



## Local Government Performance Assessment

Mitooma District

(Vote Code: 601)

Assessment	Scores
Accountability Requirements	83%
Crosscutting Performance Measures	65%
Educational Performance Measures	58%
Health Performance Measures	61%
Water Performance Measures	51%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Annual performance contract			
<p>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.</p>	<ul style="list-style-type: none"> <li>• From MoFPED's inventory/schedule of LG submissions of performance contracts, check dates of submission and issuance of receipts and:               <ul style="list-style-type: none"> <li>o If LG submitted before or by due date, then state 'compliant'</li> <li>o If LG had not submitted or submitted later than the due date, state 'non-compliant'</li> </ul> </li> <li>• From the Uganda budget website: <a href="http://www.budget.go.ug">www.budget.go.ug</a>, check and compare recorded date therein with date of LG submission to confirm.</li> </ul>	<p>The LG had submitted the Annual Performance Contract for FY 2018/19 on the 31st /07/2018 as per the information on the PBS report at the LG planning unit and MOFPED web site <a href="http://WWW.budget.go.ug">WWW.budget.go.ug</a></p>	Yes
Supporting Documents for the Budget required as per the PFMA are submitted and available			
<p>LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY by 30th June (LG PPDA Regulations, 2006).</p>	<ul style="list-style-type: none"> <li>• From MoFPED's inventory of LG budget submissions, check whether:               <ul style="list-style-type: none"> <li>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.</li> </ul> </li> </ul>	<p>The LG had submitted a Budget that included a Procurement Plan for the FY 2018/19 on the 31st /07/2018 as per the information on the PBS report at the LG planning unit and MOFPED website <a href="http://WWW.budget.go.ug">WWW.budget.go.ug</a></p>	Yes

Reporting: submission of annual and quarterly budget performance reports

<p>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)</p>	<p>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:</p> <ul style="list-style-type: none"><li>• If LG submitted report to MoFPED in time, then it is compliant</li><li>• If LG submitted late or did not submit, then it is not compliant</li></ul>	<p>The LG had submitted the Annual Performance Report for the FY 2017/2018 on 31st /07/2018 as per the information on the PBS report at the LG planning unit and MOFPED website <a href="http://WWW.budget.go.ug">WWW.budget.go.ug</a></p>	<p>Yes</p>
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<p>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).</p>	<p>From MoFPED's official record/ inventory of LG submission of quarterly reports submitted to MoFPED, check the date MoFPED received the quarterly performance reports:</p> <ul style="list-style-type: none"> <li>• 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).</li> <li>• If LG submitted late or did not submit at all, then it is not compliant.</li> </ul>	<p>The LG had Submitted all the quarterly budget performance reports for the FY 2017/2018: Three of these Quarterly submissions were out of time as provided for in the PFMA 2015 except for quarter 4. The assessment noted that the reporting time lines had been adjusted through various instructions/ letters issued by the PS/ST ministry of finance to accounting officers for various reasons.</p> <table border="0"> <thead> <tr> <th>Quarter</th> <th>Date of submission</th> <th>Reference</th> </tr> </thead> <tbody> <tr> <td>Quarter 01</td> <td>03rd /01/2018</td> <td>MOFPED website WWW.budget.go.ug</td> </tr> <tr> <td></td> <td></td> <td>PBS report LG planning unit</td> </tr> <tr> <td>Quarter 02</td> <td>15th /3/2018</td> <td>MOFPED website WWW.budget.go.ug</td> </tr> <tr> <td>Quarter 03</td> <td>04th/06/2018</td> <td>MOFPED website WWW.budget.go.ug</td> </tr> <tr> <td></td> <td></td> <td>PBS report LG planning unit</td> </tr> <tr> <td>Quarter 04</td> <td>31st /07/2018</td> <td>MOFPED website WWW.budget.go.ug</td> </tr> <tr> <td></td> <td></td> <td>PBS report LG planning unit</td> </tr> </tbody> </table>	Quarter	Date of submission	Reference	Quarter 01	03rd /01/2018	MOFPED website WWW.budget.go.ug			PBS report LG planning unit	Quarter 02	15th /3/2018	MOFPED website WWW.budget.go.ug	Quarter 03	04th/06/2018	MOFPED website WWW.budget.go.ug			PBS report LG planning unit	Quarter 04	31st /07/2018	MOFPED website WWW.budget.go.ug			PBS report LG planning unit	<p>Yes</p>
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<p>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 findings where the Internal Auditor and the Auditor General recommended the Accounting Officer to take action in lines with applicable laws.</p>	<p>From MoFPED's Inventory/record of LG submissions of statements entitled "Actions to Address Internal Auditor General's findings",</p> <p>Check:</p> <ul style="list-style-type: none"> <li>• If LG submitted a 'Response' (and provide details), then it is compliant</li> <li>• If LG did not submit a 'response', then it is non-compliant</li> <li>• If there is a response for all –LG is compliant</li> <li>• If there are partial or not all issues responded to – LG is not compliant.</li> </ul>	<p>A report (Ref: CR.252/5) dated 18/04/18 on the implementation status of FY 2016/17 audit recommendations was submitted by the CAO to the PS/ST. The report which addressed 12 internal audit and 4 Auditor General recommendations was received at MoFPED on 20/04/18. Each audit recommendation had clear actions against it taken to address it. The report was submitted beyond the deadline of February.</p>	<p>No</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.</p>		<p>The district had an unqualified audit opinion for its FY 2017/18 financial report.</p>	<p>Yes</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>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</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a district/ municipality has:</p> <ul style="list-style-type: none"> <li>• A functional Physical Planning Committee in place that considers new investments on time: score 1.</li> </ul>	<p>From the minutes of meetings held, the Physical Planning Committee was functional and composed of 8 members appointed by the CAO on 11th/5/2017 with planner as secretary and CAO as chairperson.on average 7 members had attended meetings of the physical planning committee as per the minutes reviewed..</p> <p>At the time of assessment 2 members from the private sector (physical planner and architecture) had not been identified and appointed by the CAO; besides the district did not have a physical planner hence the committee composition at assessment did not comply with the membership provided under the physical planning Act 2010.</p> <p>The physical planning committee did not consider new investments nor did the committee maintain a plan register.</p> <p>According to the Ag head natural resources services the committee had not been trained on its roles and functions by MoLHUD, besides funds were not allocated for its activities.</p>	<p>0</p>

<p>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</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that district/ MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD score 1.</li> </ul>	<p>2 Sets of minutes signed by CAO as chairperson of the Physical Planning Committee instead of 4 were submitted to MoLHUD. Stamp received minutes dated 19th/6/2017 were received on 29th /11/2017 at MoLHUD, minutes dated 28th /6/2018 were received on 29th /6/2018 at MoLHUD all the meetings had been attended by 8 members.</p>	<p>0</p>
<p>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</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> <li>• All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0</li> </ul>	<p>The LG did not have a physical development plan as such the LG could not align the consistency of infrastructure investments to the development plan.</p>	<p>0</p>

<p>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</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> <li>Action area plan prepared for the previous FY: score 1 or else 0</li> </ul>	<p>The LG did not have action area plans for the FY 2017/18. This was attributed to the absence of a physical planner and lack of a budget at the LG.</p>	<p>0</p>
<p>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</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.</li> </ul>	<p>From the budget conference report dated 26th/10/2017 and the TPC meeting held on 9th /01/2018 under minutes 9/TPC/2018 discussing and approving project profiles. The LG priorities in the AWP for FY 2018/19 were derived from outcomes of the budget conferences.</p>	<p>2</p>



<p>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</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• 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.</li> </ul>	<p>The capital investments in the approved Annual Work Plan for the FY 2018/2019 were derived from the approved Five-Year Development Plan for instance; Construction of kibazi GFS, Rushozi GFS, Construction of solar power at Mutesibuka on pg 89 (DDP), pg41 (AWP), Construction of 7 spring tanks pg 89 (DDP) , pg 53 (AWP), Construction of classroom pg 89 (DDP) , pg41(AWP), Construction of 15 stance VIP pg 90 (DDP) , pg42(AWP), construction of shallow wells pg 89 (DDP), pg53-54(AWP) , Completion of Agro vet lab pg 90 (DDP) pg 37(AWP)</p>	<p>1</p>
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<p>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</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2.</li> </ul>	<p>The project profiles were prepared as per LG Planning guidelines. The TPC meeting held on 9th /01/2018 under minute 9/TPC/2018 discussed the LG investments profiles in the AWP FY 2018/19.</p>	<p>2</p>
<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> <li>• 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.</li> </ul>	<p>The annual statistical abstract with gender disaggregated data were compiled/ signed off by the Ag District chairperson on 06th /06/2018 to support decision making on budgetary allocation. The statistical abstracts were presented to the TPC by planner on 9th/1/2018 under minute 9/TPC/2018 approved by the CA0. under minute 9/TPC/2018</p>	<p>1</p>

<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>From the AFA the Infrastructure projects implemented by the LG in the FY 2017/2018 were derived from the Annual Work Plan and Budget approved by the LG Council for instance; construction of classrooms, pg 41-42 (AWP), Construction of 15 VIP latrines, pg 42 (AWP), Construction of Agro vet, pg 37 (AWP), Construction of piped water supply systems, pg 54 (AWP), Construction of 3 spring tanks, pg 53(AWP)</p>	<p>2</p>
<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY.</li> <li>o 100%: score 4</li> <li>o 80-99%: score 2</li> <li>o Below 80%: 0</li> </ul>	<p>From the annual performance reports, AFA and the completion certificates the investment projects completed in FY 2017/18 were in line with the work plan and approved annual budget;</p> <ul style="list-style-type: none"> <li>- Construction of kibazi GFS contract no. MIT0601/WRKS/17-18/00007 CERT.NO.02</li> <li>- Construction of Drs House at Mitooma HC IV. Contract no. MIT0601/WRKS/17-18/00002</li> <li>- Construction of lined latrine at Mayanga P/S. Contract no. MIT0601/WRYS/17-18/00003. CERT NO.02</li> <li>- Construction of 5 stance lined latrine. Contract no. MIT0601/WRKS/17-18/00004. CERT NO.01</li> <li>- Construction of lined latrine at Rugando P/S. CERT 01. Contract no. MIT0601/WRKS/17-18/00003</li> <li>- Construction of 2 classroom block at Karoza P/S. CERT.02 Contract no. MIT0601/WRKS/17-18/00005</li> <li>- Construction of classroom block at Nyakahita P/S. CERT NO. 02 contract no. MIT0601/WRKS/17-18/00010</li> <li>- Construction of Kanyabwanga and Kigyanda GFS. MIT0601/WRKS/17-18/00010 CERT NO 01</li> <li>- Construction of 2 classroom block. CERT NO 2. Contract MIT0601/WRKS/17-18/00006</li> </ul>	<p>4</p>

<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2</li> </ul>	<p>From the AFA and contracts register all investment projects in the FY 2017/18 were completed within plus or minus 15% of the approved annual budget for instance ; Construction of Agro vet lab planned at UGX 21,931,000 and actual expenditure UGX 21,399,445, Construction of 4 classrooms planned at UGX 123,513,000 and actual expenditure UGX 116,834,656 and Construction of VIP latrines planned at UGX 39,909,000 and actual expenditure UGX 37,722,215, Construction of Dr House planned at 50,000,000 and actual expenditure 46,879,854</p>	<p>2</p>
<p>The LG has executed the budget for construction of investment projects and O&amp;M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has budgeted and spent at least 80% of the O&amp;M budget for infrastructure in the previous FY: score 2</li> </ul>	<p>From the AFA a budget provision of UGX 59 million for O&amp;M was made in FY 2017/2018.</p> <p>Actual expenditure on O&amp;M during the FY 2017/2018 was UGX 55,447,640 making 93%. However the LG was in the processes of updating its assets register for infrastructure. No maintenance plan had been put in place for infrastructure by the CFO.</p>	<p>2</p>
<p>Human Resource Management</p>			

