

Local Government Performance Assessment

Mukono District

(Vote Code: 542)

Assessment	Scores
Accountability Requirements	67%
Crosscutting Performance Measures	70%
Educational Performance Measures	74%
Health Performance Measures	85%
Water Performance Measures	72%

Accontability Requirements 2018

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Annual performance contract			
LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.	 From MoFPED's inventory/schedule of LG submissions of performance contracts, check dates of submission and issuance of receipts and: o If LG submitted 	Mukono District Local Government submitted the annual performance contract on 14th July 2018. This is within the adjusted deadline of 1st August 2018. Therefore the LG is compliant.	Yes
	before or by due date, then state 'compliant'		
	o If LG had not submitted or submitted later than the due date, state 'non- compliant'		
	• From the Uganda budget website: www.budget.go.ug, check and compare recorded date therein with date of LG submission to confirm.		
Supporting Documents for the Budge	et required as per the PFN	MA are submitted and available	
LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY by 30th June (LG PPDA Regulations, 2006).	• From MoFPED's inventory of LG budget submissions, check whether: o The LG budget is accompanied by a Procurement Plan or not. If a LG submission includes a Procurement Plan, the LG is compliant; otherwise it is not compliant.	The Local Government submitted the budget together with the Procurement Plan on 14th July 2018. This is within the adjusted deadline of 1st August 2018. Therefore the LG is Compliant.	Yes

LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)	From MoFPED's official record/inventory of LG submission of annual performance report submitted to MoFPED, check the date MoFPED received the annual performance report: If LG submitted report to MoFPED in time, then it is compliant If LG submitted late or did not submit, then it is not compliant	The LG submitted the annual performance report on 10th August 2018, after the required deadline of 31st July hence the LG is NOT compliant.	No
LG has submitted the quarterly budget performance report for all the four quarters of the previous FY by end of the FY; PFMA Act, 2015).	From MoFPED's official record/ inventory of LG submission of quarterly reports submitted to MoFPED, check the date MoFPED received the quarterly performance reports: If LG submitted all four reports to MoFPED of the previous FY by July 31, then it is compliant (timely submission of each quarterly report, is not an accountability requirement, but by end of the FY, all quarterly reports should be available). If LG submitted late or did not submit at all, then it is not compliant.	The LG submitted three quarterly reports of the previous FY to MoFPED as follows: Quarter 1 on 13th December 2017; Quarter 2 on 21st February 2018 and Quarter 3 on 22nd May 2018. However, the 4th quarterly report was submitted on 10th August 2018. This is beyond the July 31st deadline hence the LG is NOT compliant.	No
Audit			

The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General and the Auditor General's findings for the previous financial year by end of February (PFMA s. 11 2g). This statement includes actions against all find- ings where the Internal Audi- tor and the Auditor General recommended the Accounting Officer to take action in lines with applicable laws.	From MoFPED's Inventory/record of LG submissions of statements entitled "Actions to Address Internal Auditor General's findings", Check: If LG submitted a 'Response' (and provide details), then it is compliant If LG did not submit a' response', then it is non-compliant If there is a response for all –LG is compliant If there are partial or not all issues responded to – LG is not compliant.	The LG audit responses were submitted to the Permanent Secretary/ Secretary to the Treasury on April 24, 2018, by the Chief Administration Officer on ref letter AUD/MKN/251/01 dated April 17, 2018.	Yes
The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.		Mukono DLG got a clean (unqualified) audit opinion from the Auditor General for the financial year 2017/18.	Yes

