

LGPA 2017/18

Accountability Requirements Mukono Municipal Council (Vote Code: 772)

Assessment	Compliant	%
Yes	4	67%
No	2	33%

Accountability Requirements

Summary of requirements	Definition of compliance	Compliance justification	Compliant?	
Assessment area: Annual performance contract				
LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.	XXX	Final Performance Contract – was submitted on 07/10/2017 - Source: MoFPED 'Status of Submission of Performance Contracts FY 2017/18	No	
Assessment area: Supporting Documents for the Budget req available	uired as per th	e PFMA are submitt	ed and	
LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY (LG PPDA Regulations, 2006).	XXXXX	• The Budget and Procurement Plan for FY 2017/2018 was submitted together with the Draft Performance Contract to MoFPED on 3rd May, 2017	Yes	
Assessment area: Reporting: submission of annual and quar	terly budget pe	erformance reports		
LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)	XXXXX	The Annual Performance Report was submitted to MoFPED on 28th July, 2017 and receipt Sn. 0828 issued.	Yes	

LG has submitted the quarterly budget performance report for all the four quarters of the previous FY; PFMA Act, 2015)	XXXXXX	All four Quarterly Performance Reports were submitted but only the Fourth Quarter Report was not late. 1st Quarter: Submitted 17th November, 2016 sn 0075 Second Quarter: Submitted on 20/02/2017 – sn 0418 Third Quarter Submitted on 5th June, 2017 Fourth Quarter : 28th July, 2017 Sn. 0828	No
The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous financial year by April 30 (PFMA s. 11 2g). This statement includes actions against all findings where the Auditor General recommended the Accounting Officer to take action (PFMA Act 2015; Local Governments Financial and Accounting Regulations 2007; The Local Governments Act, Cap 243).	XXXXX	• The district submitted the status of implementation of audit recommendations dated 27th February, 2017 to the Internal Auditor General on 2nd March, 2017.	Yes
The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer	XXXXX	According to the Auditor General's report for the FY 2017, the audit opinion on the financial statements of Mukono Municipality was unqualified	Yes



LGPA 2017/18

Crosscutting Performance Measures Mukono Municipal Council (Vote Code: 772)

Score 61/100 (61%)

Crosscutting Performance Measures

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Planning,	, budgeting and execution		
1	All new infrastructure projects in: (i) a municipality; and (ii) all Town Councils in a District are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans Maximum 4 points for this performance measure.	Evidence that a municipality/district has: • A functional Physical Planning Committee in place that considers new investments on time: score 2.	2	 The Physical Plan is in Place 2010 – 2020 for the Old Town Council – but additions for 4 wards – Misindye, Bukerere, Nyenje (Goma Division) and Gulu in Central Division Council involved a consultant – started with the detailed plans as they await the physical plan for the greater Kampala The Physical Planning Committee Meets at least once a month to consider submissions . MMC Min 22/2017/a (i) – to approve the detailed plans.
		• All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2.	0	Not all on going infrastructure investments have approved plans. Only about 70% comply to the set requirements.
2	The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan,	• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2.	2	• There was evidence in TPC Minutes and the Budget Conference Report that all priorities in the AWP were based on the outcomes of the budget conference. A copy of the Budget Conference Report dated 24th November, 2017 was availed.
	are based on discussions in annual reviews and budget conferences and have project profiles	• Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If different, justification has to be provided and evidence that it was approved by Council. Score 2.	2	All capital investments in the AWP 2017/2018 were derived from the five- year development plan and approved by council

		• Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1.	0	 Not all projects had project profiles developed
3	Annual statistical abstract developed and applied Maximum 1 point on this performance measure	• Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum 1 point.	0	• The Municipal Council did not prepare an Annual Statistical Abstract for FY 2016/17
4	Investment activities in the previous FY were implemented as per AWP. Maximum 6 points on	• 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	2	A review of the AWP and implementation status, revealed that all Infrastructure projects implemented during 2016/2017 were derived from the approved work plan and budget approved by Council.
	this performance measure.	• Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. o 100%: score 4 o 80-99%: score 2 o Below 80%: 0	2	One project out of six, the Youth Centre was not completed as planned during year as the contractor was reported to have abandoned the site. This accounted for 16.7 incomplete project

5	The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects and assets during the previous FY Maximum 4 points on this Performance Measure.	• Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2	0	Evidence from the fourth Quarter Performance Report revealed the following variances. 1 Maternity Ward Construction at Goma HC III- Phased: Budget : 85,231.000 Actual 81,165.000 (95.23) (4.77%) 2 Three in one staff house - at Bukerere Primary School: Budget- 97,267.000; Actual 92,464.000 (95.06) (4.94%) 3 Five Stance Pit Latrien at Ntawo Public School: Budget 30,000.000 Actual 29,186.000 (97.29) (2.71%) 4 Youth Centre Construction - Phased: Budget 100,000.000 - Actual 66,267.00 (66.27) (33.73%) 5 Street Lighting Budget: 100,000.000 Actual :99,572.000 (99.57) (0.43%) 6 Opening 3kms Operation & Maintenance of Infrastructure : Removal of Bottlenecks - CAR 14,800.00 21,332.00 (144.14 %)
		• Evidence that the LG has budgeted and spent at least 80% of O&M budget for infrastructure in the previous FY: score 2	2	The initial budget for O&M in the 2016/17 work plan was 14,800 but actual expenditure was 21,332. (144%) Initially O&M comprised of desilting and extension of drainage by 10m – as a result of drainage damage after a storm.
Asse	essment area: Human F	Resource Management		
6	LG has substantively recruited and appraised all Heads of Departments Maximum 5 points on this Performance Measure.	• Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2	2	Performance reports were availed for DTC, Principal Education Officer, Municipal Treasurer, DHO and Municipal Engineer. With regard to the one acting in the positions of Trade, Industry and Local Economic Development the person acting was appraised. For Production and CBS, the files are at the DSC and so files were not seen but letter forwarding the same was seen Ref: MMC/DSC/93 dated 19th July 2017

		• Evidence that the LG has filled all HoDs positions substantively: score 3	0	Out of the 8 established positions, 5 were substantively filled and these are; Administration, Finance and Planning, Works Education, as well as Health. Appointment letters seen for all these. For CBS and Production submission were made to DSC vide letters Ref: MMC/DCS/93 dated 19/ 07/17 and Ref: MMC DCS/93/dated 3/11/17 respectively. For Trade , Industry and Local Economic Planning, position was vacant.To be filled when the DSC is constituted.
7	The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY. Maximum 4 points on this Performance	• Evidence that 100 percent of staff submitted for recruitment have been considered: score 2	2	Letters of submission Ref: MMC/DCS/93 dated 2/08/2016 and Ref: MMC/HPRN/36 dated 7th March 2016. Action taken in MIN.NO. MMC/60/2016 and MIN.NO.MMC47/2015 in a meeting held on 26/07/2016 Letter of submission Ref: HRM/MKN/156/01 dated 7/11/2016. Action taken in MIN.NO.MMC70/2016 and MIN.NO.MMC 71/2016
	Measure	• Evidence that 100 percent of staff submitted for confirmation have been considered: score 1	1	Letters of submission Ref: MMC/DSC/93 dated 13/07/2016 and MMC/DSC/93 dated 25/08/2016. Action taken is in MIN.NO. MMC.50/2016, MIN NO.MMC 51/2016, MIN. NO. MIN. NO. MMC 52, MMC53/2016, MIN.NO. MMC MIN NO. MMC 54/2016, MIN. NO.MMC 55. /2016, MIN.NO.56/2016, MIN.NO. 57/2016, MIN NO.58/2016, MIN.NO.59/2016, MIN. NO. MMC 60/2016
		• Evidence that 100 percent of staff submitted for disciplinary actions have been considered: score 1	1	Letters of submission Ref: MMC/SM/10C dated 31/08/2016. Action taken in MIN. NO.MMC/64/2016 and MIN NO. MMC.63/2016.