<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has filled all HoDs positions substantively: score 3</li> </ul>	<ul style="list-style-type: none"> <li>• Some of the HODs positions are not substantially filled and . these are CFO, district engineer which is 22.2%</li> <li>• Ref to the approved staff structure ref ARC 135/306/01</li> </ul>	<p>0</p>
<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• All the substantive heads of department were appraised reference to personnel files MDLG/0/4028, MDLG/0/4009, MDLG/0/4026,File no 4011, MDLG/0/4016. these were 100% appraised</li> </ul>	<p>2</p>
<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100 % of staff submitted for recruitment have been considered: score 2</li> </ul>	<ul style="list-style-type: none"> <li>• Minutes of 40th meeting of Mitooma DSC held on 22nd and 23rd march 2018 minute 362/2018 to minute 365/2018.</li> <li>• Submissions from CAO Ref CR. 156/1</li> <li>• ADVERT on feb 16th 2018</li> </ul>	<p>2</p>

<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100 % of positions submitted for confirmation have been considered: score 1</li> </ul>	<ul style="list-style-type: none"> <li>• Minutes of 36th meeting of the Mitooma DSC held on 21st june -23rd june 2017 I the council hall ,</li> <li>• Minute 322/2017. Minute 323/2017, minute 324/2017, minute 324/2017,minute 327/2017, minute 328/2017, minute 329/2017, minute 329/2017, 330/2017.</li> </ul> <p>Nine staff were confirmed.</p>	<p>1</p>
<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that 100 % of positions submitted for disciplinary actions have been considered: score 1</li> </ul>	<ul style="list-style-type: none"> <li>• One disciplinary case was submitted case was submitted of a medical office as per the minutes of the 37th meeting of mitooma district commission held from the district council hall on 14th – 15th September 2017 min. 345/2017</li> <li>• Letter to CAO to take action Ref DSC/212/1 dated 13/11/2017</li> <li>• Medical officers response 14th September 2017</li> </ul>	<p>1</p>
<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<ul style="list-style-type: none"> <li>• Not all the staff were able to access the pay roll in two months</li> </ul>	<p>0</p>

<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<ul style="list-style-type: none"> <li>The 19 staff that retired were not able to access the payroll in two months as per the payroll.</li> </ul>	0
Revenue Mobilization			
<p>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)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> <li>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.</li> <li>If the increase is from 5% -10 %: score 2.</li> <li>If the increase is less than 5 %: score 0.</li> </ul>	<p>Local revenue performance for FY 2016/17 was Shs 211,084,255. For FY 2017/18, Shs 550,470,448 was realised, but it included Shs 330,400,000 received from UNRA with respect to compensation of district assets and properties due to encumbrance of ongoing road works. This amount was deducted, leaving Shs 220,070,448 for FY 2017/18. The increase from the previous year was therefore Shs 8,986,193, which was 4.2%. This falls below 5%.</p>	0
<p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>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.</li> </ul>	<p>Mitooma DLG original budget for FY 2017/18 was Shs 320,042,000. Actual local revenue performance for the same year was Shs 220,070,448. The different was Shs 99,971,552, meaning that performance was 31% below the budget. This falls outside the +/- 10% range.</p>	0

<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2</li> </ul>	<p>Mitooma DLG financial statements for FY 2017/18 show that Shs 72,936,035 was collected for LST during the year.</p> <p>The district's financial statements for FY 2017/18 show that Shs 17,815,475 was remitted to LLGs (Annex II - Trial Balance). Examples included transfer of Shs 9,063,475 of Local Service Tax remitted to 10 sub counties on 20/11/17, Shs 3,985,000 remitted to 2 sub counties on 23/10/17 and Shs 4,957,000 remitted to another 2 sub counties on 23/10/17.</p> <p>Though the LG made efforts to remit the mandatory share of local revenue to LLGs, it fell much below the mandatory 65% threshold.</p>	<p>0</p>
<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>For FY 2017/18, total expenditure on Council from OSR was Shs 28,194,331. Total OSR income for the previous year (FY 2016/17) was Shs 211,084,255. The proportion of the expenditure to the previous year income was 13.3%, which was well within the 20% limit.</p>	<p>2</p>
<p>Procurement and contract management</p>			
<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<ul style="list-style-type: none"> <li>- There WAS Evidence that Mitooma DLG had the position of a Senior Procurement Officer substantively filled under DSC Min. No. 10/2011 Dated 06/04/2011. Ms Florence Kyomukama was the name of the Senior Procurement Officer.</li> <li>- There WAS Evidence that Mitooma DLG had the position of Procurement Officer substantively filled under DSC Min. No. 380/2018 Dated 17/05/2018. Mr. Atamba Caleb was the name of the Procurement Officer.</li> </ul>	<p>2</p>



<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1</li> </ul>	<p>There WAS Evidence that TEC Produced and Submitted Reports to the Contracts Committee for the previous FY (2017/2018 FY) as exemplified by the following projects:</p> <ul style="list-style-type: none"> <li>- Construction of the Doctor’s House at Mitooma Health Center IV under Local Revenue (MITO/601/WRKS/2017-18/00002). TEC Min Date: 09/January/2018.</li> <li>- Construction of 2 Spring Tanks at KAMABARE in Bitereko Sub-county and KYEMENGO in Kiyanga Sub county and One Protected Spring at KYAKAHAMBA in Mutara Sub county under DWSCG (MITO/601/WRKS/2017-18/00009). TEC Min Date: 09/January/2018.</li> <li>- Construction of KIBAZI Gravity Flow Scheme (GFS); Phases I and II under DWSCG (MITO/601/WRKS/2017-18/00007). TEC Min Date: 08/January/2018.</li> <li>- Rehabilitation of KANYABWANGA and KIGYENDE Gravity Flow Scheme (GFS) in KANYABWANGA Sub-county under DWSCG (MITO/601/WRKS/2017-18/00010). TEC Min Date: 08/January/2018.</li> <li>- Construction of 2 Classroom Block at KAROZA P/S in Mitooma Sub-county under SFG (MITO/601/WRKS/2017-18/00005). TEC Min Date: 05/January/2018.</li> </ul>	<p>1</p>
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<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the Contracts Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1</li> </ul>	<p>There WAS Evidence that Mitooma District Contracts Committee considered recommendations of the TEC and provided justifications for any deviations from those recommendations as exemplified by the following projects:</p> <ul style="list-style-type: none"> <li>- Construction of the Doctor’s House at Mitooma Health Center IV under Local Revenue (MITO/601/WRKS/2017-18/00002). DCC Min Date: 19/January/2018, Meeting Reference No. 03.</li> <li>- Construction of 2 Spring Tanks at KAMABARE in Bitereko Sub-county and KYEMENGO in Kiyanga Sub county and One Protected Spring at KYAKAHAMBA in Mutara Sub county under DWSCG (MITO/601/WRKS/2017-18/00009). DCC Min Date: 19/January/2018, Meeting Reference No. 03.</li> <li>- Construction of KIBAZI Gravity Flow Scheme (GFS); Phases I and II under DWSCG (MITO/601/WRKS/2017-18/00007). DCC Min Date: 19/January/2018, Meeting Reference No. 03.</li> <li>- Rehabilitation of KANYABWANGA and KIGYENDE Gravity Flow Scheme (GFS) in KANYABWANGA Sub-county under DWSCG (MITO/601/WRKS/2017-18/00010). DCC Min Date: 19/January/2018, Meeting Reference No. 03.</li> <li>- Construction of 2 Classroom Block at KAROZA P/S in Mitooma Sub-county under SFG (MITO/601/WRKS/2017-18/00005). DCC Min Date: 19/January/2018, Meeting Reference No. 03.</li> </ul>	<p>1</p>
<p>The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.</p> <p>Maximum 2 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>(a) There WAS Evidence that the procurement and Disposal Plan for the current year (2018/2019 FY) covered all infrastructure projects in the approved annual work plan and budget as exemplified by the following procurements that were indicated both in the Procurement Plan and in the approved annual work plan and budget for the current FY (2018/2019 FY):</p> <ul style="list-style-type: none"> <li>- Construction of Mitooma District Administration Offices – Phase I under Development Grant (MITO/601/WRKS/2018-19/00005). (Pages 6 and 7 – Mitooma DLG Approved Budget Estimates for 2018/2019 FY, Vote 601, 138172 Administrative Capital, 281504 Monitoring Supervision and Appraisal of Capital Works AND was also indicated as No.8 on Page 2 in Mitooma DLG Approved District Procurement and Disposal Plan for FY 2018/19 Dated 06/August/2018 and Signed by CAO, Received by PPDA Regional Office in Mbarara on 07/August/2018).</li> </ul>	<p>2</p>

- Completion of the Political Wing Office and a Septic Tank at Mitooma District Headquarters under Local Revenue and PMG (MITO/601/WRKS/2018-19/00004). (Pages 6 and 7 – Mitooma DLG Approved Budget Estimates for 2018/2019 FY, Vote 601, 138172 Administrative Capital, 281504 Monitoring Supervision and Appraisal of Capital Works AND was also indicated as No.4 on Page 1 of Works Department Annex in Mitooma DLG Approved District Procurement and Disposal Plan for FY 2018/19 Dated 06/August/2018 and Signed by CAO, Received by PPDA Regional Office in Mbarara on 07/August/2018).

- Construction of a 2 Classroom Block at KANGANGA P/S in Mayanga Sub-county under SFG (MITO/601/WRKS/2018-19/00002). (Page 32 – Mitooma DLG Approved Budget Estimates for 2018/2019 FY, Vote 601, 078180 Classroom Construction and Rehabilitation, 312101 Non-Residential Buildings AND was also indicated as No.1 on Page 1 in Mitooma DLG Approved District Procurement and Disposal Plan for FY 2018/19 Dated 06/August/2018 and Signed by CAO, Received by PPDA Regional Office in Mbarara on 07/August/2018).

- Construction of 3 Lined Latrines at BUGONGO P/S in Bitereko Sub county, KIRAMBI P/S in Mitooma Sub county, BUKUBA P/S in Kashenshero Sub-county under DDEG (MITO/601/WRKS/2018-19/00003). (Page 32 – Mitooma DLG Approved Budget Estimates for 2018/2019 FY, Vote 601, 078181 Latrine Construction and Rehabilitation, 312101 Non-Residential Buildings AND was also indicated as No.2 on Page 1 in Mitooma DLG Approved District Procurement and Disposal Plan for FY 2018/19 Dated 06/August/2018 and Signed by CAO, Received by PPDA Regional Office in Mbarara on 07/August/2018).

- Construction of a 2 Classroom Block at BWEIBARE P/S in Mitooma Town Council under SFG (MITO/601/WRKS/2018-19/00001). (Page 32 – Mitooma DLG Approved Budget Estimates for 2018/2019 FY, Vote 601, 078180 Classroom Construction and Rehabilitation, 312101 Non-Residential Buildings AND was also indicated as No.1 on Page 1 in Mitooma DLG Approved District Procurement and Disposal Plan for FY 2018/19 Dated 06/August/2018 and Signed by CAO, Received by PPDA Regional Office in Mbarara on 07/August/2018).

- Rehabilitation of KATENGA and RUSHOZI Gravity Flow Scheme (GFS) in Katenga Sub-county under DWSCG (MITO/601/WRKS/2018-19/00009). (Page 43 – Mitooma DLG Approved Budget Estimates for 2018/2019 FY, Vote 601, 098184 Construction of Piped Water Supply System, 312104 Other Structures AND was also indicated as No.19 on Page 2 of Works Department Annex in Mitooma DLG Approved District Procurement and Disposal Plan for FY 2018/19 Dated 06/August/2018 and Signed by CAO, Received by PPDA Regional Office in Mbarara on 07/August/2018).