Crosscutting Performance Measures 2018

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budge	ting and execution		
All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans Maximum 4 points for this performance measure.	Evidence that a district/ municipality has: • A functional Physical Planning Committee in place that considers new investments on time: score 1.	Mukono District LG has a fully constituted and functional Physical Planning Committee that considers new investments on time. This was confirmed by the appointment letters for the Physical planning committee members, dated 1st July 2017 under reference ADM/MKN/214/19; and physical planning committee minutes dated 1st November 2011 under min.05/11/2011:Induction of Physical Planning Committee by Mr. Sebuyira John, Senior Urban Officer, MoLHUD. There was evidence that the Physical Planning Committee is functional and this was confirmed by availability of plans submission register containing information such as date of entry, plan number, developers name, contact & address, plot & block number, architect's particulars, fees paid & receipt number, sub county, village and parish of submitted development applications. The LG also availed sets of minutes that confirmed that the Committee is functional. For example minutes of meeting dated 29th August 2017 under min.10/DPPC/17 discussed issues such as continued subdivision of land without input from the district officers particularly the surveyor and physical planner and non-compliance of Buganda Land Board in relation to land sub divisions. Other minutes included: minutes of meeting dated 7th December 2017: min12/DPPC/17: Presentation of physical planning sector report; item 12.02: vigilance of council about the mushrooming developments; and meeting dated 28th March 2018, min.15/DPPC/18: Information to CAO to ensure that all real estates are identified and forwarded to CAO for inspection.	1

All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the	Action area plan prepared for the previous FY: score 1 or else 0	The LG does not have an Action Area Plan in place.	0	
respective Physical Planning Committees and are consistent with the approved Physical Plans				
Maximum 4 points for this performance measure.				

The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year

development plan, are based on discussions in annual reviews and

budget conferences and

have project profiles

Maximum 5 points on this performance measure.

• Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences; score 2. There was evidence that the Priorities in AWP are based on outcomes of the budget conference dated 13/11/2017 and discussed in TPC under Min04/MKNBC/18/19: Presentation by Departments of major priorities for FY2018/2019.

The priorities in the AWP for the current FY include:

- Education sector: Construction of 5 stance VIP latrine at Kayini Parish C/U Primary School at Namuganga Sub county (pg. 10 on AWP and pg. 4 of the Budget conference report);
- Education sector: Construction of 5 stance line VIP latrine at Damba Parents Primary School at Koome Sub county (pg. 10 on AWP and pg. 4 of the Budget conference report);
- Water sector: Construction and Rehabilitation of Community boreholes (35) in Nabaale, Ntunda, Ntenjeru, Kyampisi, Nakisunga (pg. 29 on AWP and pg. 2 of the Budget conference report);
- Water sector: Drilling hand pumps in Seeta, Namugaganga Kasao, Mpata (pg. 29 on AWP and pg. 2 of the Budget conference report);
- Health: Upgrading of Health facilities and Construction of Staff Quarters at Koome Island sub county (pg. 54 on AWP and pg. 4 of the Budget conference report);
- Roads sector: Rehabilitation of Kyabazaala-Kiteredde-Nkoko-Kabimbiri (pg. 59 on AWP and pg. 3 of the Budget conference report); and
- Education Sector: Completion of 8 in 1 staff houses in Namanoga Public primary school in Seeta, Namuganga Sub-county (pg. 11 on AWP and pg. 4 of the Budget conference report) among others.

The prioritized investment activities in the approved AWP for the current FY are derived from the approved fiveyear

development plan, are based on discussions in annual reviews and

budget conferences and

have project profiles

Maximum 5 points on this performance measure.

 Evidence that the capital investments in the approved Annual work plan for the current

FY are derived from the approved fiveyear development plan. If differences appear, a justification has to be provided and evidence provided that it was

approved by the Council. Score 1.

There was evidence that the capital investments in the AWP for the current FY are derived from the approved Five year development plan approved by Council on 11th March 2015 under Min30/MDC/2014: Motion Seeking Council Approval for the District Development Plan for Financial Years 2015/2016 - 2019/2020.

The capital investments in the AWP include:

- Education Sector: Completion of 8 in 1 staff houses in Namanoga Public primary school in Seeta, Namuganga subcounty (pg. 11 on AWP and pg. 69 on Five year development plan);
- Water Sector: Drilling of 40 boreholes and rehabilitation boreholes at Seeta, Namugaganga Kasao, Mpata(pg. 29 on AWP and pg. 75 on Five year development plan);
- Education Sector: Construction of 5 stance VIP at Seeta, Namuganga Subcounty (pg. 10 on AWP and pg. 71 on Five year development plan);
- Health: Upgrading of Health Center II to HCIII by constructing staff houses and toilet at Damba (pg. 54 on AWP and pg. 67 on Five year development plan); and
- Roads sector: Rehabilitation and maintenance of Kyabazaala-Kiteredde-Nkoko-Kabimbiri (pg. 59 on AWP and pg. 73 on Five year development plan) among others.