8	Staff recruited and retiring access the salary and pension payroll respectively within two months Maximum 5 points on this Performance Measure.	• Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3	3	 Appointment letters seen as well as payrolls and evidence established as follows: Kakaire Joshua appointed on 1/10/2016 and accessed payroll on 19/02/2017 Nassuna J appointed on 1/12/2016 and accessed payroll on 19/02/2017. Ochen Stephen appointed on 1/12/2016 and accessed payroll on 19/12/2016 Anguduru Gift appointed on 1/12/2016 and accessed payroll on 19/01/2016.
		• Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2	0	List of staff who were retired and schedule of submissions to MOPS seen. Evidence seen to indicate that they did not access the pension pay roll within two months after retirement.
Asse	ssment area: Revenue	Mobilization		
9	The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one) Maximum 4 points on this Performance Measure.	• If increase in OSR from previous FY but one to previous FY is more than 10% : score 4 points • If the increase is from 5 - 10% : score 2 point • If the increase is less than 5% : score 0 points.	0	I obtained the following information from note 2 of the financial statements for FY 2017 and 2016 2017 2016 Local revenue 1,502,757,947 $1,721,564,893Increase in revenue = 1,502,757,947 - 1,721,564,893 = (218,806,946)% decrease = 218,806,946/1,721,564,893X 100 = 12.70\%.$

10	LG has collected local revenues as per budget (collection ratio) Maximum 2 points on this performance measure	• If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within /- 10% : then 2 points. If more than /- 10% : zero points.	2	Revenue performance for FY2017 obtained from note 2 of the financial statements for FY2017 was as follows; Actual revenue collected 1,502,757,947 Budgeted revenue 1, 533,697,215 Revenue performance = 1,502,757,947/1, 533,697,215 X 100 = 97.98% This represents unrealisation of 2.02%
11	Local revenue administration, allocation and transparency Maximum 4 points on this performance	• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2	2	• The municipal council only collects property tax which under the law is not remitted to the LLG. The other local revenue is collected by LLG and they rem 50% to the municipal council which in return remits 30% back to LLG as project grant. In the FY2017, the Municipal council remitted shs 215,349,987 as project grant
	measure	• Evidence that the LG is not using more than 20% of OSR on council activities: score 2	2	I obtained the following information from financial statements for the FY 2017 Council costs Allowances (standing committee) 105,712,400 Total cost as % of local revenue 105,712,400/1,502,757,947 X 100 =7.03 This was less than the 20% required by th regulations.

12	The LG has in place the capacity to manage the procurement function Maximum 4 points on this performance measure.	 Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2 	0	• The staff structure at the municipality was changed as per the council resolution/approvals, followed by the Town clerk's communication to the Permanent secretary, Ministry of public service dated 22/03/2017, Ref no. MMC/PS/139. The PS approved the structure (ref to letter dated 6/06/2017 to the TC, Ref ARC 135/306/01 In view of the changes made, the position of senior procurement officer is filled, but that of the procurement officer is pending recruitment
		• Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1	1	 A procurement plan dated 10th October 2016 and signed by the senior procurement officer and Ag. Town clerk was seen. A procurement plan for FY 2017/2018 dated 23rd October 2017 and signed by the senior procurement officer and Ag. Town clerk was seen. There was no specific file for TEC minutes/reports but instead, these were embedded in each procurement file. Sampled file with TEC Reports included: *TEC Report dated 18/11/2016 signed by the evaluation committee members for Supply and Installation f a 40 feet metallic container Ref. no. MMC 772/Supls/16- 17/0009 *TEC report dated 17/11/2016 signed by the evaluation committee members for Supply and Installation of a solar street lights in Seeta Town Ref no. MMC772/Supls/16-17/00007 * TEC report dated 17/11/2016 signed by the evaluation committee members for Supply and Installation of a solar street lights in Seeta Town Ref no. MMC772/Supls/16-17/00007

Copies of Contracts Committee Minutes numbered as *Minutes of the 40th contracts committee sitting that sat on 18/07/2016 * Minutes of the 41st contracts committee sitting that sat on 28/09/2016 * Minutes of the 42nd contracts committee sitting that sat on 24/10/2016 * Minutes of the 43rd contracts committee sitting that sat on 23/07/2016 * Minutes of the 44th contracts committee sitting that sat on 13/01/2017 * Minutes of the 45th contracts committee sitting that sat on 9/02/2017 * Minutes of the 46th contracts committee sitting that sat on 5/03/2017 Committee considered recommendations of the *Minutes of the 47th contracts committee TEC and provide sitting that sat on dated 10/04/2017 1 justifications for any deviations from those Sampled procurement to show adoption of recommendations: score 1 TEC recommendation in procurement are: *TEC recommendations for Supply and Installation of a 40 feet metallic container Ref. no. MMC 772/Supls/16-17/00009 were adopted in the CC sitting dated 23/11/2016 under Minute MMC.04.9.11.2016 *TEC recommendations for Supply and Installation of a solar street lights in Seeta Town Ref no. MMC772/Supls/16-17/00007 were adopted in the CC sitting dated 23/11/2016 under Minute MMC.04.5.11.2016 * TEC recommendations for Phase One Construction of a Youth Centre Ref no. MMC 772/Wrks/16-17/00005 were adopted in the CC sitting dated 23/11/2016 under Minute MMC.04.2.11.2016

