

LGPA 2017/18

Accountability Requirements

Kole District

(Vote Code: 607)

Assessment	Compliant	%
Yes	3	50%
No	3	50%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?		
Assessment area: Annual performance contract					
G has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.	xxx	Submitted to MOFPED on 08/08/2017.	No		
Assessment area: Supporting Documents for the Budgavailable	et required as	per the PFMA are submitt	ed and		
LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).	XXXXX	Submitted to MOFPED on 30/06/2017 under the cover letter of the submission of Final Performance Contract Form B for FY 2017/18 that included a detailed procurement plan.	Yes		
Assessment area: Reporting: submission of annual and	d quarterly bud	get performance reports			
LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)	XXXXX	APR was submitted to MOFPED on 23/08/2017 as per receipt No. 4569.	No		
LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)	XXXXXX	Q1 - Q4 budget performance reports submitted on 11/11/2016; 24/02/2017; 9/05/2017; 23/08/2017 respectively. Acknowledgment receipts are: Q1-0052; Q2-0406; Q3-0735; Q4-4569 respectively. Submission date for Q4 was after 31 July 2017.	No		
Assessment area: Audit		1			

The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous financial year by April 30 (PFMA s. 11 2g). This statement includes actions against all findings where the Auditor General recommended the Accounting Officer to take action (PFMA Act 2015; Local Governments Financial and Accounting Regulations 2007; The Local Governments Act, Cap 243).	xxxxx	Kole LG submitted the audit report to the PS/ST on the status of the implementation of the auditor general finding on 28th April 2017as seen from the register of the ministry of finance	Yes
The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer	XXXXX	According to the auditor General audit report of 2016/2017, Kole LG obtained unqualified audit opinion. This information was obtained from the Auditor General Office Kampala	Yes



Crosscutting Performance Measures

Kole District

(Vote Code: 607)

Score 61/100 *(61%)*

Crosscutting Performance Measures

No.	Performance Measure	Scoring Guide	Score	Justification		
Asse	Assessment area: Planning, budgeting and execution					
1	All new infrastructure projects in: (i) a municipality; and (ii) all Town Councils in a District are approved by the respective Physical Planning Committees and are consistent with the approved Physical	Evidence that a municipality/district has: • A functional Physical Planning Committee in place that considers new investments on time: score 2.	2	Physical Planning Committee (PPC) is functional as referenced by appointment of members on 24/02/2014. New investments were considered as evidenced by minutes of the Physical Planning Committee held on 12/12/2016 under Min.4/12/2016 considering application for permission of development and building plans for the proposed staff house to be constructed in Aparango and Bar Akalo Primary schools in Akalo sub-county.		
	Plans Maximum 4 points for this performance measure.	• All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2.	0	There is no Physical Plan in place against which consistence would be assessed. However, new infrastructure investments have approved plans as found in the PPC minutes of 13/12/2017 under Min 2-5/Aug/2017 on "Presentation of applications for development permissions /building plans".		
2	The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-	Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.	0	No evidence by way of budget conference report was availed. However TPC minutes of 09/11/2016 under Min.27/11/2016 where the importance and modalities of conducting the budget conference.		
	year development plan, are based on discussions in annual reviews and budget conferences and have project profiles	• Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If different, justification has to be provided and evidence that it was approved by Council. Score 2.	0	No clear evidence that ALL capital investments in AWP FY 2017/18 are derived from the five year (2015/16-2019/20) the district development plan (DDP II) of April 2015.). There are no clearly delineated project profiles in the DDP II against which the priorities in the AWP can be referenced against, e.g. whereas in the AWP there is a provision for construction of latrine at Aparaango PS it cannot be traced in the generalised provisions in the DDP II which is due for review this year.		

		• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1.	1	Project profiles have been developed and discussed by TPC as found in the minutes of January held on 30/01/2017 under Min.38/01/2017 where YLP & NUSAF3 projects were considered.
3	Annual statistical abstract developed and applied Maximum 1 point on this performance measure	Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making-maximum 1 point.	1	Annual statistical abstract was found during the assessment e.g. during the TPC Meeting of 23/05/2017 under Min.66/05/2017 it supported the plans for FY 2017/18 being considered.
4	Investment activities in the previous FY were implemented as per AWP. Maximum 6 points on this performance measure.	• Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2	0	Not all infrastructure projects implemented in FY 16/17 were derived from the AWP and where found they had no record of approval by the Council. e.g. in the Health sector, new standard pit latrines constructed at Bala S/C and Alito S/C as found in the APR/Q4report page 111 whilst they were not provided for in the AWP as at page 52. Other sampled projects were found to be derived appropriately, e.g. classroom block construction at Okwerodot, periodic maintenance of 3 urban unpaved roads is consistent in both documents, only one implemented.
		• 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	0	No evidence was provided on account of the responsible officer in procurement being out of station.