The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year

development plan, are based on discussions in annual reviews and

budget conferences and

have project profiles

Maximum 5 points on this performance measure.

 Project profiles have been developed and discussed by TPC for all investments in the

AWP as per LG Planning

guideline: score 2.

There was evidence that the project profiles were developed and were discussed in TPC meeting dated 26/04/2018 under Min59/17/18: Presentation by Departments of capital project profiles by the District Planner.

The Project profiles discussed included:

- 1) Title: Damba Parents Primary school: Construction of 5 stance VIP latrine, Code: MUK/ED/03; Amount: UGX29,000,000;
- 2) Title: Phased Construction of OPD, VIP latrine at Kasawo HCIII in Kasawo Sub county, Code: MUK/MO/01; Amount: UGX75,000,000;
- 3) Title: Kayini C/U Primary school: Construction of 5 stance lined VIP latrine, Code: MUK/ED/05; Amount: UGX29,000,000; and
- 4) Title: Damba and Koome Sub County: Construction of 2 lined VIP latrines, Code: MUK/MO/02; Amount: UGX66,000,000 among others.

Annual statistical abstract developed and applied

Maximum 1 point on this performance measure

 Annual statistical abstract, with genderdisaggregated data has been compiled and presented to the TPC to support budget allocation and decision-makingmaximum score 1.

There was evidence that the statistical abstract with gender dis-aggregated data was compiled and approved in TPC meeting dated 26/07/2018 under Min04/18/19: Presentation by departments. Item 05: Presentation of statistical abstract for FY2017/2018 by the Senior Planner.

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

Maximum 6 points on this performance measure.

• Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2

There was evidence that all investment projects implemented in FY 2017/18 were derived from the AWP and approved budget. These include:

- Health: Construction of HC in Mukono;
- Education: Construction of a two classroom block at St. Joseph Ssozi primary school;
- Education: Construction of eight in one staff house in two Primary Schools, that is Buniri primary school and Wantuluntu primary school;
- Construction of line VIP at Namulugire primary school; and
- Routine maintenance of 422km of district roads:
- Periodic maintenance of 92km of roads, among others.

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

Maximum 6 points on this performance measure.

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

o 100%: score 4

o 80-99%: score

2

o Below 80%: 0

There was evidence that 11 out of 15 investment projects implemented in the previous FY were completed as per work plan by end for FY hence 73.3% completion rate. The projects completed in 2017/2018 FY as per the Contracts register dated 30th July 2018 include:

- 1) Construction works on the veterinary laboratory;
- 2) Construction of a 5 stance lined VIP latrine at Namulugwe Primary School in Nama Sub County;
- 3) Construction of a 5 stance lined VIP latrine at Maziba Primary School in Ntenjeru Sub County;
- 4) Construction of a 3 stance lined VIP latrine near the Sub County council hall and renovation of the Sub county council hall;
- 5) Electrical installation at Mbaliga HCII;
- 6) Phased/partial completion of the District Administration Headquarters block;
- 7) Construction of a placenta pit at Kabanga HCIII;
- 8) Procurement of office furniture for Ntenjeru Kisoga Town Council;
- 9) Light grading of Nakadindiri Seeta Road (3km) in Seeta Namagunga Sub county;
- 10) Procurement of computer set, UPS, laptop and printer and accessories
- 11) Purchase of furniture (benches) for Kyampisi Sub county council hall

2

Projects not completed as per work plan by the end of FY2017/2018 include:

- 1) Construction of a two classroom block with an office, store and furniture at St. Joseph Ssozi primary school in Mpatta Sub county;
- 2) Construction of a two classroom block with an office, store and furniture at Kayini Kamwokya primary school in Seeta Namuganga Sub county;
- 3) Phased construction of Mayangayanga Rural Growth Centre piped water supply system in Kimenyedde Sub county; and
- 4) Construction of 8 in 1 staff house with Kitchen and 4 stance VIP latrine at Bunyiri primary school in Kyampisi Sub County.

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

Maximum 4 points on this Performance Measure.

 Evidence that all investment projects in the previous FY

were completed within approved budget – Max. 15% plus or minus of original budget: score 2 There was evidence that the Five investment projects sampled were completed within Max. 15% plus or minus the original budget.