CC P D cc in a is V th	The LG has a comprehensive Procurement and Disposal Plan overing infrastructure activities in the upproved AWP and a followed. Maximum 2 points on his performance neasure.	• a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2	2	Major infrastructure projects planned and budgeted for in the current FY 2017/2018 include among others: *Construction of 3 in 1 staff quarters with 3 stance pit latrine at Buwava P/S under Note 69 of the approved plan *Rehabilitation of classrooms block at Kiwango Umea P/S under note 68 *Phased completion of a 30 bed maternity ward at Goma HC III under note 56 * Construction of a 2 in 1 staff quarters at Kati PS *Completion of council hall at Goma division *structural plans for MMC and gazetting Namyoya under note 92 * Contribution to the construction of the Youth centre under Note 101 *Construction of 5 stance pit latrine with urinals at Kiwanga C/U Ps Procurements planned for in the previous FY 2016-2017 and implemented include: *Construction of a 3 in 1 staff quarters with 3 stance latrine at Bukerere PS. Planned under S/No. 2: Education department and procured under Ref no. MMC 772/Wrks/16-17/00003 * Construction of a 3 stance pit latrine with urinal at Ntawo P/S. Planned under S/No. 1: Education department and procured under Ref no. MMC 772/Wrks/16-17/00009 *Construction of a 3 stance lined pit latrine with urinals at Goma HC III: Planned under S/No. 17: Goma division and procured under Ref no. MMC 772/Wrks/16-17/00007
T di m re p	The LG has prepared bid locuments, maintained contract egisters and procurement activities files and			 The bid documents for the undermentioned planned procurement were not yet prepared at the time of the assessment: * Consultancy services for survey and road design (Under works department)

adheres with established thresholds.			*Construction of water borne toilets at Kigombya North (S/No. 10: Mukono central division)
Maximum 6 points on this performance			*Supply of 30 school desks and furniture at Nabbaale, Ntawo and Lwez (S/No. 17: Mukono central division)
measure			*Preparation of BOQs for DDEP Funds (S/No. 19, Mukono central division)
			*Construction of 2 in 1 staff quarters at Kati P/S (S/No. 26: Mukono central division)
			*Completion of Toilets on chairman's wing and repainting offices (S/No. 4: Goma division)
			*Construction of 5 stance pit latrine with urinals at Kiwanga P/S (S/No. 17: Goma division)
	• For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2		*Securing of lease and structural for office premises (S/No. 22: Administration)
		0	The following bid documents were reviewed to ascertain readiness by 30/08/2017
			*Phased construction of a Youth centre: Ref no, MMC 772/Wrks/17-18/00003. There was no evidence of the bid having been prepared before 30/08/2017 since the procurement requisition is dated 2/08/2017, the BOQs are not stamped and the bid advert appearing in the daily monitor for the works is dated 22/11/2017.
			*Completion of Goma Council Hall. Ref no. MMC 772/Wrks/17-18/00005. There is no evidence of the bid document having been prepared before 30th August 2017. The procurement requisition is dated 1/11/2017, Engineers BOQs are not stamped, the invitation to bidders is dated 13/11/2017 (MMC/PR/126).
			* Completion of a 10 bed ward at Goma Health Centre III: Ref no, MMC 772/Wrks/17-18/00002. There was no evidence of the bid having been prepared before 30/08/2017. The procurement requisition is dated 15/09/2017, the Engineers BOQs are stamped but not dated and the bid advert appearing in the daily monitor for the works is dated 17/10/2017.

15

and provided detailed project information on all investments

Maximum 4 points on this performance measure

• Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision: score 2

0

following projects implemented in FY 2016-2017

*Construction of a 3 in 1 staff quarters with 3 stance latrine at Bukerere PS. Ref no. MMC 772/Wrks/16-17/00003. Interim certificate 1 & 2 dated 16/01/2017 and 7/04/2017 are in the file and signed by the senior assistant engineering officer

* Construction of a 5 stance pit latrine with urinal at Ntawo P/S. Ref no. MMC 772/Wrks/16-17/00009. There were no certificates in the file at the time of assessment

* Construction of a 5 stance pit latrine with urinal and washroom at Bajjo P/S. Ref no. MMC 772/Wrks/16-17/00010. There were no certificates in the file at the time of assessment

* Construction of a 5 stance pit latrine with urinal at and washrooms at Kirowooza C/U Primary school. Ref no. MMC 772/Wrks/16-17/00002. There were no certificates in the file at the time of assessment

*Construction of a 3 stance lined pit latrine with urinals at Goma HC III: Ref no. MMC 772/Wrks/16-17/00007. There were no certificates in the file at the time of assessment

* Completion of a 10 bed maternity ward at Goma Health Centre III. Ref no. MMC 772/WRKS/16-17/00004. Final certificate signed by the assistant engineering officer and dated 2/05/2017 is in the file

* Completion of 3 in 1 staff quarters at Ssekiboobo primary school. Ref no. MMC772/Wrks/16-17/00008. There were no certificates in the file at the time of assessment

*Construction of a septic tank and soak pit at Kame valley market. Ref no. MMC 772/Wrks/16-17/00012. Final certificate dated 11/12/2017 signed by the senior assistant engineering officer is in the file

* Phase one construction of a Youth centre: Ref no, MMC 772/Wrks/16-17/00005. Interim certificates 1 & 2 dated 20/12/2017 and 12/04/2017 respectively and signed by the senior assistant

engineering officer

*Completion of Council Hall and Ground levelling behind completed offices at Goma Division. Ref no. MMC 772/Wrks/16-17/00006. There were no certificates in the file at the time of assessment

* Installation of a solar street lights in Seeta Town Ref no. MMC772/Supls/16-17/00007 There were no certificates in the file at the time of assessment

*Structural plans (Physical development plan) for Misindye and Bukerere ward. Ref no. MMC772/Wrks/16-17/00032. There were no certificates in the file at the time of assessment

* Consultancy services for Road Engineering survey and Design of Mulyanti Road. Ref no.MMC772/Wrks/16-17/00001. There were no certificates in the file at the time of assessment

* Consultancy services for Survey and Boundary opening of Paul Kavuma and Nkoyoyo road; MMC 772/SRVS/16-17/00002 There were no certificates in the file at the time of assessment

* Supply and Installation of a 40 feet metallic container Ref. no. MMC 772/Supls/16-17/00009. There were no certificates in the file at the time of assessment

		• Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2	0	 Three projects, being implemented in the current FY 2017-2018 were sampled/visited and the following were noted: Completion of a 10 bed ward at Goma Health Centre III: Ref no, MMC 772/Wrks/17-18/00002. The site board was in place at the time of the assessment, however the duration and contract amount for the project were not included on the site board (the project start was 20/11/2017 and expected to end on 20/02/2018) Construction of 3 in 1 staff quarters with a 3 stance lined pit latrine at Buwava Primary school. Ref no. MMC 772/Wrks/17-18/00001. There was no signboard at the time of the assessment yet the project was at roofing level (started 20/11/2017 and ending 20/02/20178) Construction of 2 classroom block at Kiwanga Umea P/S. Ref no. MMC 772/Wrks/17-18/00004. At the time of assessment, the site board was being fabricated and was not yet hoisted in place
Asse	essment area: Financial	management		(The project start was 20/11/2017 and expected to be completed by 20/02/2018)
16				
	The LG makes monthly and up to- date bank reconciliations Maximum 4 points on this performance measure.	• Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4	4	• I reviewed the bank reconciliation statements for account number BK-034 in the names of Mukono Municipal TSA for the period January- December, 2017 and confirmed that the district had prepared statements for the period.