5	The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects and assets	Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2	0	No evidence was provided on account of the responsible officer in procurement being out of station.
	during the previous FY Maximum 4 points on this Performance Measure.	• Evidence that the LG has budgeted and spent at least 80% of O&M budget for infrastructure in the previous FY: score 2	0	No evidence was provided on account of the responsible officer in procurement being out of station.
Asse	essment area: Human	Resource Management		
6	LG has substantively recruited and appraised all Heads of Departments	Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2	2	There was evidence that the 2 substantively appointed heads of departments were appraised; DEO 15/07/2017 and DHO 12/07/2017 as per the guidelines issued by MoPS.
	Maximum 5 points on this Performance Measure.	Evidence that the LG has filled all HoDs positions substantively: score 3	0	The district had substantively filled posts of; DHO, DEO and DE (On Interdiction).
7	The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.	• Evidence that 100 percent of staff submitted for recruitment have been considered: score 2	2	There were no submission from Office of the CAO for recruitment in 2016/17. However, there were Central Government Advert for recruitment by Ministry of Health dated 6th/02/2017 and Ministry of Agriculture Animal Industry and Fisheries (MAAIF) dated 5th / 12/ 2016 that were all considered by DSC in a meeting held on 4/12/2017 to 7/12/2017 (MAAIF) and 4/07/17 to 6/07/ 2017 (Health).
	Maximum 4 points on this Performance Measure	• Evidence that 100 percent of staff submitted for confirmation have been considered: score 1	1	Submissions by office of the CAO for confirmation dated; 26/06/2017 (Enrolled nurse, Office Attendant, 2 Health Information Assistant, Bio-stastician, CDO) were all considered by DSC meeting held on 16/01/2018.

		• Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1	1	No disciplinary case was submitted to DSC for action in the 2016/17.
8	Staff recruited and retiring access the salary and pension payroll respectively within two months	• 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	3	There was no recruitment done in the financial year 2016/17
	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	0	All the 27 retired officers in 2016/17 did not access the pensioner pay roll within the stipulated two months period.
Asse	essment area: Revenu	e Mobilization		
9	The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one) Maximum 4 points on this Performance Measure.	• If increase in OSR from previous FY but one to previous FY is more than 10%: score 4 points • If the increase is from 5 - 10%: score 2 point • If the increase is less than 5%: score 0 points.	0	According to the financial statement of 205/2016, Kole LG budgeted for own revenue of 454,753,000 and realised only 133,688,868 and in 2016/2017 the LG budgeted for 310,000,000 and realised 139,752,489 representing 4%
10	LG has collected local revenues as per budget (collection ratio) Maximum 2 points on this performance measure	• If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within /- 10%: then 2 points. If more than /- 10%: zero points.	0	•According to the financial statement 2016/2017, the local revenue budgeted was 310,000,000 and realized was 139,752,489. This represents negative 54%

11	Local revenue administration, allocation and transparency	• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2	2	As per the financial statement prepared as 30th June 2017, the LG remits to the lower local government 65% of the local service tax raised
	Maximum 4 points on this performance measure	• Evidence that the LG is not using more than 20% of OSR on council activities: score 2	0	As per the financial statement prepared as at 30th June 2017, the LG spent more than 20% of the local revenue raised on council activities. The council budget was 140,076,375 and actual spent was 173,953,250 .Therefore they overspent by 33,876,875
Asse	essment area: Procure	ment and contract managem	ent	
12	The LG has in place the capacity to manage the procurement function Maximum 4 points on this performance measure.	• Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2	2	 Evidence of presence of these positions was seen from Appointment Letters written by Chief Administrative Officer (CAO), Kole, to staff of Procurement Unit informing them of their appointment as follows: Letter of Appointment dated 1st August 2013 where the CAO, under directive of DSC Min No. 314/2013, appointed the Senior Procurement Officer on promotion Letter of Appointment dated 28th May 2012 where the CAO, under directive of DSC Min No. 84/2012, appointed the Procurement Officer The Kole District Local Government Staff List for 2014/2015 seen, prepared by the Senior Human Resource Officer and checked by the CAO, confirms the presence of staff for these two positions under line 17 & 18.

produce reports Commit	ence that the TEC ed and submitted to the Contracts itee for the s FY: score 1	1	TEC Minutes of meetings held were seen for the following days: - TEC meeting on 19th October 2016 where they considered construction of one Storey Engineering Office Block Phase II - TEC meeting on 20th October 2016 where they considered Low cost Sealing 0.8 Km of road from Corner Park — Ayer P/School - TEC meeting on 21st September 2016 where they considered construction of a 5 Stance Drainable Latrine at Igel P/School under Akalo sub-county - TEC meeting on 29th September 2016 where they considered completion of construction of a 5 Stance Drainable Latrine at St. Paul Primary School - TEC meeting on 28th September 2016 where they considered supply of Fish Feed, Pellets and Fish Fingerlings
recomm TEC an justificat deviatio	mittee considered nendations of the d provide tions for any ons from those nendations: score 1	1	CC meeting minutes were seen for sittings on the following dates: - CC meeting on 9th May 2017. Meeting Reference Number: KOLECC12/2016-2017 - CC meeting on 3rd May 2017. Meeting Reference Number: KOLECC11/2016-2017 - CC meeting on 7th Feb 2017. Meeting Reference Number: KOLECC07/2016-2017 - CC meeting on 16th December 2016. Meeting Reference Number: KOLECC006/2016/2017 - CC meeting on 17th November 2016. Meeting Reference Number: KOLECC005/2016-2017 Evidence was also seen where the Secretary to CC (Snr Procurement Officer) wrote a letter inviting CC Chairman to sit and among the agenda items was consideration of TEC submissions. The letter seen was dated 09th March 2017.

13	The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed. Maximum 2 points on this performance measure.	• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2	2	 a) The Procurement and Disposal Plan seen covered 145 projects for the FY, including all planned infrastructural projects in the AWP. b) Procurements done were those planned for. These are summarised in Quarterly procurement records that followed the Procurement Plan.
14	The LG has prepared bid documents, maintained contract registers and	• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2	0	Bid documents were prepared but sent out after August 30th. The advert was put in the New Vision newspaper of 30th November 2017, three months after the deadline.
	procurement activities files and adheres with established thresholds. Maximum 6 points on this performance measure	• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2	2	The Contracts Register was available and seen. Same Hardcover Book is used for successive years from 2015/16, through 2016/17 to now 2017/18. Procurement activity files were also seen in the Procurement Office.

