contracts were concerned.	4
Financial management ar	nd reporting		
The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit  Maximum 4 for this performance measure	Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4	PBS system administrator messages indicated that though quarter I-III reports had been submitted on time by Municipal Health department to Planning unit for consolidation, the quarter IV/Annual performance report was submitted past the deadline of mid-July as follows:  Quarter I report: 7th/12/2017  Quarter II report: 27th/02/2018  Quarter III report: 30th/03/2018  Quarter IV/Annual report: 3rd/09/2018	0
LG Health department has acted on Internal Audit recommendation (if any)  Maximum 4 for this performance measure	Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year  If sector has no audit query: Score 4  If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: Score 2 points  If all queries are not responded to Score 0	The health sector did not have audit queries during the previous FY 2017/18. No information therefore, was required on status of implementation on audit findings.	4

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	Three (3) out of the Four (4) health facilities in the MC met the gender requirement of 30% females on the HUMC i.e. 75%. They are; Kokwomurya HCII-3 females out of 6 i.e 50%, Tigrim HCII - 2 females out of 5 i.e 40% and Kapleiko HCII -3 females out of 6 i.e. 50%. Only one (1); Tegres HCIII has two females out of 8 members on the HUMC i.e 25%.	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.	Two (2) out of four (4) health facilities in the MC (i.e Tigrim HCII, and Kapleiko HCII) did not have the sanitation facilities (pit latrines) clearly labelled for males and females. The other two had. Sanitation guidelines were not available.	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	No evidence of environmental screening form on file.	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	No evidence of site visit reports for the project on file.	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.

All the four (4) health facilities in the municipality (Kokwomurya HCII, Tigrim HCII, Tegres HCIII and Kapleiko HCII) had medical waste management facilities in form of charts for segregation and bins of different colours.

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution	1		
The DWO has targeted allocations to sub-counties with safe water coverage below the district average.  Maximum score 10 for this performance measure	<ul> <li>Evidence that the district Water department has targeted sub- counties with safe water coverage below the district average in the budget for the current FY:</li> <li>o If 100 % of the budget allocation for the current FY is allocated to S/Cs below average coverage: score 10</li> <li>o If 80-99%: Score 7</li> <li>o If 60-79: Score 4</li> <li>o If below 60 %: Score 0</li> </ul>	Kapchorwa Municipality water department was being handled by NWSC.	0
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	<ul> <li>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.</li> <li>o If 100 % of the water projects are implemented in the targeted S/Cs:</li> <li>Score 15</li> <li>o If 80-99%: Score 10</li> <li>o If 60-79: Score 5</li> <li>o If below 60 %: Score 0</li> </ul>	Kapchorwa Municipality water department was being handled by NWSC.	0

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	The municipality water department was being handled by NWSC.	0
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	<ul> <li>Evidence that the district has submitted accurate/consistent data for the current FY: Score</li> <li>List of water facility which are consistent in both sector MIS reports and PBS: score 5</li> </ul>	Kapchorwa municipality water department was being handled by NWSC.	0
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	Kapchorwa Municipality water department was being by NWSC.	0
Procurement and contract manage	ement	'	

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 municipality water department was being handled by NWSC.	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 municipality water department was being handled by NWSC.	0
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	Kapchorwa municipality water department was being handled by NWSC.	0
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	The municipality water department was being handled by NWSC.	0

Maximum 8 points for this performance measure  • Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points  • Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points  • Evidence that the department submitted the annual performance measure  • Evidence that the department submitted the annual performance report for the previous FY (including all quarterly reports) in time to the Plan- ning Unit  • 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  • 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  • In the District Water 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  • It is the provious financial year and the provious financial year and the previous financial year and the previous financial year; score 3  If queries are not responded to score 0	The district has appointed Contract Manager and has effectively managed the WSS contracts	If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2	Kapchorwa municipality water department was being by NWSC.	0
The district Water department has sertified 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  **Evidence that the department submitted the annual performance report for the previous FY (including all quarterly reports) in time to the Plan- ning Unit  **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  **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  **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  **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  **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  **Evidence that the sector has provided information of the status of implementation of all audit findings for the previous financial year: score 3  **Other All issues of water are handled by NWSC.**  **Other All issues of water are handled by NWSC.**  **Other All issues of water are handled by NWSC.**  **Other All issues of water are handled by NWSC.**  **Other All issues of water are handled by NWSC.**  **Other All issues of water are handled by NWSC.**  **Other All issues of water are handled by NWSC.**  **Other All issues of water are handled by NWSC.**  **Other All issues of water are handled by NWSC.**  **Other All issues of water are handled by NWSC.**  **Other All issues of water are handled b	•			
The district Water department has submitted annual reports (including all quarterly reports) in time to the Plan- ning Unit  * 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  * Evidence that the department consult for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5  * 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: score 3  * Evidence that the sector has provided information to the status of implementation of all audit findings for the previous financial year: score 3	has certified and initiated by ayment for works and supplies on time  Maximum 3 for this performance	contract) certified and recommended suppliers for	applicable. All issues of water are handled by	0
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  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	inancial management and report	ing		
The District Water 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  Maximum 5 for this performance measure  • Evidence that the sector has provided information to the status of implementation of all audit findings for the previous financial year: score  • Evidence that the sector has provided information to the status of implementation of all audit findings for the previous financial year: score  3	nas submitted annual reports including all quarterly reports) in	annual performance report for the previous FY (including all four quarterly reports) to the Planner	municipality was being handled by	0
The District Water 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  Maximum 5 for this performance measure  • Evidence that the sector has provided information to the status of applicable. All issues of water are handled by NWSC.  Not applicable. All issues of water are handled by NWSC.	•			
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	nas acted on Internal Audit ecommendation (if any)	information to the internal audit on the status of implementation of all audit findings for the previous financial	applicable. All issues of water are handled by	0
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		internal audit on the status of implementation of all audit findings for the previous financial year: score		
		If queries are not responded to score 0		

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	Kapchorwa water department was being handled by NWSC.	0
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	Kapchorwa municipality was being handled by NWSC.	0
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.	Kapchorwa water department was being handled by NWSC.	0
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	Kapchorwa water department was being handled by NWSC.	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	Water department in Kapchorwa was being handled by NWSC.	0
Participation of communities in WSS programmes  Maximum 3 points for this performance measure	If communities apply for water/ public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1	Water department in Kapchorwa municipality was handled by NWSC.	0
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 maintenance 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.	Kapchorwa municipality water department was being handled by NWSC.	0
Social and environmental safegua	rds		
The LG Water department has devised strategies for environmental conservation and management  Maximum 4 points for this performance measure	Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2	Water department in Kapchorwa municipality was being handled by NWSC.	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	The municipality water department was being handled by NWSC.	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	Kapchorwa municipality water department was being taken by NWSC,.	0
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	Kapchorwa water department was being handled by NWSC.	0
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	Kapchorwa water department was being handled by NWSC.	0