17	The LG made timely payment of suppliers during the previous FY			 From a sample of 13 supplier invoices reviewed, no invoice was overdue for more than two months. Vourcher Payee Amount Invoice Payment Delay
	Maximum 2 points on this performance measure	• If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2.	2	No. Date Date Days Pv-WK00893 Pereni Cons 6,000,000 16/06/17 20/06/16 4 Pv-WK00894 Building works 15,852,160 14/06/17 20/06/16 6 Pv-WK00898 Reste Ltd 16,995,200 14/06/17 20/4/17 6 Pv-WK00895 GADI (U) Ltd 27,824,000 12/06/17 15/06/17 3 Pv-WK00196 Busobozi GP 27,128,400 12/061/17 14/06/17 2 Pv-AD025589 Muyizzi 8,262,600 12/061/17 14/06/17 2 Pv-AD025592 Kampala siti 12,520,000 12/061/17 14/06/17 2 Pv-AD025583 Conrad 27,824,000 12/061/17 14/06/17 2 Pv-AD025583 Conrad 27,824,000 12/061/17 14/06/17 2 Pv-AD025583 Conrad 27,824,000 12/061/17 14/06/17 2 Pv-AD027693 Reste 3,619,000 6/06/17 8/06/17 2 Pv-WK01992 Shell fast 16,384,000 2/06/17 2/06/17 10

18	The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations Maximum 6 points on this performance measure.	• Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.	3	 The internal audit department is headed by a substantially appointed principal internal auditor I inspected the personal file of Mr. Herman Ssentongo and confirmed that he was appointed Senior internal auditor on 5th April, 2013 under minute MMC 019/2013 The Senior internal auditor produced quarterly internal audit reports for the FY 2016/2017 as follows: Period: Quarter 1 Quarter 2 Quarter 3 Quarter 4 Date: 8st Nov, 16 3rd February, 17 15th May, 17 28th August, 17
		• Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries: score 2.	0	No district Public accounts Committee (DPAC) reports for FY 2016/2017 were availed for review, i could not confirm whether the reports were discussed or not.
		• Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1	1	I reviewed the internal audit reports for FY 2017 and confirmed that the1st, 2nd, 3rd and 4th quarter reports were submitted to PAC on8th Nov, 2016; 20th Feb, 2017; 15th May, 2017 and 28th August, 2017 respectively. The reports were also copied to the Municipality accounting officer.

19	 The LG maintains a detailed and updated assets register Maximum 4 points on this performance measure. Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per forma in the accounting manual score 4 		0	 The district maintains one asset registers which records ; i. motor vehicles and heavy plant, ii. Land and buildings The asset registers are also in a format that complies with treasury accounting regulations. However, the municipality does not have a register of other assets like computers and other office equipment
20	The LG has obtained an unqualified or qualified Audit opinion Maximum 4 points on this performance measure	Quality of Annual financial statement from previous FY: • unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0	4	 According to the Auditor General's report for the FY 2017, the audit opinion on the financial statements of Mukono Municipal council was unqualified.
Asse	essment area: Governar	nce, oversight, transparency	and acc	ountability
21	The LG Council meets and discusses service delivery related issues Maximum 2 points on this performance measure	Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2	2	In the FY 2016/17, the Council met 6 times. as indicated below, and there is evidence of discussion of issues pertaining to service delivery, and reports from the TPC and Council Resolutions: • Meeting of 26th August 2016 • Meeting of 31st October 2016 • Meeting of 21st December 2016 • Meeting of 28th February 2017 • Meeting of 15th March 2017 • Meeting of 26th May 2017 However, there was no evidence of discussion of LGPAC reports as the Body was not fully functional

22	The LG has responded to the feedback/complaints provided by citizens Maximum 2 points on this Performance Measure	• Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 2.	2	• The Senior Environment Officer has bee designated Public Relation Coordinator fo MMC. – in a letter dated 10th August, 2016.
23	The LG shares information with citizens (Transparency)	Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2	2	• There was evidence of display of this information on the public notice board and on the records file for past displayed information
	Total maximum 4 points on this Performance Measure	• Evidence that the procurement plan and awarded contracts and amounts are published: score 1	1	• The procurement plan and other information on awarded contracts was displayed on the public Notice Board in the Finance and Planning Unit, and on the general notice board in the Mayor's Garden
		• Evidence that the LG performance assessment results and implications, are published e.g. on the budget website for the previous year (from budget requirements): score 1.	0	N/A. The Central Government did not conduct the Annual Performance Assessment for LGs in 2016/17
24	The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens Maximum 2 points on this performance measure	• Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1	1	 Evidence in the Planners office of Departments and Divisions Receiving information on 'Preparation for Budgeting Process and Budget Conference for FY 2017/2018 Sharing of information on the utilisation Discretionary Development Grant was shared on Mail with the Divisions and Heads of Department Evidence of discussion of guidelines / circulars seen in TPC Minutes:

		• Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc) with the public to provide feed- back on status of activity implementation: score 1.	1	 Every Tuesday the MMC has a radio Programme called 'Agafa ewa Meya on 103.0 FM DUNAMIS Radio Station – 6 – 8pm. A schedule for the period October 2017 - Feb 2018 seen. other feedback is obtained during the participatory planning process. the council cognizant of the fact that most complaints are related to land, environment and health issues, there has been established a Complaints Register to record the complaints, the action taken and the remarks. A file for the individual complaints was established on 25th August, 2015, and a total of 68 complaints have been registered, and action taken – the last entry was on 23/01/2018 Another register exists at the records office to receive complaints / concerns from the public, from where they routed to the relevant departments for Action
Asse	essment area: Social an	d environmental safeguards		
	The LG has mainstreamed gender into their activities and planned activities to strengthen women's roles Maximum 4 points on this performance measure.	• Evidence that the LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2.	2	 The score is based on the following documentation A report about gender mainstreaming held at Alvers Hotel Mukono Municipaliity on 22/02/2017 A Report on meetings held with different heads of department to identify gender gaps and lay strategies on how they can be addressed in 2017-2017. (Presented to TPC in August 2017)
				The score is based on the following documentation: Report on meetings held with different heads of department to Review Performance on gender gaps identified in last FY 2016-2017 (presented to TPC in August 2017). Gap Analysis done with departments held between 3rd July 2017-17th July 2017

* A work plan for the Gender and Community based services for 2017/2018 addressed to the Town Clerk, Mukono Municipal Council, dated June 2rd 2017 was reviewed and gender activities are included therein

*Report on Mentoring of Mukono Municipal Staff on Gender Issues and Dissemination of Gender Disaggregated data (not dated, but signed by the senior community development officer)

*Gender gaps identified and interventions required to address them (not dated but signed by the SCDO)

*Report on training women in Entrepreneurship skills and orientation on UWEP on 25/01/2017 at Mukono Municipal Council. Signed by the SCDO, dated 30/01/2017, Ref MMC/DGCBS/GTW addressed to the TC

*Report on meeting of the women council held on 16/03/2017 at the Municipal Council Board in the Board room. Signed by SCDO, dated 20/03/2017 and addressed to the TC

Other reports included

*Mukono Municipal Council Gender Guideline to comply within Schools: Addressed to All schools in the MMC for 2017/2018. Document is signed and stamped but not dated

*A report for Women Council on Women's day celebrations dated 21/04/2017

*Other reports reviewed were for PWDs, children, youth etc.