(b) There WAS Evidence that the LG made procurements in previous FY (2017/2018 FY) as per plan (adherence to the procurement plan) for the previous FY (2017/2018 FY) as exemplified by the following procurements that occurred in the Procurement Plan, in the Annual Work Plan and Budget and in Referenced Procurement Files for the previous FY (2017/2018 FY):

- Construction of the Doctor's House at Mitooma Health Center IV under Local Revenue (MITO/601/WRKS/2017-18/00002). (Funded under Minute MIT/COU: 33/2017 (a) Dated 28/09/2017 Presentation and Discussion of Supplementary Budgets by Council AND was also indicated as No.35 on Page 4 in Mitooma DLG Updated District Procurement Plan for FY 2017/18 Dated 20/July/2018 and Signed by CAO, Received by PPDA Regional Office in Mbarara on 24/July/2018).

- Construction of 2 Spring Tanks at KAMABARE in Bitereko Sub-county and KYEMENGO in Kiyanga Sub county and One Protected Spring at KYAKAHAMBA in Mutara Sub county under DWSCG (MITO/601/WRKS/2017-18/00009). (Page 24 - Mitooma DLG Approved Budget Estimates for FY 2017/2018, May 2017, Output 098181 Spring Protection, 312104 Other Structures AND was also indicated as No.28 on Page 4 in Mitooma DLG Updated District Procurement Plan for FY 2017/18 Dated 20/July/2018 and Signed by CAO, Received by PPDA Regional Office in Mbarara on 24/July/2018).

- Construction of KIBAZI Gravity Flow Scheme (GFS); Phases I and II under DWSCG (MITO/601/WRKS/2017-18/00007). (Page 24 - Mitooma DLG Approved Budget Estimates for FY 2017/2018, May 2017, Output 098184 Construction of Piped Water Supply System, 312104 Other Structures AND was also indicated as No.29 on Page 4 in Mitooma DLG Updated District Procurement Plan for FY 2017/18 Dated 20/July/2018 and Signed by CAO, Received by PPDA Regional Office in Mbarara on 24/July/2018).

- Rehabilitation of KANYABWANGA and KIGYENDE Gravity Flow Scheme (GFS) in KANYABWANGA Sub-county under DWSCG (MITO/601/WRKS/2017-18/00010). (Page 24 - Mitooma DLG Approved Budget Estimates for FY 2017/2018, May 2017, Output 098184 Construction of Piped Water Supply System, 312104 Other Structures AND was also indicated as No.30 on Page 4 in Mitooma DLG Updated District Procurement Plan for FY 2017/18 Dated 20/July/2018 and Signed by CAO, Received by PPDA Regional Office in Mbarara on 24/July/2018).

- Construction of 2 Classroom Block at KAROZA P/S in Mitooma Sub-county under SFG (MITO/601/WRKS/2017-18/00005). (Page 17 - Mitooma DLG Approved Budget Estimates for FY 2017/2018, May 2017, Output 078180 Classroom Construction and Rehabilitation, 312101 Non

		<p>Residential Buildings AND was also indicated as No.1 on Page 1 in Mitooma DLG Updated District Procurement Plan for FY 2017/18 Dated 20/July/2018 and Signed by CAO, Received by PPDA Regional Office in Mbarara on 24/July/2018).</p>	
<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/ infrastructure by August 30: score 2</li> </ul>	<p>For current FY (2018/2019), there WAS Evidence that the LG prepared 80% of the bid documents for all investment/infrastructure by August 30. ACTUAL Bid Preparation Dates were NOT available. The Assessor made a calculation based on the respective Dates of Approval of Individual Bid Documents and found that 100% of Bid Documents for 2018/2019 FY were Approved BEFORE August 30, 2018. The Calculation made by the Assessor was based on the following Projects and the respective Dates on which the Projects Bid Documents were approved by Mitooma DLG Contracts Committee:</p> <ul style="list-style-type: none"> <li>- Construction of Mitooma District Administration Offices – Phase I under Development Grant (MITO/601/WRKS/2018-19/00005). The Project Bid Document was approved during a meeting of Mitooma DLG Contracts Committee that was held on 20/08/2018 and that was attended by Senior Assistant Secretary (SAS) Mitooma Sub-county – Chairperson; Engineering Assistant Mitooma Town Council; Senior Inspector of Schools; Senior Procurement Officer.</li> <li>- Completion of the Political Wing Office and a Septic Tank at Mitooma District Headquarters under Local Revenue and PMG (MITO/601/WRKS/2018-19/00004). The Project Bid Document was approved during a meeting of Mitooma DLG Contracts Committee that was held on 20/08/2018 and that was attended by Senior Assistant Secretary (SAS) Mitooma Sub-county – Chairperson; Engineering Assistant Mitooma Town Council; Senior Inspector of Schools; Senior Procurement Officer.</li> <li>- Construction of a 2 Classroom Block at KANGANGA P/S in Mayanga Sub-county under SFG (MITO/601/WRKS/2018-19/00002). The Project Bid Document was approved during a meeting of Mitooma DLG Contracts Committee that was held on 20/08/2018 and that was attended by Senior Assistant Secretary (SAS) Mitooma Sub-county – Chairperson; Engineering Assistant Mitooma Town Council; Senior Inspector of Schools; Senior Procurement Officer.</li> <li>- Construction of 3 Lined Latrines at BUGONGO P/S in Bitereko Sub county, KIRAMBI P/S in Mitooma Sub county, BUKUBA P/S in Kashenshero Sub-county under DDEG (MITO/601/WRKS/2018-19/00003). The Project Bid Document was approved during a meeting of Mitooma DLG Contracts Committee that was held on 20/08/2018</li> </ul>	<p>2</p>

		<p>and that was attended by Senior Assistant Secretary (SAS) Mitooma Sub-county – Chairperson; Engineering Assistant Mitooma Town Council; Senior Inspector of Schools; Senior Procurement Officer.</p> <p>- Construction of a 2 Classroom Block at BWEIBARE P/S in Mitooma Town Council under SFG (MITO/601/WRKS/2018-19/00001). The Project Bid Document was approved during a meeting of Mitooma DLG Contracts Committee that was held on 20/08/2018 and that was attended by Senior Assistant Secretary (SAS) Mitooma Sub-county – Chairperson; Engineering Assistant Mitooma Town Council; Senior Inspector of Schools; Senior Procurement Officer.</p> <p>- Rehabilitation of KATENGA and RUSHOZI Gravity Flow Scheme (GFS) in Katenga Sub-county under DWSCG (MITO/601/WRKS/2018-19/00009). The Project Bid Document was approved during a meeting of Mitooma DLG Contracts Committee that was held on 20/08/2018 and that was attended by Senior Assistant Secretary (SAS) Mitooma Sub-county – Chairperson; Engineering Assistant Mitooma Town Council; Senior Inspector of Schools; Senior Procurement Officer.</p>	
<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2</li> </ul>	<p>For previous FY (2017/2018 FY), there WAS Evidence that the LG had an Updated Contracts Register and had Completed Procurement Activity Files for all procurements as exemplified by the following:</p> <ul style="list-style-type: none"> <li>- An Updated Contracts Register was seen by the Assessor at Mitooma DLG PDU with a Starting/Opening Procurement Entry (S/N 1) Titled ‘Supply of Fuel, Oils and Lubricants and Motor Vehicle Servicing’ Referenced ‘MITO/601/SUPLS/2017-18/00001’, Open Domestic Bidding, Date of Award: 03/July/2017, Several Service Providers, Contract ended on 30/06/2018 AND with an Ending/Closing Procurement Entry (S/N 72) Titled ‘Supply of 4 Laptop Computers to the Planning Unit, Production and Community Based Services and One Desktop’ Referenced ‘MITO/601/SUPLS/2017-18/00014’, Selective Bidding, Date of Award: 05/February/2018, Service Provider: Makerere Corporate Initiative Africa.</li> <li>- Referenced and Completed Procurement Activity Files for all procurements were seen by the Assessor at the PDU.</li> </ul>	<p>2</p>



<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.</li> </ul>	<p>For previous FY (2017/2018 FY), there WAS Evidence that the LG adhered to Procurement Thresholds as exemplified by the following procurements:</p> <ul style="list-style-type: none"> <li>- Construction of the Doctor’s House at Mitooma Health Center IV under Local Revenue (MITO/601/WRKS/2017-18/00002). Contract Amount: 47, 333, 340 UGX. Verified Procurement Method: Open Domestic Bidding. Date of Advertisement: 19/October/2017, Daily Monitor Newspaper, Page 32.</li> <li>- Construction of 2 Spring Tanks at KAMABARE in Bitereko Sub-county and KYEMENGO in Kiyanga Sub county and One Protected Spring at KYAKAHAMBA in Mutara Sub county under DWSCG (MITO/601/WRKS/2017-18/00009). Contract Amount: 19, 680, 011 UGX. Verified Procurement Method: Selective Bidding; Invitation to Bid Dated 01/November/2017, and Signed by CAO.</li> <li>- Construction of KIBAZI Gravity Flow Scheme (GFS); Phases I and II under DWSCG (MITO/601/WRKS/2017-18/00007). Contract Amount: 257, 639, 221 UGX. Verified Procurement Method: Open Domestic Bidding. Date of Advertisement: 19/October/2017, Daily Monitor Newspaper, Page 32.</li> <li>- Rehabilitation of KANYABWANGA and KIGYENDE Gravity Flow Scheme (GFS) in KANYABWANGA Sub-county under DWSCG (MITO/601/WRKS/2017-18/00010). Contract Amount: 25, 852, 515 UGX. Verified Procurement Method: Selective Bidding; Invitation to Bid Dated 01/November/2017, and Signed by CAO.</li> <li>- Construction of 2 Classroom Block at KAROZA P/S in Mitooma Sub-county under SFG (MITO/601/WRKS/2017-18/00005). Contract Amount: 55, 392, 091 UGX. Verified Procurement Method: Open Domestic Bidding. Date of Advertisement: 19/October/2017, Daily Monitor Newspaper, Page 32.</li> </ul>	2
<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>There WAS Evidence that all works projects implemented in the previous FY (2017/2018 FY) were appropriately certified – interim and completion certificates for all projects based on technical supervision as exemplified by the following projects:</p> <ul style="list-style-type: none"> <li>- Construction of 2 Classroom Block at KAROZA P/S in Mitooma Sub-county under SFG (MITO/601/WRKS/2017-18/00005). Certificate for Civil Works/Supplies No.2 Dated 18/04/2018 and Signed by District Engineer, Engineering Assistant (MoES), Authorized by CAO on 23/04/2018.</li> <li>- Construction of 5 Stance Lined Latrine at KITAKA P/S in</li> </ul>	2

Kanyabwanga Sub-county (MITO/601/WRKS/2017-18/00004). Payment Certificate No.1 Dated 11/06/2018. Certified by Acting District Engineer and Approved by CAO on 11/06/2018.

- Construction of 5 Stance Lined Latrines at RUGANDO P/S in Rurehe Sub-county and MAYANGA P/S, ITARA P/S (2 Stance) and BUHARAMBA P/S (2 Stance) in Kabira Sub county under SFG and DDEG (MITO/601/WRKS/2017-18/00003). Payment Certificate No.1 Dated 13/03/2018, Certified by Superintendent of Works, Approved by CAO on 20/03/2018.

- Construction of 2 Classroom Block at NYAKIHITA P/S in Katenga Sub-county under SFG (MITO/601/WRKS/2017-18/00006). Certificate for Civil Works/Supplies No.2 Dated 14/05/2018 and Certified by District Engineer, Engineering Assistant (MoES), Authorized by CAO on 25/05/2018.

- Construction of 2 Spring Tanks at KAMABARE in Bitereko Sub-county and KYEMENGO in Kiyanga Sub county and One Protected Spring at KYAKAHAMBA in Mutara Sub county under DWSCG (MITO/601/WRKS/2017-18/00009). Certificate No.1 Dated 23/04/2018; Certified by Acting District Engineer, Approved by CAO.