• For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2. Thresholds were adhered to indicated by bid documentation seen as follows:

Open Bidding:

- Low costs Sealing of Corner Park Ayer Road. Amount: UGX179,307,324. Contractor: CME Enterprises Ltd. Procurement Ref No: KOLE607/WRKS/2016-2017/002/4. Date if Issue: 02nd January 2017.
- Construction of two classroom Blocks with office at Ayara P/S. Amount: UGX64,588,698. Contractor: M/s Gudul Enterprises Ltd. Procurement Ref No: KOLE607/WRKS/2016-2017/00020. Date if Issue: 5th Dec. 2016

Selective bidding:

- Construction of 5-Stance Drainable Latrine at Agoma P/School. Amount: UGX20,827,590. Contractor: M/s BJ Triangle Investments Ltd. Procurement Ref NO: KOLE607/WRKS/2016-2017/00021. Date of Issue: 09th November 2016.
- Construction of 5-Stance Drainable Latrine at Alang P/School. Amount: UGX21,514,977 . Contractor: M/s Kalbro Enterprises Ltd. Procurement Ref No: KOLE607/WRKS/2016-2017/00023. Date of Issue: 09th November 2016.
- Construction of 2-Stance Drainable Latrine at Corner Mowlem. Amount: UGX9,590,214. Contractor: M/s Calendar Investments Ltd. Procurement Ref No: KOLE607/WRKS/2016-2017/00042. Date of Issue: 22nd March 2017.

2

15	The LG has certified and provided detailed project information on all investments Maximum 4 points on this performance measure	• Evidence that all works projects implemented in the previous FY were appropriately certified — interim and completion certificates for all projects based on technical supervision: score 2	2	 M/S RATNA (U) Ltd. Issued upon completion of Construction of Agro processing facility in Alito sub-county, Kole District, under Community Agricultural infrastructure Improvement programme -3. Certificate issued on 31st May 2016. M/S SWIFT ENGINEERING (U) Ltd upon completion of Construction of Access Road in Ayer sub-county, lot 68 under Community Agricultural infrastructure Improvement programme -3. Certificate issued on 2nd September 2016. Interim Certificate issued to Etiko construction Company Ltd upon completion of Phase II of Engineering block at the District Headquarters. This is the third Interim certificate. It was issued on 26th June 2017.
0.00		• Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2	0	The works projects are labelled but the Contract value is not indicated.
Ass	essment area: Financia	al management		
16	The LG makes monthly and up to-date bank reconciliations Maximum 4 points on this performance measure.	• Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4	4	Kole LG makes monthly bank reconciliations and are up to-day as seen from the cash book reconciliation of December 2017 prepared on 5th Jan 2018 with balancing figures of 168,142,662/Receipts/Payments

17	The LG made timely payment of suppliers during the previous FY Maximum 2 points on this performance measure	• If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2.	2	Kole LG makes timely payments as seen from the administration payment of in land travel where requisition was made on 13/6/2016 and CFO and CAO made sure payment was made within one day on voucher no 4/6/2017
18	The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations	Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.	3	There is an internal audit in place who prepared the following reports • 1st quarterly report prepared and submitted on 18th November 2016 • 2nd Quarterly report prepared and submitted on 27th /February 2017 • 3rd Quarterly report prepared and submitted on 12/June /2017 • 4th Quarterly report prepared and submitted on 26th /Sept/2017
	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: score 2.	2	The LG provided information to the council and LG PAC on the status on implementation of audit findings as follow • 1st quarterly report submitted on 31st /Oct/2016 • 2nd Quarterly report submitted on 5th /Feb/2017 • 3rd Quarterly report submitted on 30th /May/2017 • 4th Quarterly report submitted on 30th /July/2017
		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	1	The LG provided information to the council and LG PAC on the status on implementation of audit findings as follow • 1st quarterly report submitted on 31st /Oct/2016 • 2nd Quarterly report submitted on 5th /Feb/2017 • 3rd Quarterly report submitted on 30th /May/2017 • 4th Quarterly
19	The LG maintains a detailed and updated assets register Maximum 4 points on this performance measure.	• Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4	4	The LG maintains and updated its asset register in accordance to the manual for all the assets procured by the LG, for the item donated to them, some of them lack value but correctly captured in the assets register

20	The LG has obtained an unqualified or qualified Audit opinion Maximum 4 points on this performance measure	Quality of Annual financial statement from previous FY: • unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0	4	According to the annual audit report of 2016/2017, obtained from the Auditor General Office Kole LG got unqualified report
Asse	essment area: Governa	ance, oversight, transparency	and ac	countability
21	The LG Council meets and discusses service delivery related issues Maximum 2 points on this performance measure	Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2	2	Council at its meeting held on 12/02/2016 under Min. KDC/124/02/2016 discussed service delivery issues which included the laying of committee reports from finance & administration; works/technical & community based services and production/marketing, health & natural resources committees.
22	The LG has responded to the feedback/complaints provided by citizens Maximum 2 points on this Performance Measure	• Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 2.	2	LG designated an Officer to coordinate response to feedback as evidence by a letter of "Assignment of Additional Responsibility" to Mr. Ouma Charles, Deputy CAO as the focal point person to coordinate public information dissemination.
23	The LG shares information with citizens (Transparency)	Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2	0	No evidence of LG Payroll and Pensioner Schedule on public notice board was found at the time of assessment. Payroll was said to have been removed on account of constant plucking of pages.
	Total maximum 4 points on this Performance Measure			