According to work plan for FY 2016-2017, the budget for gender mainstreaming activities was 3 million shillings. An external service provider was hired to undertake this activity and according to the invoices seen, (dated 1/31/2017, 15/03/2017 & 2/23/2017) approximately 2.4 million (80%) and payment for councillors allowances. The entire budget under the capacity building budget/administration was spent to 100%

On the other hand, Fourth Quarter performance report FY 2016-2017, expenditures on

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

2

				Representation on women councils was at 196.1% Overall workplan for non-wage expenditure for the department of Community based services was 103% (and total expenditure was at 90%)
26	LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition Maximum 6 points on this performance measure	• Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 2	0	For the following sampled projects completed in FY 2016/2017, evidence of environmental screening is contained in the Environmental Screening and Social Management Report (including mitigation measures) dated 24th June 2016 : • Construction of a 5 stance lined pit latrine with urinals and washrooms at Kirowooza C/U • Construction of a 3 in 1 staff quarter with 3 stance lined pit latrine at Bukerere P/S (<i>MMC 772/Wrks/16-17/00003</i>) • Phased Construction of a Youth Centre at Nakabago (<i>MMC 772/Wrks/16-17/00005</i>) • Construction of 5 stance lined pit latrine with urinals and washrooms at Ntawo P/S (<i>MMC 772/Wrks/16-17/00009</i>) • Construction of a 3 stance lined pit latrine with urinals at Goma HC III. (<i>MMC 772/Wrks/16-17/00007</i>) However, no environmental monitoring reports were availed. The Environment officer instead presented three quarterly monitoring reports prepared by the Physical Planner (based on a joint monitoring field visit comprising of the Planner, Engineer, Environment Officer) but there was no specific reporting on the status of implementation of mitigation measures on the visited projects.

Sampled projects for FY 2016-2017 *Construction of 3 in 1 Staff guarters with a 3 stance lined pit latrine at Bukerere Primary school MMC 772/Wrks/16-17/00003. *Completion of a 10 bed maternity ward at Goma Health Centre III. Ref no. MMC 772/WRKS/16-17/00004. There are no ESMPs in the project bid documents, nor were provisions made for inclusion of mitigation measures in the BOQs or Special/general conditions of contract save for an ambiguous clause stating "5% of the project cost shall cater for environmental and social safeguards at pre-construction and during construction • Evidence that the LG and post construction stages" (which cost is integrates environmental not carried forward in the BOQs), 0 and social management plans in the contract bid The three sampled procurements for the documents: score 1 current FY 2017-2018 below didn't have an ESMPs, or items in BOQs or clauses in the contract document documents to cater for Environmental mitigations.

* Completion of Goma Council Hall. Ref no. MMC 772/Wrks/17-18/00005

*Construction of 3 in 1 staff quarters with a 3 stance lined pit latrine at Buwava Primary school. Ref no. MMC 772/Wrks/17-18/00001

*Construction of 2 classroom block at Kiwanga Umea P/S. Ref no. MMC 772/Wrks/17-18/00004

• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc): score 1	1	Documentation noted regarding land onto which the municipality is implementing activities is as below: * Lease agreement between E. Nabeeta and Mukono Town council dated 6/09/2005. Land at Kyagwe, Block 530, plot no. 31-33, Kame road and Plot no. 2G- 2H Valley avenue (Kame valley market) *Land title of Plot 494, Kyagwe, Block 193, Mukono. Volume 2108, Folio 23. Dated 19/02/1993. Mukono Town Council Cementry at Kitete. *Land title in the names of Mukono Town council for Plots 10-12, Basimbize Mukasa Road and 60-74, Kampala Road. Dated 18/05/1999. For mukono Health Centre IV *Land title of Plot 2470, Block 107, Nakabago. Location of Youth centre *Land title for Plot 139, Block 119 in the names of Mukono Town Council. Located at Katikolo. Dated 14/3/2007 *Land title in the names of Mukono Town council for Plot 1214, Block 107, Kyagwe, for Ntawo public school, Held by trustees On-going efforts to acquire lease from Buganda Land board for land for Mukono central division offices (ref to letter to from Town clerk to Chief government value dated 18/01/2018
---	---	---

• Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer: score 2	0	 Environmental and Social Certification forms for 6 out of 8 projects completed in FY 2016/17 seen: Construction of 5 stance lined pit latrine with urinals and washrooms at Ntawo P/S (dated 27/02/17) Construction of 5 stance lined pit latrine at St. Peters Nantabulirwa Primary School (dated 18/11/16) Construction of a 5 stance lined pit latrine with urinals and washrooms at Kirowooza C/U (dated 27/02/17) Construction of a 3 in 1 staff quarter with 3 stance lined pit latrine at Bukerere P/S (dated 20/12/16) Completion of a 10 bed maternity ward at Goma Health Centre III (dated 16/11/16) Completion of Goma Administration block and ground levelling (no date)
---	---	--



LGPA 2017/18

Educational Performance Measures Mukono Municipal Council (Vote Code: 772)

Score 40/100 (40%)

No.	Performance Measure Scoring Guide		Score	Justification
Asse	essment area: Human I	Resource Management		
1	The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school) Maximum 8 for this performance measure	• Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4	4	From the budget and staff lists, it was confirmed that at least 1 head teacher and 7 teachers were budgeted for the FY 2017/2018. However, while the budget was in place and signed, the date of signing was missing by the time of this assessment. Staff lists, payrolls and list of schools were seen and all serving teachers and head- teachers were on the pay roll
		• Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school for the current FY: score 4	4	There is availability of performance contract, staff lists, payrolls and list of schools. However, of the 33 head teachers, 29 are substantive, and 4 are acting (they are at the rank of deputies) From the staff lists, all the 33 schools have at least 7 teachers, exclusive of the head teachers. On a positive note, only 2 schools have got 7 teachers

2	LG has substantively recruited all primary school teachers where there is a wage bill provision Maximum 6 for this performance measure	• Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0	3	A total of 493 teachers were budgeted for in the FY 2017/18. The teachers who are actually available and on the pay roll are 473. This leaves a gap of 20 teachers (4%). The available gap for teachers is 20 (4%) that need to be filled. According to the education department the gap was caused by retirement, death and abs- condiment.
3	LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision. Maximum 6 for this performance measure	• Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6	0	From the structure and the budget, there is a wage bill provision for the 3 inspectors. Only 2 inspectors are substantively appointed. According to the Municipal Education Officer, there is need for additional 1 inspector given the high number of schools that require inspection
4	The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY. Maximum 4 for this performance measure	Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of Primary Teachers: score 2	2	Recruitment work plan was submitted to the HR department as at 3rd/Aug/ 2016. The positions requested for recruitment included; 20 education assistants (teachers), 4 senior education assistants, 6 deputy head teachers, 1 head teacher and 1 inspector for the FY 2017/18

		Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of School Inspectors: score 2	2	Recruitment plan work plan was submitted to the HR department as at 3rd/Aug/ 2016. The positions requested for recruitment included; 20 education assistants (teachers), 4 senior education assistants, 6 deputy head teachers, 1 head teacher and 1 inspector for the FY 2017/18
5	The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY. Maximum 6 for this performance measure	Evidence that the LG Education department appraised school inspectors during the previous FY • 100% school inspectors: score 3	3	There are two school inspectors substantively appointed. There is a third officer who is a substantive Education Officer but assigned inspection duties. All the 3 were appraised and Appraisal forms were seen.
		Evidence that the LG Education department appraised head teachers during the previous FY. • 90% - 100%: score 3 • 70% - 89%: score 2 • Below 70%: score 0	0	There are 33 government owned primary schools. List was provided by the Education Department. Out of the 33 only 5 had complete appraisals. Appraisal Reports availed/
Assessment area: Monitoring and Inspection				

6	The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schoolsMaximum 3 for this performance measure	• Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1	0	The circulars seen in the Education Department include; Mass Registration of Learners in all Primary and Secondary schools, and post primary institutions in Uganda- 29th May 2017. Circular No.1 OF 2017 Operationalization of the District Coordination Committee for the Registration of Learners, issued by Office of the President Exercises dated 16th June, 2017, Circular No. ADM211/263. 2017 Comprehensive Education & Sports (CES) Sector Data Collection Exercise dated 10th/ March/ 2017. No. ADM/282/137/02 Teacher Support Supervision in Schools dated 30th/ June/ 2017. No. ADM/203/255/01 Focus of School Inspection FY 2017/18, dated 19th July 2017. No. DES /14/17 There was an internal Circular "Provision of School Lunch Meals to Pupils" dated 24th Aug/2016. No. MMC/SE/64. However, from the sampled schools, none had such circulars/ policies/ guidelines.Communication of information in guidelines was
				circulars/ policies/ guidelines.Communication of

		• Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level, including on school feeding: score 2	2	The DEO holds meetings with head teachers. E.g. Meeting held on 25th July 2017 in the Municipal boardroom E.g. MIN111/02/MM/PHTR: indicates address by the Municipal Inspector of Schools. She points out the need for schools to have minimum standards.
7	The LG Education Department has effectively inspected all private and public primary schools Maximum 12 for this performance measure	• Evidence that all private and public primary schools have been inspected at least once per term and reports produced: o 100% - score 12 o 90 to 99% - score 10 o 80 to 89% - score 8 o 70 to 79% - score 6 o 60 to 69% - score 3 o 50 to 59% score 1 o Below 50% score 0.	1	Quarterly Inspection reports for both private and government aided schools were seen in the DEOs Office. 1st Quarter= 21st Sept2016 2nd Quarter= 30th Nov 2016 3rd Quarter = 7th April/2017 The education department had a set of inspections forms for some individual schools (filled inspection forms), from which information was got to feed the quarterly reports Of the 4 sampled schools, only 2 had copies inspection reports issued by the inspector of schools. From the sample, it can be concluded that that 50% of the schools had not been inspected in the previous year.

8	LG Education department has discussed the results/reports of school inspections, used them to make recommendations for corrective actions and followed recommendations Maximum 10 for this performance measure	• Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4	4	There was evidence that education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY. E,g DEO meetings with head teachers on 25th July 2017 in the Municipal boardroom. MIN111/02/MM/PHTR: indicates address by the Municipal Inspector of Schools. She points out the need for schools to have minimum standards. MIN IV/02/MM/PHTR: She called upon all headteachers to carry out their work effectively.
		• Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2	2	Quarterly Inspection reports for both private and government aided schools were available in the DEOs Office and as per DES records, the reports had been submitted. 1st Quarter= 21st September 2016 2nd Quarter= 30th November 2016 3rd Quarter = 7th April 2017
		• Evidence that the inspection recommendations are followed-up: score 4	0	No evidence was in place to confirm that the inspection recommendations were followed-up, especially . in view of the fact that only 50% of sampled schools did not have inspection reports

	1			
9	The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES	• Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and OBT: score 5	0	The number of government aided primary schools given by EMIS data is consistent with that in the education department (33). However, private primary school numbers had not been clearly ascertained and no records for private schools were seen.
	Maximum 10 for this performance measure	Evidence that the LG has submitted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and OBT: score 5	0	DEO only provided enrollment data for government schools for FY 2017/2018 as being 18,168. There was no enrollment data for private schools at the time of the assessment
Asse	essment area: Governa	nce, oversight, transparency and accountal	oility	
10	The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council Maximum 4 for this performance measure			Minutes of 6 meetings of the Social Services Committee (handles Health, Education and Community based Services) for FY 2016/17 seen where Education issue were discussed as follows: • Meeting of 2nd August 2016 – Discussion and adoption of AWP 2016/17 under Min. MMC. SS/03/AUG/2016 • Meeting of 4th October 2016 – Discussion of proposed membership of SMCs, UAAU Ball games, Update of the way forward for Bishops West and Central, Emergency works on Nantabulirwa P/S pit latrine, Mock Exams, Fees for Government schools, an Monitoring/Inspection of
		• Evidence that the council committee responsible for education met and discussed service delivery issues		SS/04/OCT/2016 • Meeting of 1st December 2016 - Discussion Bishop schools recovered propertie

including inspection, performance assessment results, LG PAC reports etc...during the previous FY: score 2

and Pupils feeding at school under Min. MMC. SS/05/DEC/2016

2

• Meeting of 1st February 2017 – Discussion of PLE performance, Closure of substandard schools and Leaking roof at Namilyango under Min. MMC. SS/04/FEB/2017

• Meeting of 19th April 2017 – Discussion of draft budget 2017/18, rehabilitation of classroom block at Kiwango P/S and co-curricular activities under Min. MMC. SS/03/APR/2017

• Meeting of 27th June 2017 – Submission and Approval of School Management Committees under Min. MMC. SS/ 04/JUNE/2017, and Discussion of School census and data collection in UPE schools, National Registration of Learners in Schools, and SFG Project FY 2016/17 under Min. MMC. SS/05/JUNE/2017

• Evidence that the education sector committee has presented issues that requires approval to Council: score 2	2	The Social Services Standing Committee presented report (including Education Sector recommendations for Council approval) to the District Council in the meeting of: • 26th August 2016 – Social Services Committee Report under Min. MMC 28/2016 • 31st October 2016 – Social Services Committee Report (monitoring/inspection of schools) under Min. MMC 33/2016 • 21st December 2016 – Social Services Committee Report (Bishop schools recovered properties) under Min. MMC 40/2016 • 28th February 2017 – Social Services Committee Report (closure of substandard schools, leaking roof at Namilyango P/S, PLE performance) under Min. MMC 05/2017 • 15th March 2017– Laying of draft budget 2017/18 under Min. MMC 08/2017 • 26th May 2017 – Social Services Committee Report (rehabilitation of classroom block at Kiwango P/S, co- curricular activities) under Min. MMC 16/2017 and approval of budget estimates for FY 2017/18 under MMC 17/2017
--	---	---