The sampled projects included:

- 1) Health: Construction of a 5 stance lined VIP latrine at Namulugwe Primary School in Nama Sub County (budgeted: UGX27,000,000 Actual Expenditure UGX29,782,463); thus 110% expenditure;
- 2) Construction of a 5 stance lined VIP latrine at Maziba Primary School in Ntenjeru Sub County (budgeted: UGX29,680,023 Actual Expenditure UGX29,859,652); thus 100% expenditure;
- 3) Construction of a two classroom block with an office, store and furniture at Kayini Kamwokya primary school in Seeta Namuganga Sub county (budgeted: UGX155,191,882 Actual Expenditure UGX153,519,534), hence 99% expenditure;
- 4) Construction of 8 in 1 staff house with Kitchen and 4 stance VIP latrine at Bunyiri primary school in Kyampisi Sub County (budgeted: UGX143,678,000 Actual Expenditure UGX145,725,481); thus 101% expenditure; and
- 5) Periodic maintenance of 92.24km of Nama, Ntenjeru and Ntunda Sub County roadsl (budgeted: UGX817,505,000 Actual Expenditure UGX848,053,000); thus 104% expenditure.

0 The LG has • Evidence that the LG The LG did not avail any evidence on O&M budget and executed the has budgeted and expenditure. spent at least 80% of budget for construction of the O&M budget for investment infrastructure in the previous FY: score 2 projects and O&M for all major infrastructure projects during the previous FY Maximum 4 points on this Performance Measure.

Human Resourc	e Management		
LG has substantively recruited and appraised all Heads of Departments Maximum 5 points on this Performance Measure.	• Evidence that the LG has filled all HoDs positions substantively: score 3	The district has substantively filled 7 out of the 8 the Heads of Department posts as per the customised structure. Those filled at the time of the assessment included; DHO, DNRO, DEO, District Commercial Officer, District Production & Marketing, DCO and District Engineer. District Financial Officer post not yet filled.	0
LG has substantively recruited and appraised all Heads of Departments Maximum 5 points on this Performance Measure.	• Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2	All the Head of department had been appraised at the time of assessment; DCDO (28th/07/2018), DNRO (3rd / 09/2018), DHO (4th /09/2018) Production & Marketing (12th /09/2018), DEO (13th /07/2018, District Engineer (30th/07/2018, District Commercial Officer (12th /07/2018), Ag. District Finance Officer (12th /09/2018).	2
The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY. Maximum 4 points on this Performance Measure.	• Evidence that 100 % of staff submitted for recruitment have been considered: score 2	The DSC considered all the submissions for recruitment from the office of the CAO letters dated; 09th /03/ 2017 and 3rd/05/2018. The submissions were considered under the District Advert of Tuesday 5th June 2018 (External Advert No. MD 1/2018). The DSC had shortlisted 297 applicants for the 71 vacancies and awaiting interviews.	2

ı			
The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY. Maximum 4 points on this Performance Measure.	Evidence that 100 % of positions submitted for confirmation have been considered: score 1	There was evidence that CAO submission to the DSC for confirmation dated 15th /05/2018 (62 Grade III teachers) had been considered in the DSC meetings held on 12th /06/2018 (Ref Min Extract no 1/2018 and 2/2028).	1
The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY. Maximum 4 points on this Performance Measure.	• Evidence that 100 % of positions submitted for disciplinary actions have been considered: score 1	There was evidence that all the disciplinary cases submitted by the office of the CAO dated 9th /03/2018 (Askari) 4th /04/2018 (Askari, Clinical Office and Laboratory Assistant and 3rd /04/ 2018 (Parish Chief, Enrolled Nurse, Driver) to DSC were considered in the DSC meeting held on 12th /06/2018 (Ref; Min Extract 2/2018).	1
Staff recruited and retiring access the salary and pension payroll respectively within two months Maximum 5 points on this Performance Measure.	Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3	There were no recruitment of new staff in the financial year 2017/2018.	3