- Construction of KIBAZI Gravity Flow Scheme (GFS); Phases I and II under DWSCG (MITO/601/WRKS/2017-18/00007). Interim Payment Certificate No.2 Dated 20/06/2018; Certified by Acting District Engineer, Approved by CAO on 28/06/2018.

- Rehabilitation of KANYABWANGA and KIGYENDE Gravity Flow Scheme (GFS) in KANYABWANGA Sub-county under DWSCG (MITO/601/WRKS/2017-18/00010). Payment Certificate Dated 20/03/2018; Signed by District Water Officer; Approved by CAO on 21/03/2018.

- Construction of the Doctor's House at Mitooma Health Center IV under Local Revenue (MITO/601/WRKS/2017-18/00002). Payment Certificate No.1 Dated 14/05/2018; Certified by Superintendent of Works, Approved by CAO on 17/05/2018.



<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>There was NO Evidence that all works projects for the current FY (2018/2019 FY) were clearly labeled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration since NOT even a single works project for the current FY (2018/2019 FY) had commenced construction by the time the Assessor visited the LG.</p>	<p>0</p>
<p>Financial management</p>			
<p>The LG makes monthly and up to-date bank reconciliations</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4</li> </ul>	<p>For FY 2017/18, the district had 14 bank accounts. As of the date of the assessment on 6th and 7th September 2018, all the accounts were reconciled up to July 2018.</p>	<p>4</p>
<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>If the LG makes timely payment of suppliers during the previous FY <ul style="list-style-type: none"> <li>– no overdue bills (e.g. procurement bills) of over 2 months: score 2.</li> </ul> </li> </ul>	<p>The payments reviewed show that the district makes timely payment of its supplier's dues. Examples include: Payment of Shs 705,376 to Nob General Merchandise for assorted stationery. The invoice is dated 17/05/17 and payment was on 30/05/17(13 days). Payment of Shs 1,804,800 to Phat Enterprises for supply of printed stationery. Invoicing was on 21/05/17, payment on 30/05/17 (9 days) and the same company Shs 770,800 on 19/03/18 and 15/05/18 respectively (1 month 26 days). Payment of Shs 903,152 to Nob General Merchandise for supply of stationery. Invoice on 20/02/18, payment on 05/03/18 (15 days). Payment of Shs 2,426,034 to Alepe (U) Ltd for supply of 12 culverts. Invoice 14/05/18 and payment 29/05/18 (15 days).</p>	<p>2</p>

<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has a substantive Senior Internal Auditor: 1 point.</li> <li>• LG has produced all quarterly internal audit reports for the previous FY: score 2.</li> </ul>	<ul style="list-style-type: none"> <li>• The Mitoma District Internal audit department is headed by Akankwasa Israel who is substantively appointed as Internal Auditor per appointment letter (Ref: 156/4/1) dated 28/06/2013 written by the CAO. He is neither a Senior nor a Principal Internal Auditor.</li> </ul>	<p>0</p>
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• LG has produced all quarterly internal audit reports for the previous FY: score 2.</li> </ul>	<ul style="list-style-type: none"> <li>• The district produced all the 4 quarterly reports for FY 2017/18. The reports are: Quarter 1 dated 30/10/17, Quarter 2 dated 30/01/18, Quarter 3 dated 30/04/18 and Quarter 4 dated 28/07/18.</li> </ul>	<p>2</p>
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<p>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.</p>	<p>Mitooma DLG quarterly internal audit reports do not have a tracker for the implementation status of previous recommendations. Neither is a separation submission on tracking this implementation submitted to the Council or LG PAC. This performance measure is there not currently acted on.</p>	<p>0</p>

<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• 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.</li> </ul>	<p>Internal audit reports for the 4 quarters of FY 2017/18 were submitted to the CAO, LG PAC, CFO, RDC and District Speaker. According to the Internal Audit department delivery book, the reports were delivered as follows: Quarters 1 and 2 on 31/10/17, Quarter 3 on 05/05/18 and Quarter 4 on 10/08/18.</p> <p>DPAC minutes show that effort is made to review and follow up on audit findings. DPAC minutes for the meeting held on 25th and 26th June 2018 show that Quarters 1 and 2 Internal audit reports were discussed and actions taken. DPAC minutes for the meeting held on 12th and 13th March 2018 show that internal audit reports for FY 2016/17 were discussed and actions taken.</p>	<p>1</p>
<p>The LG maintains a detailed and updated assets register</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>The LG has a manual asset register formatted as recommended in the Finance Manual, containing assets such as buildings, motor vehicles, computers, earth moving equipment etc.</p> <p>GoU donated assets however do not have associated costs, as well as values for most buildings and land.</p> <p>Some of these challenges could be remedied by obtaining information from the mother district of Bushenyi or getting current market values for assets such as land.</p>	<p>0</p>
<p>The LG has obtained an unqualified or qualified Audit opinion</p> <p>Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY:</p> <ul style="list-style-type: none"> <li>• Unqualified audit opinion: score 4</li> <li>• Qualified: score 2</li> <li>• Adverse/disclaimer: score 0</li> </ul>	<p>The district had an unqualified audit opinion for its FY 2017/18 financial report.</p>	<p>4</p>
<p>Governance, oversight, transparency and accountability</p>			

<p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>From the minutes of council chaired by the speaker, sector committee reports and departmental reports, the LG Council met and discussed service delivery related issues as provided in the minutes below:</p> <p>Meeting held on 28th /09/2018 under min/MIT/COU/32/2017</p> <p>Meeting held on 7th/03/2018 under min/MIT/COU/52/2018</p> <p>From the DEC min 41/2018, dated 11th /6/2018 and DEC min 33/2018 dated 28th/ 5/2018 the CAO presented issues of service delivery arising from the TPC.</p> <p>However the council had not received or discussed the DPAC report and the LG performance assessment reports for FY 2017/18.</p> <p>The practice at the LG was that the CAO prepares a report to the PS/ST on the extent of the implementation of the internal auditor and DPAC recommendation</p>	<p>0</p>
<p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 1.</li> </ul>	<p>The office supervisor had been appointed in writing on the 11th /05/2017 to coordinate response to feed back on grievance/complaints and responded to the feedback and complaint by organising radio talk shows as per radio talk show report dated 17th /7/2017 on immunisation improvement. A talk show report dated 26/7/2017 on malaria control community sensitisation in Mitooma district and a radio talk show report by the YLP focal point person discussing and sensitising the youth on existing government programmes</p>	<p>1</p>
<p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>The LG had placed a complaints/ suggestion box at the council hall for receiving complaints.</p> <p>Radio talk shows were organised quarterly to address complaint and sensitise the community and caller in sessions were given as seen in the talk show reports.</p>	<p>1</p>

<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<p>Evidence that the LG has published:</p> <ul style="list-style-type: none"> <li>• The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2</li> </ul>	<p>The salary and pensions pay rolls for the month of august were displayed on the walls of the council hall showing 10 pensioners and 1400 staff.</p>	<p>2</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the procurement plan and awarded contracts and amounts are published: score 1.</li> </ul>	<p>The procurement plan and contract awards were displayed in a conspicuous place at the council hall</p>	<p>1</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> <li>• 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.</li> </ul>	<p>There was no evidence that performance assessment results had been published besides the district website was inactive.</p>	<p>0</p>

<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1</li> </ul>	<p>The CAO and district planner in TPCs had communicated and explained circulars and guidelines to LLGs and other staff.</p> <p>-DDEG guidelines in TPC dates 11th /7/2017 under min 57/TPC/2017</p> <p>-Budget call circular in TPC dated 10th/10/2017 under min 89/TPC/2017</p>	<p>1</p>
<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that LG during the previous FY conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc.) with the public to provide feed-back on status of activity implementation: score 1.</li> </ul>	<p>The LG in FY 2017/18 conducted baraza under the office of the RDC and radio talk show on crane FM by the YLP focal officer to sensitise the youth, a talk show had been conducted on BFM radio on immunisation improvement report dated 17th /7/2017 and another talk show on BFM radio on malaria control, report dated 26th/7/ 2017 by the DHO and other district leaders</p>	<p>1</p>
<p>Social and environmental safeguards</p>			

<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG gender focal person and CDO have provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities score 2.</li> </ul>	<p>There WAS Evidence that the LG gender focal person provided guidance and support to sector departments to mainstream gender into their activities as exemplified by the following:</p> <ul style="list-style-type: none"> <li>- The Assessor saw Mitooma DLG Presentation on Mentoring District Technical Planning Committee on Gender, HIV/AIDS, Planning and Budgeting on 19/01/2018. Report compiled by HIV/AIDS/Gender Focal Person.</li> <li>- The Assessor saw Mitooma DLG Presentation on Gender/HIV/AIDS in Planning and Budgeting to a Workshop of Sub county Planners, CBO Representatives, some Sector and Sub sector Heads presented by Gender/HIV/AIDS Focal Person on 05/03/2018.</li> <li>- The Assessor saw Mitooma DLG Presentation on Gender to Mitooma Sub county Stakeholders by Senior Community Development Officer on 05/04/2018.</li> <li>- The Assessor saw Mitooma DLG Report on Training on Gender held on 05/01/2018 at Mutara Sub county Headquarters. Report Compiled by Senior Community Development Officer.</li> <li>- The Assessor saw Mitooma DLG Report on Training on Gender Mainstreaming held on 11/05/2018 at Bitereko Sub-county Headquarters. Report Compiled by Senior Community Development Officer.</li> </ul>	<p>2</p>
<p>The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> <li>• 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.</li> </ul>	<ul style="list-style-type: none"> <li>- There WAS Evidence that gender focal point had planned activities for current FY (2018/2019 FY) to strengthen women's roles. The Assessor saw Mitooma DLG Draft Annual Work Plan 2018/19 FY, March 2018, Section 9, Community Based Services, Page 34 with the following planned activities: Training Women, Youth and PWDs in Gender Group Dynamics and Leadership Skills (8,000,000 UGX – Conditional Grant); Training Men and Women in Gender (1,400,000 UGX – Local Revenue); Supporting Youth Groups (223,597,000 UGX – YLP); Supporting Women Groups (119,674,000 UGX – UWEP).</li> <li>- There WAS Evidence that more than 90% of previous year's budget for gender activities was implemented since Allocations that were made for Gender Activities for FY 2017/2018 were utilized at 100% Level according to computation based on validated Expenditure Vouchers that were retrieved from the Accounts Department by the Gender Focal Point Person.</li> </ul>	<p>2</p>
			<p>1</p>

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

There WAS Evidence that environmental screening or EIA where appropriate, was carried out for activities, projects and plans as exemplified by the following:

- The Assessor saw Environmental and Social Screening Form (ESSF) with Environmental Impacts and Environmental and Social Management Plan (ESMP) for Construction of the Doctor's House at Mitooma Health Center IV under Local Revenue (MITO/601/WRKS/2017-18/00002) Dated 17/07/2017 and Signed by District Environment Officer.

- The Assessor saw Environmental and Social Screening Form (ESSF) with Environmental Impacts and Environmental and Social Management Plan (ESMP) for Construction of 2 Classroom Block at KAROZA P/S in Mitooma Sub-county under SFG (MITO/601/WRKS/2017-18/00005) Dated 21/07/2017 and Signed by District Environment Officer.

- The Assessor saw Environmental and Social Screening Form (ESSF) with Environmental Impacts and Environmental and Social Management Plan (ESMP) for Construction of Mini Office Block at Mitooma District Headquarters Dated 17/07/2017 and Signed by District Environment Officer.

- The Assessor saw Environmental and Social Screening Form (ESSF) with Environmental Impacts and Environmental and Social Management Plan (ESMP) for Construction of VIP Latrine at KITAKA P/S Dated 15/07/2017 and Signed by District Environment Officer.

- The Assessor saw Environmental and Social Screening Form (ESSF) with Environmental Impacts and Environmental and Social Management Plan (ESMP) for Construction of VIP Latrine at RWANGANGA P/S Dated 16/07/2017 and Signed by District Environment Officer.