11	Primary schools in a LG have functional SMCs Maximum 5 for this performance measure	Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0	3	Appointment Letters for SMCs were in the Education Department and signed by the Town Clerk. all the 4 government aided schools sampled had Minutes of SMCs filled. For Example, Seeta Church of Uganda Primary School SMC had met on 1st Dec/2016 and also on 3rd/ Dec/ 2016. Two (2) private schools sampled had no minutes of SMCs
12	The LG has publicised all schools receiving non-wage recurrent grants Maximum 3 for this performance measure	• Evidence that the LG has publicised all schools receiving non-wage recurrent grants e.g. through posting on public notice boards: score 3	3	All schools receiving non- wage recurrent grants were listed on notice boards by the time of this assessment. The list was for 3rd Quarter indicating allocation of sh. 172,396,059
Asse	essment area: Procurer	ment and contract management		
13	The LG Education department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30: score 4	0	The procurement requisition forms were seen for FY 2016/17. They were fully signed by the originating officer (5th/ 07/2016), authorizing officer (5th /07/ 2016) and PDU (8/07/2016). The date of issue was 5th 07/2016

14	The LG Education department has certified and initiated payment for supplies on time Maximum 3 for this performance measure	• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3 points	0	• The Municipal council did not avail documents at the time of the assessment.
Asse	essment area: Financia	I management and reporting		
15	The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure	• Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by mid- July for consolidation: score 4	0	No record to verify compliance to this requirement was availed from the Planners office. However, there was evidence that three out of four Municipal Quarterly Performance Reports were submitted late.

16	LG Education has acted on Internal Audit recommendation (if any) Maximum 4 for this performance measure	• Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points o If all queries are not responded to score 0	0	I reviewed internal audit reports for four quarters of FY 2017 dated 21st February, 2017 for first and second quarter, 19th May, 17, for 3rd quarter and 14th August, 17, for 4th quarter and found the following: • Internal Audit findings on the sector Quarter Quarter 1 Quarter Quarter 1 Quarter 2 Quarter 3 Quarter 4 No. of queries : 0 0 6 2 The department had 8 audit quarries in the year which were responded to but not acted on.
Asse 17	LG Education Department has disseminated and promoted adherence to gender guidelines Maximum 5 points for this performance measure	• Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc: Score 2	0	No minute from the meetings between DEO and the schools or with senior women/men teacher talks about provision of guidance to girls and boys to handle hygiene, reproductive health, life skills. SMCs composition had both male and female, although the female were less than 4 in all the committees seen, yet the requirement is to at least have a minimum of 4 or more.

		• Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2	0	No evidence of minutes from education or gender department that indicates meeting for explanation of guidelines on how to manage sanitation for girls and PWDs in primary schools
		• Evidence that the School Management Committee meet the guideline on gender composition: score 1	0	List of SMCs from the 4 sampled schools was seen and only 3 schools had functional SMCs and with both male and female representatives. The SMCs were composed of 12 members with an average number of 3 female representatives. The 2 private schools visited had no SMCs in place. 1. Misindye C/U P/S 2. Destiny Prepatory P/S 3. Seeta C/U P/S 4. Seeta Umea
18	LG Education department has ensured that guidelines on environmental management are disseminated Maximum 3 points for this performance measure	• Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc): score 3:	3	Minutes of head teachers meetings with the education department on environmental management was held on 7th /03/2013. There was evidence of environmental conservation from the schools visited. E,g. tree planting and separate latrines for both boys and girls.



LGPA 2017/18

Health Performance Measures Mukono Municipal Council (Vote Code: 772)

Score 41/100 (41%)

No.	Performance Measure	Scoring Guide	Score	Justification
Asse	essment area: Human res	source planning and management		
1	LG has substantively recruited primary health workers with a wage bill provision from PHC wage Maximum 6 points for this performance measure	Evidence that LG has filled the structure for primary health workers with a wage bill provision from PHC wage for the current FY • More than 80% filled: score 6 points, • 60 – 80% - score 3 • Less than 60% filled: score 0	6	The staffing norm is 87% and includes the municipality and 5 government health centre staff. All staff are on the municipality pay roll.
2	The LG Health department has submitted a comprehensive recruitment plan to the HRM department Maximum 4 points for this performance measure	Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers: score 4	4	The comprehensive recruitment plan for staff was submitted to 10th July 2017 to Ministry of Public Service through the Town Clerk. A clearance letter to recruit staff for FY2017/2018 is dated 14th September 2017

3	The LG Health department has ensured that performance appraisal for health facility in charge is conducted Maximum 8 points for this performance measure	Evidence that the health facility in- charge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0	0	There are 5 government Health Facilities namely: Mukono Health Centre IV, Goma Health III, ,Kyungu Health II, Nyanja Health Centre II, and NantabulirwaHealth Centre II. Those in-charge of Mukono HCIV, Goma HC III, Kyungu HCII, and Nyanja HCII filled appraisal forms and their forms were signed by the Principal medical Officer as the Supervisor but were not filled and signed by the Responsible Officer. No evidence was of appraisal was seen for e in- charge of Nantabulirwa HCII. Her personal file was sent DSC vide letter Ref: MMC/DSC/93 and the letter was seen.
4	The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY. Maximum 4 points for this performance measure	• Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4	4	The municipality has 5 government health facilities that meet the staffing norms as recommended by Ministry of Health. There is a mix of cadres as per recommended staffing norms in the 5 health facilities
Asse	essment area: Monitoring	and Supervision		

5	The DHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities	• Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3	3	On 14th July 2017, all health facilities signed for service delivery guidelines to include infection prevention, waste management, TB management, viral load monitoring
	Maximum 6 for this performance measure	• Evidence that the DHO has held meetings with health facility in- charges and among others explained the guidelines, policies, circulars issued by the national level: score 3	0	No evidence. The meetings focus mainly on service delivery and no mention of policies and guidelines. Meetings held with health workers on 14th July 2017, 23rd September 2016 did not include discussions on policies and guidelines
6	The LG Health Department has effectively provided support supervision to district health services Maximum 6 points for this performance measure	Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3	0	No evidence that lower level health facilities have been supervised by the municipality. There are no support supervision reports seen for the year 2016/2017 and the support supervision logbooks are not updated by supervisory teams that visited the facilities of Goma HC III, Bukerere HC II and Mukono HCIV.
		Evidence that DHT has supervised lower level health facilities within the previous FY: • If 100% supervised: score 3 points • 80 - 99% of the health facilities: score 2 • 60 - 79% of the health facilities: score 1 • Less than 60% of the health facilities: score 0	0	The municipality has one HC IV, Mukono HC IV and no evidence of supper supervision in the previous one year