Staff recruited and retiring access the salary and pension payroll respectively within two months Maximum 5 points on this Performance Measure.	Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2	15 officers retired in the financial year 2017/2018 and only 5 officers (30%) were able to access the pensioner payroll within the stipulated 2 month period (2 head teachers, 1 deputy head teacher, 1 health Inspector and 1 Nursing Assistant).	0
Revenue Mobiliz	zation		
The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one) Maximum 4 points on this Performance Measure.	•• If increase in OSR (excluding one/off, e.g. sale of assets) from previous FY but one to previous FY is more than 10 %: score 4. • If the increase is from 5% -10 %: score 2. • If the increase is less than 5 %: score 0.	The LG Own source revenue collected for 2017/18 was UGX 611,127,979 compared to UGX 552,550,201 for 2016/17,a percentage increase of 11%. Reasons include: -More effort in mobilization and assessment was undertaken by the LG; and -Bench-marked and got some reinforcement from Kiira Municipal Council.	4
LG has collected local revenues as per budget (collection ratio) Maximum 2 points on this performance measure	• If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10 %: then score 2. If more than +/- 10 %: Score 0.	The LG budget for 2017/18 was UGX 794,569,000 but collected UGX 611,127,979, a percentage performance of -30%. Reason was Curving out new town councils namely: Katosi, Kisoga and Nakifuma-Nagalama from the LG.	0

Local revenue administration, allocation and transparency Maximum 4 points on this performance measure.	• Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2	The District remitted the mandatory LLG share to sub counties as required: - UGX 2,560,323 on voucher number PV FN00553 dated 25/5/2018 was remitted to Kimenyende Sub County; and -UGX 4,130,162 on same voucher remitted to Kasawo Sub county.	2
Local revenue administration, allocation and transparency Maximum 4 points on this performance measure.	• Evidence that the total Council expenditures on allowances and emoluments-(including from all sources) is not higher than 20% of the OSR collected in the previous FY: score 2	Council expenditure was recorded under statutory expense (UGX 441m) in the final accounts for the year 2017/18, when extracted for Council alone it was UGX 168,536,020. This compared to the LG own source revenue collected in 2016/17 of UGX 552,550,201, gave a percentage of 31% which is higher than the recommended 20%, hence the LG not compliant.	0
Procurement an	d contract management		
The LG has in place the capacity to manage the procurement function Maximum 4 points on this performance measure.	Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2	LG has Procurement Officer but no Senior Procurement Officer. Appointment Letter for Procurement Officer seen as the officer was appointed under minute MD 128/2013 dated April 26, 2013 and signed by Luke L. Lokuda, Chief Administrative Officer	0

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

Maximum 4 points on this performance measure.

 Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1 There was evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY, as shown in the Evaluation reports seen below:

- 1) Evaluation Report of 15th December 2017 for Technical Services Partial Completion of the District Administration Headquarter Block;
- 2) Evaluation Report of 30th October 2017 for Production Department Construction Works on the veterinary Laboratory;
- 3) Evaluation Report of 5th December 2017 for Education Department construction of a 5-stance VIP Lined Latrine with two urinals at Namulugwe Primary school;
- 4) Evaluation Report of 7th December 2017 for construction of a two-classroom Block with an office and store, including furniture at St. Joseph Ssozi Primary school and
- 5) Evaluation Report of 7th December 2017 for construction of an eight-in-one Staff house, a kitchen and 4-stancewith two bathrooms, at Bunyiri UMEA Primary school.

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

Maximum 4 points on this performance measure.

 Evidence that the Contracts

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

There was evidence that the Contracts Committee considered recommendations of the TEC and provided justifications for any deviations from those recommendations. This was seen from letter that the Procurement Officer, who is secretary to the Contracts Committee, sending out letters of invitation to CC members and from CC minutes in meetings where they considered evaluation reports on the following dates:

- 1) 4th January 2018 at PDU Room 3 at 09.00 a.m;
- 2) 11th December 2017 at PDU at 09.00 a.m;
- 3) 9th November 2017 at PDU Room 3 at 09.00 a.m;
- 4) 1st November 2017 at PDU Room 3 at 10.00 a.m and
- 5) 15th January 2018 at PDU Room 3 at 08.00 a.m.

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

Maximum 2 points on this performance measure.