		Evidence that the procurement plan and awarded contracts and amounts are published: score 1	0	Procurement plan and awarded contracts were not found on display at the procurement noticeboard. Only Q2 Contracts Committee Report for FY 2017/18 and Contracts Committee awards 2016/17 indicating the winning firm and type of contract was found on display.
		• Evidence that the LG performance assessment results and implications, are published e.g. on the budget website for the previous year (from budget requirements): score 1.	0	"N/A. The Central Government did not conduct the Annual Performance Assessment for LGs in 2016/17".
24	The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens Maximum 2 points on this performance measure	Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1	1	HLG was found to have communicated to LLG. This was evidenced by TPC minutes of June held on 08/06/2017 under Min.71/06/2017 where the CAO explained to members need to undertake staff appraisals as per MOPS guidelines. All Sub-County Chiefs are co-opted members of TPC.
Asse		• Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc) with the public to provide feed-back on status of activity implementation: score 1.	1	The LG during FY 16/17 conducted public discussions as evidenced by the Report of 29/09/2016 from the D/CAO to CAO on accountability forum conducted across the district. The said activity which was undertaken between 19-27 September 2016 was aimed at correcting community perception about the services expected from the district; build relationship between the district as a service provider and the community as clients; and account to the community what has been achieved and plans.

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

Maximum 4 points on this performance measure.

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

2

2

- There is a District Workplan with a section on gender mainstreaming and associated activities
- One-day workshop held the 27th November 2016.
- Women groups were facilitated to compose songs on gender issues. These were presented on Women's Day (8th March 2017) in National celebrations in Dokolo and later on 17th March in Bala subcounty in Kole District.
- There was CDO training on Gender mainstreaming. A report was seen dated 19th December 2016 compiled by the District Community Development Officer and presented to the Chief administrative Officer on this subject.
- There was Community sensitisation in Ayer sub-county from 21st to 25th of August 2017.

• Evidence that gender focal point has planned activities for current FY to strengthen women's roles and that more than 90% of previous year's budget for gender activities has been implemented: score 2.

- The 2017/2018 District Workplan includes quarterly allocations for support to gender mainstreaming and Women Councils. Quarterly planned figures stand at UGX1,129,500
- Training was planned and done for councillors, Child Protection Committee members and technical in Ayer sub-county. This was done on Monday 29th January 2018.
- Of the UGX77,521,238 received by the gender Sector in Kole District, ALL (100%) was spent on implementing activities. The sector receives various funding from UWEP, FAL, Women Council, YLP, Youth Council etc.

26	LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition.	• Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 2	2	Screening Report Form seen. The screening was done for work done for Swift engineering Ltd. The report was dated 07th November 2017.
	land acquisition Maximum 6 points on this performance measure	Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1	0	Bids have no clear Guidelines to Contractors as to what they are supposed to do in terms of Environmental Mitigation. All there is in the bid documents is an undefined clause requiring "Site Restoration". Then it is left to the Contractor to imagine what this means in terms of environmental mitigation measures. Common practice is that the Contractor strives to save money by planting a few trees.
		Evidence that all projects are implemented on land		Land title has been processed only for Aboke Health Centre IV. The rest of District

establishments shall have Titles processed

in due course. District Headquarters are

be processed.

relatively new (8 years) and Title is still to

are implemented on land

ownership (e.g. a land title,

agreement etc..): score 1

where the LG has proof of 0

Certificates issued to different organisations seen fully signed by the District natural resources Officer as follows: - Mid North Builder and Civil Engineering Works Ltd upon completion of construction of 2 classroom Block at Obutu Primary school in Alito sub-county. Certificate Issued on 18th April 2016. - M/S Jag Millers upon completion of Evidence that all installation of Cooking Oil Mill, Block No.1, completed projects have Plot No. 46, Aboke township, Aboke Sub-Environmental and Social County. Certificate Issued on 15th August Mitigation Certification 2 2016. Form completed and signed by Environmental - Agwai Supply and Construction Company Officer: score 2 Ltd upon completion of OPD Block at Omoladyang H/C II, Amoladyang Parish, Bala Sub-County. Certificate Issued on 29th May 2015. - Adakingo Company Ltd upon completion of 4 classroom Block at Wipip Primary School in Aboke sub-county. Certificate Issued on 16th June 2015.



Educational Performance Measures

Kole District

(Vote Code: 607)

Score 67/100 (67%)

No.	Performance Measure	Scoring Guide	Score	Justification		
Asse	Assessment area: Human Resource Management					
1	The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)	• Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4	4	The LG budgeted for a head teacher and at least seven teachers as evidenced by performance contract 2016/2017 and the LG 3rd Qtr OBT report 2016/2017 submitted to PS MoFPED (which has the list of all teachers per school in the whole district).		
	Maximum 8 for this performance measure	• Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4	4	The LG has deployed at least one head teacher and at least seven teachers per school as evidenced by the staff list showing the list of the 61 school and the names of the teachers per school.		
2	LG has substantively recruited all primary school teachers where there is a wage bill provision Maximum 6 for this performance measure	• Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0	3	Five schools had less than seven teachers as stipulated (93.4%)		
3	LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision. Maximum 6 for this performance measure	Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6	6	All the two positions of school inspectors have been filled.		