8The 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 during the previous FY: score 40Not evidence. Support supervision reports were seen. The recommendations are not reflected in meetings held with health facility incharges.9The LG Health department has submitted accurate/consistent facility lists as per formats provided by MoHEvidence that the LG has submitted accurate/consistent data regarding: oinsistent with both HMIS reports and OBT: score 100No evidence9Assessment area: GovernanceEvidence that the LG has submitted accurate/consistent data regarding: oinsistent with both HMIS reports and OBT: score 1010No evidence9Assessment area: GovernanceEvidence that the LG has submitted accurate/consistent data regarding: oinsistent with both HMIS reports and OBT: score 1010No evidence	7	The Health Sub- district(s) have effectively provided support supervision to lower level health units Maximum 6 points for this performance measure	Evidence that health facilities have been supervised by HSD and reports produced: • If 100% supervised score 6 points • 80 - 99% of the health facilities: score 4 • 60 - 79% of the health facilities: score 2 • Less than 60% of the health facilities: score 0	0	No evidence of that lower level health facilities have been supervised by Mukono HC IV, a sub district. There are no support supervision reports seen for the year 2016/2017 and the support supervision logbooks are not updated by supervisory teams. Most officers sign in the visitors book alone. Goma HC III last updated support supervision logbook on 13th January 2017
them to make recommendations for corrective actions and followed up- Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 60No evidence9The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MOH- Evidence that the LG has submitted accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports and OBT: score 1010The 5 government health facilities submit HMIS reports to the municipality and are reflected in OBT	8	department (including HSDs) have discussed the results/reports of the support supervision and	been discussed and used to make recommendations for corrective actions during the previous FY: score	0	supervision reports were seen. The recommendations are not reflected in meetings held with
The LG Health department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoHEvidence that the LG has submitted accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports and OBT: score 10The 5 government health facilities submit HMIS reports to the municipality and are reflected in OBTMaximum 10 for this performance measureMaximum 10 for this performance measureNavinum 10 for this 		them to make recommendations for corrective actions and followed up Maximum 10 points for this performance	recommendations are followed – up and specific activities undertaken for	0	No evidence
Assessment area: Governance, oversight transparency and accountability	9	department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH Maximum 10 for this	accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports	10	facilities submit HMIS reports to the municipality and are
Assessment area. Overhance, oversight, transparency and accountability	Asse	essment area: Governand	ce, oversight, transparency and accoun	tability	

 The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council Maximum 4 for this performance measure 	• Evidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2	2	Minutes of 4 meetings of the Social Services Standing Committee (handles Health, Education and Community based Services) for FY 2016/17 seen where Health issues were discussed as follows: • Meeting of 4th October 2016 – Discussion of annual workplan 2016/17, Health department report for September 2016 and Performance of 2014/15 vs 2015/16 under Min. MMC. SS/04/OCT/2016 • Meeting of 1st December 2016 - Discussion of World AIDS Day under Min. MMC. SS/05/DEC/2016 • Meeting of 1st February 2017 – Presentation by team from Strong Minds organisation on sensitisation and counselling victims of stress and depression under Min. MMC. SS/04/FEB/2017 • 19th April 2017 – Discussion of Equipping of the maternity wards, Security at Health Centre IV, Family Planning, and Fuel for Ambulance under Min. MMC. SS/03/APR/2017
--	---	---	---

		• Evidence that the health sector committee has presented issues that require approval to Council: score 2	2	The Social Services Standing Committee presented report <i>(including Health Sector recommendations for Council approval)</i> to the District Council in the meeting of: • 26th August 2016 – Social Services Committee Report under Min. MMC 28/2016 • 31st October 2016 – Social Services Committee Report <i>(community sensitization on health)</i> under Min. MMC 33/2016 • 15th March 2017– Laying of draft budget 2017/18 under Min. MMC 08/2017 • 26th May 2017 – Social Services Committee Report <i>(department expenditure – equipping of maternity wards, security at HC IV, family planning, fuel for ambulance)</i> under Min. MMC 16/2017 and approval of budget estimates for FY 2017/18 under MMC 17/2017
11	The Health Unit Management Committees and Hospital Board are operational/functioning Maximum 5 points	Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues): • If 100% of randomly sampled facilities: score 5 • If 80-99% : score 3 • If 70- 79%: : score 1 • If less than 70%: score 0	0	No evidence. All four mandatory meetings were not held in the previous financial year. Mukono HCIV is to elect new members of the committee as the current members are not active, Goma HC III did not have all the four mandatory meetings in the FY2016/2017.

12	The LG has publicised all health facilities receiving PHC non- wage recurrent grants Maximum 3 for this performance measure	• Evidence that the LG has publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards: score 3	0	No evidence on the municipality and the health facility notice boards on the publication of health facilities receiving PHC funds.
Asse	essment area: Procureme	ent and contract management		
13	The LG Health department has submitted procurement requests, complete with all technical	• Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2	0	No evidence of submission of procurement request to PDU that cover all investment items in the 2017/2018 workplans
	requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2	0	No evidence. The LG PP form 1 submitted last financial year on phase 1 of the 20 bed maternity ward at Goma health centre III in 2016/2017
14	The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS Maximum 8 points for this performance measure	 Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time: 100% - score 8 70-99% - score 4 Below 70% - score 0 	8	A procurement plan for Mukono HC IV was submitted for 2017/2018 on 21st December 2016. Only Mukono HC IV requests medicines (Pull medicines) from National Medical Stores. Other health facilities receive medicines using the Push system.

	The LG Health department has certified and initiated payment for supplies on time Maximum 2 for this performance measure	• Evidence that the DHO (as per contract) certified and recommended suppliers timely for payment: score 2 points	0	• The Municipal council did not avail documents at the time of the assessment			
Asses	Assessment area: Financial management and reporting						
	The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure	• Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4	0	There was no evidence of timely submission of reports to the Planner, especially when three out of four reports were late.			
	LG Health department has acted on Internal Audit recommendation (if any) Maximum 4 for this performance measure	Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0	0	I reviewed internal audit reports for four quarters of FY 2017 dated 21st February, 2017 for first and second quarter, 19th May, 17, for 3rd quarter and 14th August, 17, for 4th quarter and found the following: • Internal Audit findings on the sector Quarter Quarter 1 Quarter 2 Quarter 3 Quarter 4 No. of queries : 0 0 6 1 The department had 7 audit quarries in the year which were responded to but not acted on.			
Asses	ssment area: Social and	environmental safeguards					

18	Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities. Maximum 4 points	• Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines: score 2	2	For the three health facilities visited, females were represented up to 30% on the HUMCs in the health facilities of Mukon HC IV, Goma HC III and Bukerere HC II (PNFP)
		• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2	0	No evidence. The guidelines on sanitation were not issued to the health facilities.
	The LG Health department has issued guidelines on medical waste management Maximum 2 points	• Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal : score 2 points.	0	There are guidelines that the health facility in charges signed for in July 2017 but not physically available at the health facility. National health care waste management plan 2009/10- 2011/12 Uganda national infection prevention and control guidelines 2013