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

the previous FY: score 2

- a) There was evidence that the procurement and Disposal Plan for the current year covered all infrastructure projects in the approved annual work plan and budget. All projects seen in the AWP were included in the procurement Plan. Among those sampled included:
- Construction of two-classroom Block with an office and store, including furniture at St. Joseph Ssozi Primary school, Mpatta Sub-County;
- Construction of an eight-in-one Staff house, a kitchen and 4-stancewith two bathrooms, at Bunyiri UMEA Primary school, Kyampisi Sub-County and
- Partial completion of District Administration Headquarter Block.
- b) There was evidence that the LG adhered to the procurement plan for the previous FY. Among such projects sampled included:
- -: Construction of a 5-stance VIP Lined Latrine with two urinals at Namulugwe Primary school, Nama Sub-County. Contractor: M/S Quality Engs and Suppliers Ltd. Amount: UGX29,782,463. Procurement Ref. No: Muko542/Wrks/17 18/00006 and
- Supply of Fual and Lubricants. Contractor: M/S SHELL FAST SERVICES Ltd. Amount: UGX "AS PER THE CALL-OFF ORDERS at the prevailing Pump Price'. Procurement Ref. No: Muko542/Supls/17 18/002. Contract signed on 2017.

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

Maximum 6 points on this performance measure.

 For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/

infrastructure by August 30: score 2 An advert was placed in the Daily Monitor of 13th June 2018 covering all Selective and Framework Contracts. Since Open bidding had only three projects, the advertised percentage was beyond 80%.

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

Maximum 6 points on this performance measure.

• For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score An updated Contracts Register seen kept at the PDU with relevant Titles of Reference no., Subject of Procurement, Provider, Contract price (UGX), Source of Funding and Contract Status.

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

Maximum 6 points on this performance measure.

 For previous FY, evidence that the LG has adhered with

procurement thresholds (sample 5 projects):

score 2.

There was evidence that for the previous FY, LG has adhered with procurement thresholds. This was indicated in projects sampled as follows:

Open bidding;

- 1) Contract: Construction of two-classroom Block with an office and store, including furniture at St. Joseph Ssozi Primary school, Mpatta Sub-County. Contractor: M/S Nali Contractors Ltd. *Amount: UGX145,714,647*. Procurement Ref. No: Muko542/Wrks/17 18/00003. Contract signed on 4th January 2018.
- 2) Contract: Construction of an eight-in-one Staff house, a kitchen and 4-stancewith two bathrooms, at Bunyiri UMEA Primary school, Kyampisi Sub-County Contractor: M/S PERA INVESTMENTS Ltd. *Amount: UGX145,725,481*. Procurement Ref. No: Muko542/Wrks/17 18/00005. Contract signed on 4th January 2018.

Selective bidding;

- 3) Contract: Partial completion of District Administration Headquarter Block. Contractor: M/S Becca Contractors Ltd. *Amount: UGX48,469,680*. Procurement Ref. No: Muko542/Wrks/17 18/00011. Contract signed on 4th January 2018.
- 4) Contract: construction of a 5-stance VIP Lined Latrine with two urinals at Namulugwe Primary school, Nama Sub-County. Contractor: M/S Quality Engs and Suppliers Ltd. *Amount: UGX29,782,463*. Procurement Ref. No: Muko542/Wrks/17 18/00006. Contract signed on 4th January 2018 and

Framework Contract;

5) Contract: Supply of Fuel and Lubricants. Contractor: M/S SHELL FAST SERVICES Ltd. *Amount: UGX "AS PER THE CALL-OFF ORDERS at the prevailing Pump Price"*. Procurement Ref. No: Muko542/Supls/17 – 18/002. Contract signed on 2017.

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

Maximum 4 points on this performance measure

 Evidence that all works projects implemented in the previous FY were appropriately certified

 interim and

for all projects based on technical supervision: score 2 There was evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates for all projects based on technical supervision. Among those sampled included:

- 1) Final Payment Certificate issued on 05th 03- 2018 for completion of a 5-stance VIP Lined Latrine with two urinals at Namulugwe Primary school, Nama Sub-County. Procurement Reference No. Muko542/Wrks/17 18/00006. The defects liability period was still in place so the Final Certificate to the Contractor had not been prepared;
- 2) Final Payment Certificate issued on 23rd 04 2018 for partial completion of District Headquarter Block.