4	The LG Education department has submitted a	Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of Primary Teachers: score 2	2	Recruitment plan for 5 headteachers submitted on 28/06/2017
	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	2	Submitted a recruitment plan for one District Inspector of Schools
5	The LG Education department has conducted performance appraisal for school inspectors and ensured that performance	Evidence that the LG Education department appraised school inspectors during the previous FY • 100% school inspectors: score 3	3	There was evidence that all the 2 School Inspectors had been appraised; School Inspector (Norah Auma- 30th /06/2017), Inspector of Schools (Owiddi Boniface-29th /06/2017).
	appraisal for all primary school head teachers is conducted during the previous FY. Maximum 6 for this performance measure	Evidence that the LG Education department appraised head teachers during the previous FY. • 90% - 100%: score 3 • 70% - 89%: score 2 • Below 70%: score 0	3	The district had 56 substantively appointed head teachers, 5 are in acting position; 51(91%) head teachers had been appraised at the time of the assessment.
Asse	essment area: Monitori	ing and Inspection		

6	The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools	Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1	1	Circular No. 14/2016 from PS MoES circular from minister of EoES to CAOs dated 15/05/2017 on the school feeding programme. Copies of the education Act 2008 were found in the sampled 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, including on school feeding: score 2	2	The department held a meeting with school head teachers on 10/02/2017 Min: 05/2017 as a follow up on the procurement of sanitary pads for girls using UPE grant
7	The LG Education Department has effectively inspected all private and public primary schools Maximum 12 for this performance measure	• Evidence that all private and public primary schools have been inspected at least once per term and reports produced: o 100% - score 12 o 90 to 99% - score 10 o 80 to 89% - score 8 o 70 to 79% - score 6 o 60 to 69% - score 3 o 50 to 59% score 1 o Below 50% score 0.	8	Term one: 78 out of 81 schools inspected (92.2%) Term two: 78 out of 81 schools inspected (92.2%) Term three: 53 out of 81 schools inspected (65.4%) Average percentage inspection 86%
8	LG Education department has discussed the results/reports of school inspections, used them to make	Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4	0	Minute 05 bullet five for the meeting held on 04/03/2017 discussed inspection reports but there was no evidence that recommendations for corrective actions were made
	recommendations for corrective actions and followed recommendations	• Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2	2	Dates of submission of inspection reports were 11/01/2017, 12/06/2017 and 23/02/2017
	Maximum 10 for this performance measure	Evidence that the inspection recommendations are followed-up: score 4	0	There was no evidence that inspection recommendations were followed up

9	The LG Education department has submitted accurate/consistent	Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5	5	The list of 61 schools submitted is consistent with both EMIS and OBT
	reports/date for school lists and enrolment as per formats provided by MoES Maximum 10 for this performance measure	Evidence that the LG has submitted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and OBT: score 5	5	Enrollment data of 69,727 pupils for the 61 schools was consistent with EMIS and OBT
Ass	essment area: Governa	ance, oversight, transparency and account	ability	
10	The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council Maximum 4 for this performance measure	Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etcduring the previous FY: score 2	2	The Standing Committee for Production /Marketing, Health, Education and Natural Resources at its meeting held on 04/08/2016 under Min. KDC/26/8/2016(e) considered the Education Department's report. The following challenges were highlighted: high enrolment; lack of mid-day meals; inadequate classrooms and inadequate latrine stances.
		Evidence that the education sector committee has presented issues that requires approval to Council: score 2	2	The Standing Committee for Production /Marketing, Health, Education and Natural Resources presented to Main Council at its meeting held on 29/08/2016 under Min. KDC/41/8/2016 (b) at which Council was requested to approve its recommendation to approve "collaborative efforts to sensitise the community towards education support to be adopted by all stakeholders".

11	Primary schools in a LG have functional SMCs Maximum 5 for this performance measure	Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0	0	There were only twenty five copies (41%) of school management committees with the office of the DEO
12	The LG has publicised all schools receiving non-wage recurrent grants Maximum 3 for this performance measure	• Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3	3	The DEOs notice board and the schools sampled had posted UPE grants at the head teachers notice board
Asse	essment area: Procure	ment and contract management		
13	The LG Education department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30: score 4	4	Submission of procurement requests to PDUwas done as evidenced by procurement of plastic chairs on 27/02/2017

14	The LG Education department has certified and initiated payment for supplies on time Maximum 3 for this performance measure	Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points	3	The education department does certify and recommend payment for their suppliers in a timely manner, for example payment for PLE, the District inspector initiated request for payment on 13th /10/2016, the DEO certified don 25th /10/2016, CFO and CAO certified and approved the same day and payment was made on 28/10/16 on voucher 3/11/2016
Asse	essment area: Financia	al management and reporting	I	
15	The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure	Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by mid-July for consolidation: score 4	0	No evidence that APR was submitted to the Planner by mid-July for consolidation was provided.
16	LG Education has acted on Internal Audit recommendation (if any) Maximum 4 for this performance measure	• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points o If all queries are not responded to score 0	2	Education department provided information to the internal audit, the department had 8 issues(unaccounted funds, activity report, incomplete voucher, absence of inspection reports) that they responded to all as seen from the LGPAC report of 10th /April/2017, 19th /Aug/2017 and 26/10/2017

Assessment area: Social and environmental safeguards

17	LG Education Department has disseminated and promoted adherence to gender guidelines	• Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc: Score 2	0	There is no evidence that the department in consultation with the gender focal point person dessiminated 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	0	There was no evidence that guidelines were explained on the management of sanitation fr girls in primary schools
		Evidence that the School Management Committee meet the guideline on gender composition: score 1	1	School management committees in the sampled schools had a third of the members of the foundation body being females as provided for in the Education Act. 2008
18	LG Education department has ensured that guidelines on environmental management are disseminated Maximum 3 points for this performance measure	• Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc): score 3:	0	There was no evidence that the education department in collaboration with the environmental officer issued guidelines but the Schools sampled eg Ayer primary school and Baramindyang primary school had established wood lots.