- The Assessor saw Environmental and Social Screening Form (ESSF) with Environmental Impacts and Environmental and Social Management Plan (ESMP) for Construction of VIP Latrine at NYAKAHITA P/S Dated 10/07/2017 and Signed by District Environment Officer.

- The Assessor saw Environmental and Social Screening Form (ESSF) with Environmental Impacts and Environmental and Social Management Plan (ESMP) for Construction of VIP Latrine at IHUNGU Playground Dated 10/07/2017 and Signed by District Environment Officer.

- The Assessor saw Mitooma DLG Report on Environmental and Social Screening of Projects to be implemented by the District Sector Departments for FY 2017/2018 that contains Environmental and Social Management Plans (ESMPs) for all Projects, Written and Signed by District Environment Officer and Dated 21/07/2017.



		<p>- The Assessor saw Mitooma DLG Report on Implementation of Mitigation Measures, Written and Signed by District Environment Officer and Dated 10/03/2018.</p>	
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1</li> </ul>	<p>There WAS Evidence that the LG integrated environmental and social management plans in the contract bid documents as exemplified by the following projects:</p> <ul style="list-style-type: none"> <li>- Construction of 2 Classroom Block at NYAKIHITA P/S in Katenga Sub-county under SFG (MITO/601/WRKS/2017-18/00006). Bill of Quantities Dated 09/November/2017; Element No.5; Environmental Restoration Budget (596,000 UGX).</li> <li>- Construction of 2 Classroom Block at KAROZA P/S in Mitooma Sub-county under SFG (MITO/601/WRKS/2017-18/00005). Bill of Quantities Dated 09/November/2017; Element No.5; Environmental Restoration Budget (686,000 UGX).</li> <li>- Construction of KIBAZI Gravity Flow Scheme (GFS); Phases I and II under DWSCG (MITO/601/WRKS/2017-18/00007). Bill of Quantities Dated 09/November/2017; Element No.3; Environmental Restoration Budget (500,000 UGX).</li> <li>- Construction of 2 Spring Tanks at KAMABARE in Bitereko Sub-county and KYEMENGO in Kiyanga Sub county and One Protected Spring at KYAKAHAMBA in Mutara Sub county under DWSCG (MITO/601/WRKS/2017-18/00009). Bill of Quantities Dated 15/November/2017; Environmental Restoration Budget (3,443,000 UGX).</li> <li>- Construction of 3 Stance VIP Latrine at IRARAMIRA P/S in Kiyanga Sub-county and 2 Stance VIP Latrine at Kashenshero Town Council Headquarters under DDEG (MITO/601/WRKS/2017-18/00008). Bill of Quantities Dated 07/February/2018; Environmental Restoration Budget (350,000 UGX).</li> </ul>	<p>1</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1</li> </ul>	<p>There WAS Evidence that all projects were implemented on land where the LG had proof of ownership by way of a land title or agreement with land owners as exemplified by the following:</p> <ul style="list-style-type: none"> <li>- Construction of the Doctor’s House at Mitooma Health Center IV under Local Revenue (MITO/601/WRKS/2017-18/00002). Certificate of Title, Freehold Register, Volume MBR 65, Folio 17, Block (Road) 36, Plot 1049 at Mitooma – Ruhinda.</li> <li>- Construction of Mini Office Block at Mitooma District Headquarters. Certificate of Title, Freehold Register, Volume MBR 69, Folio 4, Block (Road) 36, Plot 1048 at Mitooma – Ruhinda.</li> <li>- Mitooma DLG, Village Application Form for a Water Source for Omuburembo/Kigarama Village, Kamabare Parish, Bitereko Sub-county Dated 31/08/2014. Land Agreement Dated 01/09/2014 and Signed by Chairperson of Omuburembo LC I.</li> <li>- Mitooma DLG, Village Application Form for a Water Source (Shallow Well) for NYAMATONGO P/S, Mushunga Parish, Mitooma Sub-county Dated 20/06/2017. Land Agreement Dated 29/08/2017.</li> <li>- Mitooma DLG, Land Agreement for KIGYENDE II Gravity Flow Scheme (GFS) in Kigyende II Village, Kanyabwanga Parish, Kanyabwanga Sub-county Dated 31/03/2016 and Stamped by Chairperson of Kigyende II LC I.</li> <li>- Mitooma DLG, Land Agreement, Katenga and Rushozi Gravity Flow Scheme (GFS) in Rushozi II LC I, Bitooma Parish, Katenga Sub-county, Signed by Sub county Chairperson on 22/03/2016, Signed by Sub county Chief on 22/04/2016.</li> </ul>	<p>1</p>
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<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1</li> </ul>	<p>There was NO Evidence that all completed projects had Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer.</p>	<p>0</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the contract payment certificated includes prior environmental and social clearance (new one): Score 1</li> </ul>	<p>There was NO Evidence that Contract Payment Certificates included prior environmental and social clearance.</p>	<p>0</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that environmental officer and CDO monthly report, includes a) completed checklists, b) deviations observed with pictures, c) corrective actions taken. Score: 1</li> </ul>	<p>There was NO Evidence that Environmental Officer and CDO Monthly Report included a) completed checklists b) deviations observed with pictures c) corrective actions taken.</p>	<p>0</p>
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Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<p>• 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</p>	<p>The LG budgeted for a Head teacher and a minimum of 7 teachers for FY 2018/19 to the tune of 7,213,467,120/= for the 1,077 teachers at 105 schools as per Performance contract CR 103 dated 22/8/2018</p>	4
<p>The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<p>• 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</p>	<p>The LG has deployed a Head teacher and a minimum of 7 teachers per school for the current FY as per list of schools and staff lists.</p> <p>In visited schools, Nkinga P.S had 1 Head teacher 15 teachers for the 951 pupils. In Kyankukwe P.S there were 1 Head teacher and 12 teachers for the 461 pupils. In Rwakahimbi P.S there was a Head teacher and 16 teachers, while at Mitooma Central P.S had a Head teacher and 16 teachers for the 701 pupils.</p>	4

<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has filled the structure for primary teachers with a wage bill provision</li> </ul> <ul style="list-style-type: none"> <li>o If 100%: score 6</li> <li>o If 80 - 99%: score 3</li> <li>o If below 80%: score 0</li> </ul>	<p>The LG has filled the structure for primary teachers with a wage provision by 1,028 teachers out of the 1,077 teachers representing 95.4% of the structure.</p>	<p>3</p>
<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>The LG has not substantively filled all positions of school inspectors as per staff structure. The substantively appointed Inspector is Jane Tushabe.</p>	<p>0</p>
<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> <li>• Primary Teachers: score 2</li> </ul>	<p>The LG has submitted a recruitment plan to HRM for the current FY to fill positions of the following; 25 Head teachers, 5 Deputy Head teachers, 89 Senior Education Assistants, and 41 Education Assistants as per letter dated 3/9/2017.</p>	<p>2</p>

<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> <li>• School Inspectors: score 2</li> </ul>	<p>The LG had submitted a recruitment plan for 1 Inspector in letter dated 3/9/2017</p>	<p>2</p>
<p>Monitoring and Inspection</p>			
<p>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.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> <li>• 100% school inspectors: score 3</li> </ul>	<ul style="list-style-type: none"> <li>• The department has one inspector in place and was not appraised</li> </ul>	<p>0</p>

<p>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.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> <li>• Primary school head teachers o 90 - 100%: score 3</li> <li>o 70% and 89%: score 2</li> <li>o Below 70%: score 0</li> </ul>	<ul style="list-style-type: none"> <li>• 93/105 head teachers were appraised which is 89%.</li> </ul> <p>Some of those that were appraised</p> <ol style="list-style-type: none"> <li>1. KAMUGISHA MOSES BIKUNGU MODEL PS</li> <li>2. AHARIZA WILSON BITEREKO PS</li> <li>3. KATAMBARA JOHN BITOOMA CENTRAL PS</li> <li>4. ZOHAIRE THEODOZIO BABANGIZI PS</li> <li>5. BIRYOMUMAISHO NICHOLAS BUGONGO PS</li> <li>6. MUHANGI VICENT BUHARANBO PS</li> <li>7. KWESIGABO FRANSIS BUKONGORO PS</li> </ol> <p>Some of those that were not appraised include,</p> <ol style="list-style-type: none"> <li>1. MUKIZA BENARD BUSHASHA PS</li> <li>2. BESIGYE GEOFFREY RURASHA ROTOOKYE PS</li> <li>3. TUMWEBAZE CHARLCE IGAMBIRO PS</li> <li>4. BIRINGI ELGARIDAH RWEMIRAMA PS</li> <li>5. BAJUZI SIMON RWAMUNIORI PS</li> </ol>	<p>2</p>
<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>The LG has not communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools. In visited schools, only Mitooma Central and Nkinga had the guidelines, circulars and policies.</p>	<p>0</p>



<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>The LG held a meeting for Head teachers on 9/2/2018 under Min 4/2018 and among others explained and sensitized teachers on Monitoring and Learning Achievement Tool, and closure of unlicensed and unregistered private schools. 73 Head teachers were in attendance.</p>	<p>2</p>
<p>The LG Education Department has effectively inspected all registered primary schools</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> <li>o 100% - score 12</li> <li>o 90 to 99% - score 10</li> <li>o 80 to 89% - score 8</li> <li>o 70 to 79% - score 6</li> <li>o 60 to 69% - score 3</li> <li>o 50 to 59 % score 1</li> <li>o Below 50% score 0.</li> </ul> </li> </ul>	<p>Not all private and public schools have been visited at least once per term and reports produced. 315 inspections were made in previous FY for the 137 schools which required 411 inspections. This represents 76.6% of the required inspections. In visited schools Nkinga P.S was inspected on 13/6/2017, 27/7/2017, 9/8/2017, 7/7/2017, 21/4/2017, 14/5/2017, and 18/10/2017. Kyankuwe was visited on 13/7/2018, 15/3/2018, 15/8/2017, and 1/8/2017. Rwakahimbi P.S was inspected on 27/7/2018, 19/3/2018, and 11/10/2017. Mitooma Central P.S had been inspected on 20/4/2018, 28/7/2017, 19/3/2018 and 19/6/2018.</p>	<p>6</p>

<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>There is evidence that the Education Department had discussed school inspection reports and used reports to make recommendations for corrective action as reflected in Departmental meeting held on 20/11/2017 Min 15/2017. The high rate of absenteeism at Rubirizi, Kitwe, and Rwegero primary schools were discussed. The following teachers were summoned and administrative sanctions administered out of the recommendations from inspection reports;</p> <p>Barigye Richard and Turigye George in letters dated 19/9/2017 and 5/6/2018 respectively.</p> <p>Lightening conductors had been recommended and a meeting held on 23/7/2018 to sensitize Head teachers on the matter of lightening arrestors. Some schools have installed lightening arrestors.</p>	<p>4</p>
<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>An Acknowledgement letter from DES dated 24/4/2018 was available at the Department as evidence of submission of inspection reports to DES for Terms 2 and 3 of 2017/18.</p>	<p>2</p>

<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the inspection recommendations are followed- up: score 4.</li> </ul>	<p>There is evidence that Inspection recommendations are followed up from Head teachers met at visited schools as follows;</p> <p>Nkinga P.S – improving talking compounds, holding AGMs, and establishing a banana plantation</p> <p>Ryakahimbi P.S – compound fencing, closing toilet doors</p> <p>Mitooma Central P.S – Librarian updating borrowing and returning of books, daily update of pupil attendance registers by teachers, and display of Instructional materials.</p>	<p>4</p>
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> <li>o List of schools which are consistent with both EMIS reports and PBS: score 5</li> </ul> </li> </ul>	<p>The LG has not submitted accurate / consistent data pertaining to list of schools in the district. The LG has 137 schools (105 public and 32 private) while EMIS data indicates a total of 172 schools.</p>	<p>0</p>
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<p>Evidence that the LG has submitted accurate/consistent data:</p> <ul style="list-style-type: none"> <li>• Enrolment data for all schools which is consistent with EMIS report and PBS: score 5</li> </ul>	<p>The LG has not submitted accurate/consistent enrolment data. The LG has a total of 51,862 pupils while EMIS data indicates a total of 55,989</p>	<p>0</p>
<p>Governance, oversight, transparency and accountability</p>			