 Procurement Reference No. Muko542/Wrks/17 18/000011. Here also, the defects liability period was still in place so the Final Certificate to the Contractor had not been prepared;
- 3) Interim Payment Certificate No.1 issued on 30th 03-2018 to M/S Nali Contractors Ltd for completion of construction of a two-classroom Block with an office and store, including furniture at St. Joseph Ssozi Primary school, Mpatta Sub-County. Procurement Reference No. Muko542/Wrks/17 18/00003;
- 4) Interim Payment Certificate No.1 issued on 24th 05-2018 to M/S PERA INVESTMENTS (U) Ltd for completion of construction of an eight-in-one Staff house, a kitchen and 4-stancewith two bathrooms, at Bunyiri UMEA Primary school, Kyampisi Sub-County. Procurement Reference No. Muko542/Wrks/17 18/00005 and
- 5) Interim Payment Certificate No.1 issued on 01st 06 2018 to M/S Kiwaga Business Services Ltd for completion of construction of Veterinary Laboratory at District Headquarters. Procurement Reference No. Muko542/Wrks/17 18/00002.

The LG has certified and provided detailed project information on all investments Maximum 4 points on this performance measure	• Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2	Site boards seen with all relevant writings except Contract value.	0
Financial manag	gement		
The LG makes monthly and up to-date bank reconciliations Maximum 4 points on this performance measure.	• Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4	The LG made monthly bank reconciliation statements in time and were up to date at the time of the assessment: Two bank accounts were looked at; 1. Mukono DGLG TSA account- BoU, -September 2017 bank reconciliation was done on 11/10/2017; -December 2017 bank reconciliation was done on 31/1/2018; and -June 2018 bank reconciliation was done on 10/7/2018. 2. Mukono MUWRAP, -September 2017 bank reconciliation was done on 11/10/2017; -December 2017 bank reconciliation was done on 31/1/2018; and -June 2018 bank reconciliation was done on 27/7/2018.	4
The LG made timely payment of suppliers during the previous FY Maximum 2 points on this performance measure	• If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2.	The LG Payments were done in time, for example: -A requisition from Total dated 8/3/2018 of UGX 1,820,000 for fuel was paid on 13/5/2018, on voucher no PV-FN 00702; and -A requisition from Nankya Secretarial ltd dated 8/12/2017 of UGX 2,370,000 for printing budgets was paid on 16/1/2018, on voucher no. PV-FN 00623.	2

The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations Maximum 6 points on this performance measure.	 Evidence that the LG has a substantive Senior Internal Auditor: 1 point. LG has produced all quarterly internal audit reports for the previous FY: score 2. 	The LG had a Principal Internal Auditor Mr. Abongi Albert, whose appointment letter was dated 1/10/2009, ref PER/10563 from the Chief Administrative Officer.	1
The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations Maximum 6 points on this performance measure.	LG has produced all quarterly internal audit reports for the previous FY: score 2.	The LG produced only 3 internal audit reports as follows: -Quarter 1 report was dated 30/11/2017; -Quarter 2 report dated 22/3/2018; -Quarter 3 report dated 22/7/2018; and -Quarter 4 was not yet prepared at the time of the assessment.	0
The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations Maximum 6 points on this performance measure.	Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries from all quarterly audit reports: score 2.	There was no evidence that the LG provided information to the Council on the status of implementation of all audit findings. Quarter 4 report was not yet prepared at the time of the assessment.	0

The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations Maximum 6 points on this performance measure.	Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1.	LG PAC had not sat to consider 2017/18 audit issues.	0
The LG maintains a detailed and updated assets register Maximum 4 points on this performance measure.	Evidence that the LG maintains an updated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4	The LG Asset register conforms to the format provided by the Accountant General and is up to date.	4
The LG has obtained an unqualified or qualified Audit opinion Maximum 4 points on this performance measure	Quality of Annual financial statement from previous FY: • Unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0	Mukono DLG got a clean (unqualified) audit opinion from the Auditor General for the financial year 2017/18.	4