Health Performance Measures

Kole District

(Vote Code: 607)

Score 62/100 (62%)

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Human re	source planning and management		
1	LG has substantively recruited primary health workers with a wage bill provision from PHC wage Maximum 6 points for this performance measure	Evidence that LG has filled the structure for primary health workers with a wage bill provision from PHC wage for the current FY • More than 80% filled: score 6 points, • 60 – 80% - score 3 • Less than 60% filled: score 0	6	90.5% (162 out of 179) approved positions were filled.
2	The LG Health department has submitted a comprehensive recruitment plan to the HRM department Maximum 4 points for this performance measure	Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers: score 4	4	A recruitment plan was submitted to HRM, dated 19th October 2017 with 5 positions and received by CAO on the same day.
3	The LG Health department has ensured that performance appraisal for health facility in charge is conducted Maximum 8 points for this performance measure	Evidence that the health facility in-charge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0	0	The district has a total of 11 Incharges (Health Centre IV 1, Health Centre III 5 and Health Centre II 5), a total of 7 (63%) Incharges had been appraised at the time of the assessment.

4	The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY. Maximum 4 points for this performance measure	• Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4	0	The deployment list differed from the PBS list. For example, the PBS list for Apalabarowo HCIII provides for a Senior Clinical Officer and a Clinical Officer but they are replaced by Nursing Officers on the deployment list. The PBS list for Opeta provides for 3 Porters yet the deployment list has only two.
Ass	essment area: Monitoring	g and Supervision		
5	The DHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities Maximum 6 for this	• Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3	3	.• The two guidelines received by the district were disseminated to the facilities. • For instance, a meeting was held with facility In-charges to disseminate the Malaria Test and treat policy, 2015 on 22nd May 2017.
	performance measure	• Evidence that the DHO has held meetings with health facility incharges and among others explained the guidelines, policies, circulars issued by the national level: score 3	3	 .• Minute 3/9/2016 of the extended DHT meeting, the DHO explained aspects of the Human Resources for Health Policy including; staff appraisal; absenteeism and training. • Minute 3/4/2016 of the extended DHT meeting, the DHO explained aspects of the polio Immunization policy.

6	The LG Health Department has effectively provided support supervision to district health services	Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3	3	100% (Aboke HCIV, the only one in the district) was supervised as reflected in reports for the period; 4th to 14th January 2016; 13th to 17th June 2017; 18th to 26th July 2016; and 15th to 19th 2016.
	Maximum 6 points for this performance measure	Evidence that DHT has supervised lower level health facilities within the previous FY: • If 100% supervised: score 3 points • 80 - 99% of the health facilities: score 2 • 60 - 79% of the health facilities: score 1 • Less than 60% of the health facilities: score 0	3	100% (14) lower level health facilities were supervised as reflected in reports dated 15th November 2016; and the one for December 2016
7	The Health Subdistrict(s) have effectively provided support supervision to lower level health units Maximum 6 points for this performance measure	Evidence that health facilities have been supervised by HSD and reports produced: • If 100% supervised score 6 points • 80 - 99% of the health facilities: score 4 • 60 - 79% of the health facilities: score 2 • Less than 60% of the health facilities: score 0	0	.Only 7% (1 out of 14 facilities) was supervised. • Evidence of supervision provided for only Aboke HCIV as reflected in the supervision log in book on; 4th August 2016; 15th September 2016; and 27th July 2017.
8	The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make	Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4	4	Min 4/5/5/2017 of the DHT meetin held on 5th May 2017 reflects discussion of need for a placenta pit Ayer HCII that had been raised in a supervision report and recommended presentation of the issue to the CAO.
	recommendations for corrective actions and followed up Maximum 10 points for this performance measure	Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6	6	Minute 5/9/2016 items 1 to 5 of the extended DHT meeting held on 18th September 201 reflects follow up on earlier recommendations with actions including submission of items to the DHOs and writing to the CAO about construction of a placenta pit Ayer HCII.

•	9	The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH Maximum 10 for this performance measure	• Evidence that the LG has submitted accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports and OBT: score 10	10	 Accurate and consistent data was submitted regarding lists in PBS and HMIS 105 as showed below. PBS data (for July to December 2017) reflected 9 facilities as was reported in HMIS 105 for the same period. The only extra facility that appeared in the HMIS 105 list was deactivated in the system and did not account to the overall percentage.
1	Asse	ssment area: Governand	ce, oversight, transparency and acc	ountabil	ity
	10	The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council Maximum 4 for this performance measure	• Evidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2	2	The Standing Committee for Production /Marketing, Health, Education and Natural Resources at its meeting held on 04/08/2016 under Min. KDC/26/8/2016(a), considered the Health Department's report where the following were highlighted: increased PHC allocation to HCIV from UGX.5.4mn to UGX.20mn per quarter; absenteeism and lack of commitment with staff staying in Lira.; persisting malaria outbreak since April 2015; and institution of health taskforces at every health sub-district.
			• Evidence that the health sector committee has presented issues that require approval to Council: score 2	2	The Standing Committee for Production /Marketing, Health, Education and Natural Resources presented to Council at its meeting held on 26/10/2016 under Min