<p>The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>The DEO presented to the Education sector committee his reports on 14/12/2017 and 17/5/2018 under Min 18/2017 and Min 13 b/2018 respectively and discussed issues of over staffing, monitoring and support supervision and school inspections conducted</p>	<p>2</p>
<p>The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the education sector committee has presented issues that require approval to Council: score 2</li> </ul>	<p>There is evidence that the Education sector committee meeting of 28/5/2018 under Min MIT/COU:16/2018 (b) presented the 2018/19 Work Plan to Council for approval. The following projects were also presented for approval in meeting held 16/8/2018:-</p> <p>2 classroom blocks at Bweibare, Kanganga primary schools</p> <p>3 block latrine stance latrines at Bugongo, Kirambi, Bukuba primary schools</p>	<p>2</p>

<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO/ MEO)</p> <ul style="list-style-type: none"> <li>• 100% schools: score 5</li> <li>• 80 to 99% schools: score 3</li> <li>• Below 80 % schools: score 0</li> </ul>	<p>There is evidence of functional SMCs and all the 5 sampled schools had held SMC meetings and submitted their SMC minutes to the DEO's office as indicated below;</p> <p>Rutokye P.S had submitted minutes of meeting held on 28/2/2017 and Head teacher's report was presented under Min 3/2017</p> <p>Rutsiro P.S had submitted minutes of meeting held on 17/3/2018 and Head teacher's report was presented under Min 4 iii</p> <p>Bweibare P.S had submitted minutes of meeting held on 1/4/2018 and Head teacher's report was presented under Min 3 (iii)</p> <p>Iralemirai P.S had submitted minutes of meeting held on 8/4/2018 and Head teacher's report was presented under Min 4</p> <p>Nyakahita has submitted minutes of meeting held on 20/7/2018 and Head teacher's report was presented under Min 1 (a)</p> <p>In visited schools, Nkinga P.S had held the 3 mandatory meetings on 19/10/2017, 7/3/2018, and 6/6/2018. At Kyankukwe, the 3 mandatory meetings had been held on 10/10/2017, 27/2/2018, and 19/6/2018. Kyakahimbi had held the three meetings. At Mtooma Central the meetings were held on 12/10/2017, 14/3/2018, and 24/7/2018.</p>	<p>5</p>
<p>The LG has publicised all schools receiving non- wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG has publicised all schools receiving non-wage recurrent grants</li> </ul> <p>e.g. through posting on public notice boards: score 3</p>	<p>The LG has publicised all schools receiving non-wage recurrent grants through posting on the General District and Department's public noticeboards.</p> <p>In visited schools, Nkinga P.S had the non-wage recurrent grants for Term 2 of 2,473,740/= displayed in the Head teacher's office and the staff room. In Kyankukwe P.S the non-wage recurrent grants were displayed in the Head teacher's office. 1,507,440/= had been received or Term 2. Ryakahimbi P.S the non-wage recurrent grants were displayed in the staff room. 2,566,542/= had been received for Term 2. At Mtooma Central, 1,850,000 was received for Term 2 and this was displayed in the reception office.</p>	<p>3</p>
<p>Procurement and contract management</p>			

<p>The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements,</p> <p>to the Procurement Unit that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>The sector had submitted procurement input to Procurement Unit covering all investment items in the approved Sector annual work plan and budget on 23/2/2018</p>	<p>4</p>
<p>Financial management and reporting</p>			
<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3.</li> </ul>	<p>Mitooma DLG FY 2017/18 payments reviewed show that the district endeavoured to timely certify and recommend suppliers for payment. Examples of payments reviewed include: Payment of Shs 12,578,854 to Zeph Construction for building a latrine at Mayanga P/S. Requisition 16/04/18, certificate 19/04/18 and payment 24/04/18 (8 days). Payment of Shs 16,159,130 to Alepen Construction for construction of a classroom block at Nyakahita P/S. Invoice 09/05/18, certificate 25/05/18 and payment 30/05/18 (21 days). Payment of Shs 421,837,522 to Dolphins Construction Engineers for building classroom blocks at 4 primary schools – Kebiremu, Nkinga, Mutti and Mahwizi. Invoice 16/05/18, certificate 11/04/18, payment 16/04/18 (0 days). Payment of Shs 19,628,482 to Be-Camel (U) Ltd for construction of latrines at Rwagashani P/S. Invoice 05/04/18, certificate 18/04/18 and payment 18/04/18 (14 days). Payment of Shs 19,628,482 to Be-Camel (U) Ltd for construction of latrines at Kitaka P/S. Invoice 11/06/18, certificate 11/06/18 and payment 13/06/18 (2 days).</p>	<p>3</p>

<p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>There was no record that the sector submitted annual performance reports including other quarterly reports for the FY 2017/18 to the planning unit for consolidation by mid July. However it was noted that the LG used an on line reporting system from which the planner concurrently consolidated the quarterly reports as below and from the dates of submission the reports were out of time and beyond mid July.</p> <p>Qtr 4 -31st/7/2018</p> <p>Qtr 3- 4/6/2018</p> <p>Qtr 2-15th/3/2018</p> <p>Qtr 1- 3/1/2018</p>	<p>0</p>
<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> <li>o If sector has no audit query score 4</li> <li>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</li> <li>o If all queries are not responded to score 0</li> </ul>	<p>Mitooma DLG Education department had internal audit queries in FY 2017/18. Though effort was made to respond the queries, there are some which remained by the close of the year.</p> <p>For example Quarter 1 report had a query on non-display of pertinent information and non-maintenance of fixed assets registers at primary schools.</p> <p>Quarter 3 report had queries on an unsupported retention payment for Shs 5,598,478.</p>	<p>0</p>
<p>Social and environmental safeguards</p>			

<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>The LG Education department had not disseminated guidelines on gender.</p>	<p>0</p>
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>The LG Education department in collaboration with gender department have not issued and explained guidelines on sanitation.</p>	<p>0</p>
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the School Management Committee meets the guideline on gender composition: score 1</li> </ul>	<p>The SMCs meet the guideline on gender composition. In visited schools the following females were on the SMCs representing the Foundation body as follows:-</p> <p>Nkinga P.S – Mrs Jane Barishangaho and Mrs Dinnah Kweyamba</p> <p>Kyankukwe P.S – Mrs Dinah Mwebesa, and Rev. Canon Lydia Sabiiti</p> <p>Ryakahimbi P.S – Mrs Gorot Bakuneta and Mrs Klemensia Ahimbisibwe</p> <p>Mittoma Central – Mrs Jolly Tumuheirwe and Mrs Jenepher Byaruhanga</p>	<p>1</p>



<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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:</li> </ul>	<p>The LG Education department in collaboration with Environment department has issued guidelines on environment management in Head teachers meeting held on 9/2/2018. 94 Head teachers were in attendance. The Environment Officer and the MoES headquarters had made follow-up visits on some schools.</p>	<p>1</p>
<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>School infrastructure projects are screened before approval for construction in Physical Planning Committee meetings chaired by the Environment Officer and attended by the DEO. For example Bitereko Infants School and Victory Junior School, Rutookye Preparatory School and Kakamba preparatory were screened on 13th March 2017 under Min. MOIODPPC 12/2017</p>	<p>1</p>
<p>LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 1</li> </ul>	<p>The Environment Officer and Community Development Officer have visited the sites to check whether mitigation plans are complied with. Examples include site meeting at Kaloza P.S held 23/3/2018, and site meeting for Nyakahita P.S held 27/2/2018</p>	<p>1</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>LG has substantively recruited primary health care workers with a wage bill provision from PHC wage</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY</p> <ul style="list-style-type: none"> <li>• More than 80% filled: score 8</li> <li>• 60 – 80% - score 4</li> <li>• Less than 60% filled: score 0</li> </ul>	<ul style="list-style-type: none"> <li>• Approved structure is 245, filled positions 167. The staffing level stands at 68%</li> <li>• Examined are the following Sources of information; Health department staff establishment list report as at the 1st July 2018 dated the 29th August 2018, the approved structure from MOPS and the revised wage bill estimates circular (Ref. HRM 155/222/02, Annex 1B page 3 of 4) from PSST/MOFPED (authored by Kenneth Mugambe) dated 20th March 2018 amounting to UGX.1,581,963,300 provided for the 167 staff positions filled.</li> </ul>	4
<p>The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department</p> <p>Maximum 6 points for this performance measure</p>	<p>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</p>	<ul style="list-style-type: none"> <li>• Included in the District Recruitment Plan (submitted to MOP S of ref CR: 115/2 dated the 12th March 2018)is the component for the Health Department to fill 5 vacant positions of Asst. DHO-Maternal, Senior Health Educator, Assistant Inventory Management Officer, and Porter &amp; Health Assistant.</li> <li>• However, there was no formal submission from the Health Department to the Human Resources Department submitting its component of the Recruitment Plan.</li> </ul>	0

<p>The LG Health department has conducted performance appraisal for Health Centre IVs and Hospital In-charge and ensured performance appraisals for HC III and II in-charges are conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the all health facilities in-charges have been appraised during the previous FY:</p> <ul style="list-style-type: none"> <li>o 100%: score 8</li> <li>o 70 – 99%: score 4</li> <li>o Below 70%: score 0</li> </ul>	<ul style="list-style-type: none"> <li>• The health centre in charges were all appraised ref is on personnel files</li> </ul>	8																				
<p>The Local Government Health department has deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<ul style="list-style-type: none"> <li>• The department deployed staff as per the list submitted and this was consistent with the staff found at the health units visited.</li> <li>• Evidenced from the staff list as of 1st July 2018 and verification of the staffing at the health facilities of : BUKUBA HCII, KANYABANGA HCII, KASHENSHERO HCIII, KABIRA HCIII &amp; MITOOMA HCIV visited on the 6th September 2018. The posting were as follows:</li> </ul> <table border="0" style="width: 100%;"> <tr> <td>BUKUBA HCII</td> <td style="text-align: right;">6</td> </tr> <tr> <td>KANYABANGA HCIII</td> <td style="text-align: right;">11</td> </tr> <tr> <td>KASHENSHERO HCIII</td> <td style="text-align: right;">17</td> </tr> <tr> <td>KABIRA HCIII</td> <td style="text-align: right;">14</td> </tr> <tr> <td>MITOOMA HCIV</td> <td style="text-align: right;">38</td> </tr> </table> <ul style="list-style-type: none"> <li>• The staff present during the visit were as follows:</li> </ul> <table border="0" style="width: 100%;"> <tr> <td>BUKUBA</td> <td style="text-align: right;">5 staff on duty</td> </tr> <tr> <td>KANYABANGA</td> <td style="text-align: right;">6 staff on duty</td> </tr> <tr> <td>KASHENSHERO</td> <td style="text-align: right;">6 staff present at the time of assessment</td> </tr> <tr> <td>KABIRA</td> <td style="text-align: right;">5 staff present</td> </tr> <tr> <td>MITOOMA HCIV</td> <td style="text-align: right;">16 staff present</td> </tr> </table> <ul style="list-style-type: none"> <li>• The source of information was the daily &amp; Monthly attendance Registers and the physical head count.</li> </ul>	BUKUBA HCII	6	KANYABANGA HCIII	11	KASHENSHERO HCIII	17	KABIRA HCIII	14	MITOOMA HCIV	38	BUKUBA	5 staff on duty	KANYABANGA	6 staff on duty	KASHENSHERO	6 staff present at the time of assessment	KABIRA	5 staff present	MITOOMA HCIV	16 staff present	4
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Monitoring and Supervision																							