11	The Health Unit Management Committees and Hospital Board are operational/functioning Maximum 5 points	Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues): • If 100% of randomly sampled facilities: score 5 • If 80-99%: score 3 • If 70-79%: : score 1 • If less than 70%: score 0	1	 .• 75% (3 out of 4) of sampled HUMCs were active. • Aboke HCIV did not have a HUMC during the year of assessment. • Alito HCIII HUMC met on 18th September 2016; 19th December 2016; 22nd March 2017 and 28th June 2017. • Okole HCII HUMC met on 19th July 2017 and 21st February 2017 • Akalo HCIII HUMC met on; 20th June 2017; 21st March 2017; 22nd December 2016 and 30th August 2016.
12	The LG has publicised all health facilities receiving PHC nonwage recurrent grants Maximum 3 for this performance measure	• Evidence that the LG has publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards: score 3	3	A list of health facilities with PHC non-wage figures for quarter two was pinned on the wall outside the DHO's office.
Asse	essment area: Procureme	ent and contract management		
13	The LG Health department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in	• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2	0	 .• No evidence of submission of procurement requests to PDU. • There were micro procurements handled without going through PDU.
	the approved Sector annual work plan and budget Maximum 4 for this performance measure	Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2	0	All the five PP1 forms were submitted on 19th October 2017 after the first quarter deadline.

14	The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS Maximum 8 points for this performance measure	 Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time: 100% - score 8 70-99% – score 4 Below 70% - score 0 	8	 .• Health supplies procurement plan was available, received by NMS on 16th December 2016. • All health facilities were supported as reflected on the plan and report dated 16th December 2016.
15	The LG Health department has certified and initiated payment for supplies on time Maximum 2 for this performance measure	Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points	2	• The DHO does certify the payment to the suppliers on timely manner as seen from the payment of implementation of polio program, request was made on 28th /08/2018, the DHO certified on 28th/08/2017 CFO certified on 4/9/2017, CAO approved on the same day and payment was made on 8th /9/2017 on voucher 22/09/17
Ass	sessment area: Financial r	management and reporting		
16	The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure	• Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4	0	No evidence that APR was submitted to the Planner by mid-July for consolidation was provided.

17	LG Health department has acted on Internal Audit recommendation (if any) Maximum 4 for this performance measure	Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0	2	Health department provided information to the internal audit, the department had 10 issues(non functioning HCII, unaccounted funds, no activity reports, lack of supporting documents, unaccounted fuel, unspent balances, doubtful accountability) that they responded to all as seen from the LGPAC report of 10th /April/2017, 19th /Aug/2017 and 26/10/2017
Asse	essment area: Social and	environmental safeguards		
18	Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.	Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2	0	Only Okole HCII out of the four facilities met the gender requirement at 40% females. HUMCs for; Aboke HCIV; Alito HCIII; Okole HCII; and Akalo HCIII had less than 33.3% female representation.
	Maximum 4 points	• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2	0	No evidence of dissemination of guidelines.
19	The LG Health department has issued guidelines on medical waste management Maximum 2 points	• Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal : score 2 points.	0	 .• No evidence provided of provision of guidelines was availed. • SOPs on waste management were available at Aboke HCIV. • Receipt date was not recorded.



LGPA 2017/18

Water & Environment Performance Measures

Kole District

(Vote Code: 607)

Score 42/100 (42%)

Water & Environment Performance Measures

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Plannir	ng, budgeting and execution		
1	The DWO has targeted allocations to subcounties with safe water coverage below the district average. Maximum score 10 for this performance measure	Evidence that the LG Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: score 10	10	Subcounties with safe water coverage, below the district average of 61% were targeted as below: Okwerodoti (33.7%) to get 5 boreholes. Ayer, Aboke, Akalo, bala and alito subcounties were also targeted Evidence in AWP/Budget 2017/2018 dated 7th Aug 2017 and received by MWE on 8th Sep 2017 shows Planned Drilling 18 boreholes, rehabilitate 16, construct one -5 stance latrine. District coverage 61% (according to MIS)
2	The LG Water department has implemented budgeted water projects in the targeted subcounties (i.e. subcounties with safe water coverage below the district average) Maximum 15 points for this performance measure	• Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15	0	Evidence in AWP 2016/17 report dated 25th July 2016, and received by MWE on 12th Aug 2016 not adequate Implementation in new construction was done in the subcounties of Alito, Ayer, Akalo, Bala, Aboke Ayer T/C targeting subcounties with less coverage

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3	The LG Water department carries out monthly monitoring and supervision of project investments in the sector Maximum 15 points for this performance measure	Evidence that the LG Water department has monitored each of WSS facilities at least annually. • If more than 95% of the WSS facilities monitored: score 15 • 80 - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60 - 69% monitored: score 5 • 50 - 59%: score 3 • Less than 50% of WSS facilities monitored -score 0	0	Annual Progress reports do not show details of monitoring and supervision activities. Evidence sample of monitoring report of 27th oct 2017 and of 27 -09-2017 by DWO to CAO do not qualify to be projects investment reports
4	The LG Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE Maximum 10 for this performance measure	• Evidence that the LG has submitted accurate/consistent data for the current FY: o List of water facility which are consistent in both sector MIS reports and OBT: score 10	0	District database listing of water facility is inconsistent with the Ministry MWE MIS reporting 61% coverage
Asse	essment area: Procure	ement and contract management		
5	The LG Water department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4	4	 Evidence of procurement plan, from the CAO, for the whole district (including water and technical services) for 2017/18 DATED 28th nov 2017 to PPDA northern region, Gulu Evidence of Procurement requisitions for drilling boreholes Lot2 signed by CAO, DW0 dated 23th Aug 2017 and one for the latrines

6	The DWO has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	• If the DWO prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2	0	No appointment in writing to DWO
		If water and sanitation facilities constructed as per design(s): score 2	2	Evidence of contract with M/S Anden Company Lt, construction of latrines Jan 2015, which had design drawings
		If contractor handed over all completed WSS facilities: score 2	0	All facilities are handed over to the community, but no handover report.
		• If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2	2	Evidence of completion certificates of Anden Company Ltd, construction of 5 stance latrine at Alito Trading Centre, dated 9th Dec 2015 certified by DWO, Internal Audi and CAO. Evidence of completion certificates of Sumadhura Tech Ltd, construction of 5 boreholes in at Abung-genga, dated 10th Dec 2015 certified by DWO, Internal Audi and CAO. Evidence of completion certificates of Ebowa Investments Ltd, construction of 7 deep boreholes, dated 22nd Jan 2016 certified by DWO, Internal Audi and CAO.

7	• Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points	Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points	3	The DWO certified and recommended for payment suppliers in a timely manner for example during the construction of 5 stances drainable latrine at Aboke market by Robling Enterprises, requisition for payment was made on 7/6/2017, DWO certified on 7/6/2017 CFO certified on 25/06/2017, CAO approved on the same day and payment was made on 26/6/2017 on voucher 6/6/17
Asse	essment area: Financ	al management and reporting	I	
8	The LG Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 5 for this performance measure	• Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5	0	No evidence that APR was submitted to the Planner by mid-July for consolidation was provided.
9	LG Water Department has acted on Internal Audit recommendation (if any) Maximum 5 for this performance measure	• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 5 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0	3	Water department provided information to the internal audit, the department had 14 issues (unaccounted funds, no activity reports, lack of supporting documents, unaccounted fuel, failure to follow procurement process, direct procurement without any justification, inadequate accountability) and they responded to all as seen from the LGPAC report of 10th /April/2017, 19th /Aug/2017 and 26/10/2017
Asse	essment area: Govern	nance, oversight, transparency and accou	untability	

10	The LG committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council Maximum 6 for this performance measure	Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3	3	The Standing Committee for Works/Technical & Community Based Services at its meeting held on 02/08/2016 under Min. KDC/20/8/2016(b), considered the Water Department's report where the following issues were considered: construction of 9 boreholes; rehabilitation of boreholes at UGX.16mn and sensitisation of community on modalities of repair of water points.
		Evidence that the water sector committee has presented issues that require approval to Council: score 3	3	The Standing Committee for Works/Technical & Community Based Services at the Third Main Council meeting held on 23/02/2017 under Min. 127/2/2017 (a) "Laying of Committee Reports" requested for the approval of additional funding to the tune of UG.6mn/= towards monitoring of water projects.
11	The LG Water department has shared information widely to the public to enhance transparency	The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2	2	Displays of releases are made

Maximum 6 points for this performance measure

All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2	2	• Engravement done on padestral. Information seen .Visited :- Village: Abwor DWD No. 48974 Date: 13th April 2015 Funding: PRDP FY: 14/15 Contractor: Sumadhura Village: Atigomer DWD No. 41595 Date: 20th June 2013 Funding: PAF FY 2012/13 Contractor: Galxy agrotech
• Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2	0	no contract sum shown

12	Participation of communities in WSS programmes Maximum 3 points for this performance measure	If communities apply for water/public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1	1	 Evidence file with applications from the communities), eg letter from subcounty chief of Alito under minute 01/08/2017 dated 21st aug 2017 identified priority water point sources in participation with the communities Letter by CDO to DWO FROM Akalo s/c min 5/1/8/2017 with participation of communities dated 4/9/2017, Ush 200,000 as capital cash community contribution per new borehole. Ush 100,000 for rehab. Evidence of payment in bank via bank of Africa deposit 0f 200,000 from Alid cell dated 12 Oct 2017. The WUC is paid lowest 500 to 1,000 per household per month
		Number of water supply facilities with WSCs that are functioning evidenced by collection of O&M funds and carrying out preventive maintenance and minor repairs, for the current FY: score 2	0	•No Evidence seen of collections made
Asse	essment area: Social	and environmental safeguards		
13	The LG Water department has devised strategies for environmental	• Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2	0	No evidence of environmental screening
	conservation and management Maximum 4 points	Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1	0	no evidence of followup
	for this performance measure	Evidence that construction and supervision contracts have clause on environmental protection: score 1	1	The contract document of Silbalaji Industries Ltd did cover Environment as a bill item, dated 14th Nov 2017

14	The LG Water department has promoted gender equity in WSC composition. Maximum 3 points for this performance measure	• If at least 50% WSCs are women as per the sector critical requirements: score 3	3	 Evidence from Attendance list of a sensitization village meeting in telera b dated 6th Oct 2017 not cear- WUC 3 were women, out of 6, key position (c/man a woman) Attendance list of training of WUC Witin viiale, akalo s/c dated 25th nov 2016, 3 women 4 men
15	Gender- and special-needs sensitive sanitation facilities in public places/RGCs. Maximum 3 points for this performance measure	If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3	3	Evidence seen of latrines with separate stances for men, women and ramp for disabled