<p>The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<ul style="list-style-type: none"> <li>The DHO did not communicate guidelines, policies, circulars issued by the national level (The Ministry of Health Guidelines for Local Government Planning process-health sector supplement-2017; Ministry of Health, sector Grant and Budget Guidelines to Local Government FY 2018/19 &amp; Ministry of Health , Policy Strategies for improving health Service Delivery 2016-2021) in the previous year to health facilities.</li> </ul>	0
<p>The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<ul style="list-style-type: none"> <li>There was no evidence that following were guidelines, policies and circulars issued at national level(The Ministry of Health Guidelines for Local Government Planning process-health sector supplement-2017; Ministry of Health, sector Grant and Budget Guidelines to Local Government FY 2018/19 &amp; Ministry of Health , Policy Strategies for improving health Service Delivery 2016/2021) were explained to health facility in-charges.</li> </ul>	0
<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>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</p>	<ul style="list-style-type: none"> <li>The DHT supervised the only HCIV (MITOOMA HCIV).</li> <li>Evidence was the support supervision reports and support supervision log books examined at MITOOMA HCIV and the information on the Supervision Log Book indicated visits on the 24/1//2017 &amp; 13/4/2018 by Stella Nakeya (ADHO-MCH) &amp; Calire(the Nursing Officer)</li> <li>The supervision reports authored by the DHO(Dr. Matene Chris) are dated; 2/10/2017; 9/1/2018; 10/4/2018 &amp; 3/7/2018.</li> <li>The supervision was done by the following members of the DHT; Stella Nakeya(ADHO-MCH), Clare (Nursing Officer) &amp; Dr Matene Chris (DHO)</li> </ul>	3

<p>The LG Health Department has effectively provided support supervision to district health services</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that DHT/MHT has ensured that HSD has supervised lower level health facilities within the previous FY:</p> <ul style="list-style-type: none"> <li>• If 100% supervised: score 3</li> <li>• 80 - 99% of the health facilities: score 2</li> <li>• 60% - 79% of the health facilities: score 1</li> <li>• Less than 60% of the health facilities: score 0</li> </ul>	<p>For the lower health units visited (BUKUBA HCII, KANYABANGA HCIII, KASHENSHERO HCIII &amp; KABIRA HCIII), there was no evidence that the HSD had done support supervision.</p> <p>The supervision log books examined did not bear any supervision visits by the Health Sub-District team though there were reports to show that the HSD did support supervision dated; the 4/10/2017, 19/1/2018, 29/3/2018 &amp; 20/07/2018 authored by Dr. Nassinde Annet( the In-Charge of MITOOMA HCIV)..</p>	<p>0</p>
<p>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</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<ul style="list-style-type: none"> <li>• The quarterly support supervision reports were discussed during both the DHT meetings and the meetings with in-charges authored by the DHO (Dr Matene Chris).</li> </ul> <p>The meetings of the DHT were dated the 2/10/2017; 9/1/2018; 10/4/2018 &amp; 10/7/2018 for 1st, 2nd, 3rd &amp; 4th Quarters respectively and those with In-charges are dated 6/6/2018, 8/1/2018 &amp; 8/9/2018.</p>	<p>4</p>

<p>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</p> <p>Maximum 10 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the recommendations are followed</li> <li>– up and specific activities undertaken for correction: score 6</li> </ul>	<ul style="list-style-type: none"> <li>The recommendations were followed up and specific activities under taken for correction. These included matters of support supervision, cleanliness in the health units, improved diseases surveillance, sanitation &amp; hygiene in the health units.</li> <li>The DHT meetings &amp; reports authored by Dr Chris Matene (dated the 2/10/2017, 9/1/2018, 10/4/2018 &amp; 3/7/2018) indicated the recommendations and follow-ups on the issues raised in the previous supervisions &amp; meetings were made.</li> </ul> <p>As well the comments on the supervision log books examined in the Health Units visited (BUKUBA, KANYABANGA, KASHENSHERO, KABIRA &amp; MITOOMA HCIV) showed recommendations made by the DHT supervisors</p>	6
<p>The LG Health department has submitted accurate/consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> <li>List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>The LG (health department) provided information regarding the list of Health facilities(20) receiving PHC funding consistent with the HMIS list from the Ministry of Health.</li> </ul> <p>The PBS report as well indicated the same number (20) of health facilities in the Ministry of Health list.</p> <ul style="list-style-type: none"> <li>A list of 20 Health Facilities (one HCIV-Govt, one private unit, four PNFP units, 14 Government (LCII &amp; LCIII Health centres) received PHC funding as per the list availed by the DHO's office.</li> <li>The four PNFP units comprises of three under Uganda Catholic Medical Bureau (NYAKATSIRO HCIII, NYAKIZINGA HCI HCII &amp; BUBANGIZI HCII) and one under Uganda Protestant Medical Bureau (RURAMA HCII). The private health unit receiving PHC funding is RUBARE CATHOLIC COMMUNITY HCIII.</li> </ul>	10
Governance, oversight, transparency and accountability			

<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<ul style="list-style-type: none"> <li>The Committee on Social Services met four times in the financial year ( 17/5/2018; 14/12/2017; 26/2/2018 &amp; 13/9/2017 and discussed matters on; staff accommodation, electricity supply in health units, solar power, insufficient drugs, following up KABIRA &amp; RUBARE health units. The meetings were chaired by Hon Councillor NABAASA PHILIP and the secretaries for the meetings were; NDYABAHIKA DICKENS, ATUZAIRE&amp; TUSHABE respectively. These were service delivery issues discussed.</li> </ul>	<p>2</p>
<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the health sector committee has presented issues that require approval to Council: score 2</li> </ul>	<ul style="list-style-type: none"> <li>The Committee on Social Services presented reports to Council for approval.</li> <li>This was evidenced with submission reports dated the 28/5/2018, 21/12/2017, 28/7/2017 &amp; 1/3/2018 by the Chairperson of the Committee (NABAASA PHILIP).</li> <li>The committee on Social Services after meetings presented issues to council for approval. These issues included; upgrading of health centres, construction of district medical store, assignment of a District Assistant drug Inspector (DADI), fencing of MITOOMA HCIV, renovation of Kashenshero HCIII OPD, sanitation &amp; hygiene promotion, district health education in the district among other issues.</li> </ul>	<p>2</p>

<p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 6 points</p>	<p>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> <li>• If 100% of randomly sampled facilities: score 6</li> <li>• If 80-99 %: score 4</li> <li>• If 70-79: %: score 2</li> <li>• If less than 70%: score 0</li> </ul>	<ul style="list-style-type: none"> <li>• All the health facilities visited (MITOOMA HCIV, BUKUBA HCII, KANYABANGA HCIII, KASHENSHERO HCIII &amp; KABIRA HCIII) have functional HUMCs evidenced by minutes of their meetings held during the FY.</li> <li>• The minutes of the HUMC seen from the visited health units of: MITOOMA HCIV met four times during the FY at MITOOMA HCIV on these dates; 14/6/2018, 9/3/2018, 10/1/2018 &amp; 14/9/2017; BUKUBA HCII HUMC met twice during the FY on these dates; 22/12/2017 &amp; 21/6/2018; KANYABANGA HCIII had no evidence of the HUMC meetings; KASHENSHERO HUMC met four times during the FY on the following dates; 15/11/2017, 15/7/2017, 14/12/2017 &amp; 19/4/2018; KABIRA HUMC met only two times on the 19/12/2017 &amp; 26/4/2018 as per evidence examined during the assessment. The issues discussed ranged from the utilization of PHC grant, behaviour of staff towards patients, plans of upgrading the health facilities, drug stock outs.</li> </ul>	<p>6</p>
<p>The LG has publicised all health facilities receiving PHC non-wage recurrent grants</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<ul style="list-style-type: none"> <li>• The department did not publicize the PHC funding to the 20 health units (15 Gov't, 1 private &amp; 4 PNFP)</li> <li>• On the notice boards at the district headquarters examined, there was no evidence that the lists of units receiving PHC funding were displayed.</li> </ul>	<p>0</p>
<p>Procurement and contract management</p>			



<p>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</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the sector has submitted input to procurement plan 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</li> </ul>	<ul style="list-style-type: none"> <li>The department submitted the procurement needs for the current FY 2018/2019.</li> <li>Evidenced from the Annual Work Plans seen from the Planning unit and the PP1 forms signed by the ADHO (Robert Mbeine)</li> </ul>	<p>2</p>
<p>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</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2.</li> </ul>	<ul style="list-style-type: none"> <li>Evidenced from the PP1 forms for the capital project of construction of a Doctor house costing UGX. 49, 991,290 at MITOOMA HCIV signed by the ADHO (Robert Mbeine) on the 6/10/2017. This was beyond the deadline of the 30th September 2017.</li> </ul>	<p>0</p>
<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4.</li> </ul>	<p>Mitooma DLG Health department did not carry out any certified projects in FY 2017/18.</p>	<p>4</p>
<p>Financial management and reporting</p>			

<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>There was no record of the department submitting quarterly reports to the planner however the LG uses an on line reporting system and the planner was able to concurrently consolidate reports for submission and approval. from the dates of submission of Qtr 4 the department submitted beyond mid July and this was out of time as below;</p> <p>Qtr 4- 31st/7/2018</p> <p>Qtr 3-4th/6/2018</p> <p>Qtr 2-15th/3/2018</p> <p>Qtr 1-3rd/1/2018</p>	<p>0</p>
<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>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</p> <ul style="list-style-type: none"> <li>If sector has no audit query: Score 4</li> <li>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</li> <li>If all queries are not responded to Score 0</li> </ul>	<p>Mitooma DLG Health Department had internal audit queries in FY 2017/18. Though effort was made to respond the queries, there are some which remained by the close of the year.</p> <p>For example Quarter 1 reported a missing for Health department, and also on inadequately supported payments to 6 officers to a tune of Shs 961,000. Quarter reported on expired drugs at Mitooma HC IV, non-maintenance of cashbooks at Koburunga HC III and unsupported accountabilities totalling Shs 3,465,000. Quarter 4 reported on unsupported payments of Shs 3,450,000.</p>	<p>0</p>
<p>Social and environmental safeguards</p>			

<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> <li>Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines (i.e. minimum 30 % women: score 2</li> </ul>	<ul style="list-style-type: none"> <li>The compositions of the HUMCs of the five health units visited is (MITOOMA HCIV (5 female &amp; 7 males), BUKUBA HCII (2 Females &amp; 4 Males), KANYABANGA HCIII (1 female &amp; 4 males) KASHENSHERO HCIII (3 Females &amp; 5 Males) &amp; KABIRA (3 females &amp; 3 males)</li> <li>Four of the health units met the gender composition as per guidelines and one (KANYABANGA HCII) did not meet</li> </ul>	<p>0</p>
<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2.</li> </ul>	<ul style="list-style-type: none"> <li>Only MITOOMA HCIV had their sanitation facilities clearly labelled for both males &amp; females and the privacy was as well observed.</li> <li>The rest of the health units visited did not comply with labelling the facilities and observing privacy.</li> <li>The LG did not formally issue guidelines on how to manage sanitation in health facilities.</li> </ul>	<p>0</p>
<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<ul style="list-style-type: none"> <li>The only health project (Doctor's House at MITOOMA HCIV) was screened by the environmental officer (BAGUMA NABOTH) with evidence from the screening forms dated 17/7/2017; the report on environment &amp; social screening of the project dated the 21/7/2017 and the report on the implementation of the mitigation measures dated 10/3/2018. These were all authored by the District Environment Officer- BAGUMA NABOTH.</li> </ul>	<p>2</p>

<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>The environmental officer and community development officer have visited the sites to check whether the mitigation plans are complied with: Score 2</li> </ul>	<ul style="list-style-type: none"> <li>Though it was alleged by the District Community development Officer-BEYENDEZA SAVERINO &amp; the District environment officer-BAGUMA NABOTH that they carried out site visits during the implementation of the project, there was no evidence of site visit reports to confirm these visits.</li> </ul>	<p>0</p>
<p>The LG Health department has issued guidelines on medical waste management</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> <li>Evidence that the LG has issued guidelines on medical waste management, including guidelines (e.g. sanitation charts, posters, etc.) for construction of facilities for medical waste disposal: score 4.</li> </ul>	<ul style="list-style-type: none"> <li>Guidelines on waste management were distributed to health units as evidenced from the distribution lists seen from the DHO's Office and copies of the guidelines seen at the health units visited. The Health units visited displayed the Waste Management Instructions at the Health units boards. The waste management guideline booklets were seen in all the health units visited.</li> </ul>	<p>4</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> <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:               <ul style="list-style-type: none"> <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> </li> </ul>	<ul style="list-style-type: none"> <li>- From the DWO Summary of the safe water coverage submitted to Chief administrative officer showing the average safe water coverage of the district (69%) and each of the sub counties was presented and also was compared with computed safe water coverage from MoWE.</li> </ul> <p>From the AWP 2018/2019 submitted to MoWE it was established that a budget of 228,993,381m was allocated to water projects and out 360m, 30m was allocated to sub counties below the district safe water coverage which constitutes 13% of the allocation these include Katenga GFS in katenga sub county</p>	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

- Evidence that the district Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY.

- o If 100 % of the water projects are implemented in the targeted S/Cs:

Score 15

- o If 80-99%: Score 10

- o If 60-79: Score 5

- o If below 60 %: Score 0

- From the DWO progress reports submitted to MWE on 4/8/2018, It was established that 4 sub counties out of 10 Sub-counties were below the average safe water coverage of the district and these included bitereko 66.08, Kabira 66.44, Katenga 67.69. Kiyanga 45.71

It was established that out of 4 sub counties that are below safe water coverage, 2 sub counties were targeted.

It was established that a total of 5 Projects were implemented and out of 5 projects 3 were implemented in the subcounties below the average district safe water coverage Which constitutes 60% and these protection of springs in kiyanga s/c, bitereko s/c, rehabilitation of bore hole in kanyabwanga

Monitoring and Supervision

<p>The district Water department carries out monthly monitoring of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the district Water department has monitored each of WSS facilities at least annually.</p> <ul style="list-style-type: none"> <li>• If more than 95% of the WSS facilities monitored: score 15</li> <li>• 80% - 95% of the WSS facilities - monitored: score 10</li> <li>• 70 - 79%: score 7</li> <li>• 60% - 69% monitored: score 5</li> <li>• 50% - 59%: score 3</li> <li>• Less than 50% of WSS facilities monitored: score 0</li> </ul>	<p>From the Annual work plan of 2017/2018 it was established that 5 projects were planned for and also implemented and supervised and monitored in the same financial year.</p> <p>From the monitoring report file, monthly reports on supervised and monitored projects were available and these included;</p> <ul style="list-style-type: none"> <li>- A monitoring and supervision report on the 3 constructed springs dated 16/5/2018 was compiled</li> <li>- A report on supervision and monitoring report on the construction of kibazi GFS dated on 25/6/2018 was compiled</li> <li>- A supervision report on kanyabwanga gfs dated on 20/3/2018 was compiled.</li> <li>- A report on the supervision of 3 springs of kyakahamab, kamabare and kayanengo dated on 23/4/2018 was compiled.</li> <li>-</li> <li>- A report on monitoring of katagata GFS dated on 21/6/2018 was compiled</li> </ul>	<p>15</p>
<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>• Evidence that the district has submitted accurate/consistent data for the current FY: Score 5</li> <li>• List of water facility which are consistent in both sector MIS reports and PBS: score 5</li> </ul>	<p>From the Work plans and MIS reports obtained from the DWO, MIS that were submitted to MoWE on 7/5/2017 and 1/8/2018, it was established that the all the water facilities existed in all the three reports Which are the PBS, DWO reports and MIS MoWE reports . These included kibazi gfs, katenga Gfs rehabilitation of spring spring tank construction, kyamengo, kyakarambi,kamabare</p>	<p>5</p>

<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> <li>List of water facility which are consistent in both sector MIS reports and PBS: score 5</li> </ul>	<p>From the MIS data established from the MoWE and DWO it was established that water facilities in MIS reports were also in PBS report these included kyamengo, kyakahamba,kamabare</p>	<p>5</p>
<p>Procurement and contract management</p>			
<p>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</p> <p>Maximum 4 for this performance measure</p>	<p>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</p>	<p>From the DWO a copy of the district consolidated procurement plan was available and the district water office submitted to PDU on 10/7/2018 and the dealine should be by 30th April</p>	<p>0</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>From the DWO, it was established that there was no contract management plan in place for the projects implemented</p>	<p>0</p>



<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If water and sanitation facilities constructed as per design(s): score 2</li> </ul>	<p>From the sampled projects of kibazi GFS, and the 2 springs of kyakahabma and kyamengo, it was established that the construction were done as per designs with 30m3 Reserve tank, fenced with chain link, the spring source had collection tank fence and steps with a drainage channel reserve tanks and a fence all in good condition and functioning.</p>	<p>2</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If contractor handed over all completed WSS facilities: score 2</li> </ul>	<p>From the DWO it was established that they were no hand over reports of the completed projects by the contractors.</p>	<p>0</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2</li> </ul>	<p>From the copies of certificates obtained from the DWO that were certified by the DWO. This included kibasi GFS payment certificate that was certified on 20/6/2018, payment certificate of kanyabwanga GFS rehabilitation dated on 20/3/2018, payment certificates of 3 springs dated on 23/4/2018 and all completion reports were attached.</p>	<p>2</p>

<p>The district Water department has certified and initiated payment for works and supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points</li> </ul>	<p>Mitooma DLG Water department had three certified projects in FY 2017/18. The payments reviewed show that the district endeavoured to timely certify and recommend suppliers for payment. Examples of payments reviewed include: Payment of Shs 30,258,569 to SAGM Technical Services Ltd for constructions at Kibazi Gravity Flow Scheme. Requisition 20/06/18, certificate 20/06/18 and payment 28/06/18 (8 days). Payment of Shs 20,738,983 to Kamoja Enterprises for rehabilitation of Kanyabwanga Gravity Flow Scheme. Invoice 19/03/18, certificate 21/03/18 and payment 26/03/18 (7 days). Payment of Shs 17,745,366 to Kamu Kamu General Supplies Ltd for construction of two spring tanks at Kamabare, Bitereko and a protected spring at Kyakahamba, Mutara S/C. Invoice 16/04/18, certificate 23/04/18, payment 24/04/18 (8 days).</p>	<p>3</p>
<p>Financial management and reporting</p>			
<p>The district Water department has submitted annual reports (including all quarterly reports) in time to the Plan- ning Unit</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>There was no evidence that the sector submitted the annual performance reports and other quarterly reports to the planner on time. all reports had been generated on line using the PBS and consolidated concurrently by the planner beyond mid July. in the case of Qtr 4 (31/7/2018),Qtr3 ( 04th/6/2018), Qtr 2 (15/3/2018) &amp; Qtr 1 (03/1/2018)</p>	<p>0</p>

<p>The District Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> <li>o If sector has no audit query score 5</li> <li>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</li> <li>If queries are not responded to score 0</li> </ul>	<p>Mitooma DLG Water Department had internal audit queries in FY 2017/18. Though effort was made to respond the queries, there are some which remained by the close of the year.</p> <p>For example Quarter 1 reported on non-compliance with the provisions of the PPDA Act, specifically with respect to violation of procurement thresholds. Quarter 1 also reported on an unsupported payment to Mbeine Robert Shs 1,518,000 and an irregular payment of Shs 400,000 to Atuzarirwe Allen.</p> <p>Quarter 2 reported on unsupported payments to Mbeine Robert Shs 755,000 and Tumwebaze J.B Shs 230,000.</p> <p>Quarter 3 reported on unsupported payments to Mbeine Robert Shs 1,285,000.</p>	<p>0</p>
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Governance, oversight, transparency and accountability

<p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>• 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</li> </ul>	<p>The water, works and roads committee sat quarterly and discussed service delivery issues and reports .Reference the sector committee meeting held on 14th /12/2017 under min 23/wks/2017 signed by the committee chairperson discussing performance of the sector, the committee meeting dated 13th /9/2017 under min 19 /wks/2017 signed by the chairperson of the committee and the committee report to council speaker dated 21st / 12/2017 on performance of Qtr 1 signed by the committee chairperson.</p> <p>However the committee did not discuss performance assessment results, LG PAC reports and submissions from the water and sanitation coordination committee.</p>	<p>0</p>
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<p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that the water sector committee has presented issues that require approval to Council: score 3</li> </ul>	<p>The committee report to council speaker dated 21st/12/2017 on performance of Qtr 1, was clearly intended to account to council and have the sector performance adopted and or approved.</p>	<p>3</p>
<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <li>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.</li> </ul>	<p>From the district notice board, it was established that quarterly releases of funds were displayed and these included Quarter1 64,230,000 quarter 2 50,884,054 quarter 3 79,862,161 Quarter 4 8,560,000 however these were discussed in the advocacy meetings.</p>	<p>2</p>
<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <li>All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2</li> </ul>	<p>From the sampled projects of Kibazi GFS in Mutara S/C and rehabilitation of kanyabwanga GFS, it was established that these were not labeled</p>	<p>0</p>

<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2</li> </ul>	<p>From the district notice board, it was established that all tenders and contract award for the projects implemented were displayed and these included kanyabwanga GFS rehabilitation displayed on 19/1/2018 showing the best evaluated bidder as M/S Kamoja enterprises at cost of 25,852,515, Construction of Kibazi GFS Displayed on 19/1/2018 with the best evaluated bidder as MS Sagma Technical services ltd. At a cost of 257,639,221</p>	2
<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If communities apply for water/ public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1</li> </ul>	<p>From the DWO- Application file, it was established that the village application form of kasho LC1 Ijuma parish was filled and applied for a spring on 26/1/2017, lc1 kyakahamba, Ruburizi parish applied for a spring on 13/1/2016, Lc1 kamabarevillage of bitereko S/C applied for a spring tank</p>	1
<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Water and Sanitation Committees that are functioning evidenced by either: i) collection of O&amp;M funds, ii( carrying out preventive maintenance and minor repairs, iii) facility fenced/protected, or iv) they an M&amp;E plan for the previous FY: score 2</li> </ul> <p>Note: One of parameters above is sufficient for the score.</p>	<p>From the DWO in the water and sanitation committee file, it was established that there were minutes of the WSC meeting held on 5/6/2017 showing revenue of total collection of 3,950,000 and expenditure of 3,800,000</p>	2
Social and environmental safeguards			

<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>From the DWO in the water and sanitation committee file, it was established that they were no reports for environmental screening for the projects implemented</p>	<p>0</p>
<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1</li> </ul>	<p>There was no evidence for follow up support on environmental concerns</p>	<p>0</p>
<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> <li>Evidence that construction and supervision contracts have clause on environmental protection: score 1</li> </ul>	<p>From the DWO, it was established from the contract for the construction of KamabareGFS, kyemango and kyakahind in the BOQs bill No.1 close 1A-3 to 1A-5 was providing for clearing the site and back fill all excavated soil plant trees theta are environmentally friendly, and acceptable to prevent soil erosion.</p>	<p>1</p>

<p>The district Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>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</li> </ul>	<p>From the DWO, it was established that they were reports showing the composition of WSC and for kitenga GFS it was established that for tap 1 babimanya has 4 women out 5 members and tap 2 key positions such as voice chairperson, tresurere, and in charge of health are women</p>	<p>3</p>
<p>Gender and special needs-sensitive sanitation facilities in public places/</p> <p>RGCs provided by the Water Department.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> <li>If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3</li> </ul>	<p>It was established that they were no sanitation facilities constructed for the FY 2017-2018</p>	<p>0</p>