The LG Council meets and discusses service delivery related issues Maximum 2 points on this performance measure	Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2	The Council meets and discusses service delivery related issues. This was evidenced by the following minutes: - Minutes of the District Executive Committee meeting dated 12/09/2017 under min:79/DEC/2017: The Chief Administrative Officer's (CAO) report on implementation of projects and programs for FY 2017/2018 and the Executive Committee meeting dated 2/11/2017 under min.77/DEC/2017: Submission of the budget framework paper to the ministry of Finance by 15th November 2017; and - The Council minute dated 22/12/2017 under min.38/MDC/2017: Presentation of petitions (1) Lack of staff quarters and classroom block at Nanonyi primary school and (2) lack of spring well for Nanonyi community among others.	2
The LG has responded to the feedback/ complaints provided by citizens Maximum 2 points on this Performance Measure	• Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 1.	The District LG designated three persons: Mr. Katamba Fred, Mr. Mayanja Henry and Mr. Mwesigwa Ivan to handle and coordinate response to feed-back (grievance/complaints). The evidence availed was appointment letter dated 09/08/2017.	1
The LG has responded to the feedback/ complaints provided by citizens Maximum 2 points on this Performance Measure	• The LG has specified a system for recording, investigating and responding to grievances, which should be displayed at LG offices and made publically available: score 1	The LG specified a system for recording, investigating and responding to grievances. There is evidence of the grievance procedure and the district Local Government Client charter on the district notice board.	1

The LG shares information with citizens (Transparency) Total maximum 4 points on this Performance Measure	Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2	The LG payroll and Pensioner Schedule for FY 2017/18 were pinned on public notice boards at the district headquarters, dated 17th August 2018.	2
The LG shares information with citizens (Transparency) Total maximum 4 points on this Performance Measure	Evidence that the procurement plan and awarded contracts and amounts are published: score 1.	The procurement plan 2018 and awarded contracts and amounts were published on the notice board dated August 2018.	1
The LG shares information with citizens (Transparency) Total maximum 4 points on this Performance Measure	• Evidence that the LG performance assessment results and implications are published e.g. on the budget website for the previous year (from budget requirements): score 1.	The LG published the LG performance assessment results and implications on the notice board, dated June 2018.	1

Social and environmental safeguards

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

Maximum 4 points on this performance measure.

• Evidence that the LC gender focal person and CDO have provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities score 2.

Evidence that the LG gender focal person and gender focal person and CDO have provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities as seen from the following:

- 1) The Mukono District development Plan 2015/2016 2019/2020 includes gender strategies, concerns and proposed actions across departments in the Districts. Specifically, it states the Departments of Management Support, Finance and Planning, Production and extension, Technical Services, Education and Sports, Health Care and Community-based services.
- 2) The Community Based Services Sector developed a 5-Year Development Plan 2045/16 2019/20 derived from the general 5-Year District Development Plan tailored to its specific needs. In the plan analysis and mainstreaming are emphasized in sector analysis, gender and women indicative budgets.

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

Maximum 4 points on this performance measure.

• Evidence that the gender focal point and CDO have planned for minimum 2 activities for current FY to strengthen women's roles and address vulnerability

and social inclusions and that more than 90 % of previous year's budget for gender activities/ vulnerability/ social inclusion has been implement-ted: score 2. There was evidence that gender focal point (who is also the CDO) has planned for minimum 2 activities for the current FY to strengthen women's roles and address vulnerability and social inclusions as seen from:

- 1) A report dated 29th June 2018 to the Ministry of Gender, Labour and Social development on Capacity Building in gender-related areas;
- 2) Report to the Chief Administrative officer on Gender mainstreaming. The report included sections on Definitions, Gender and the Law, generation of Gender disaggregated data;
- 3) First Quarter Report on Uganda Women Entrepreneurship program;
- 4) Third Quarter Labour Department Report;
- 5) Evaluation of Functional Adult Literacy (FAL) Program in Ntenjeru and Kasawo sub-counties and
- 6) 1st Quarter Performance Report from Probation Department.

But out of UGX353,729,500 planned, Community Services used UGX222,984,895 (63%).

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 is carried out for activities, projects and plans and mitigation measures are planned and budgeted. Reports seen in this regard include:

- 1) Screening report dated 26th October 2017 titled: "EIA Screened District level projects FY 2017/18;
- 2) A DDEG Project Screening report dated 24 October 2017 for construction of a fuel saving stove at Nabalanga P/S:
- 3) A DDEG Project Screening report dated 26 October 2017 for construction of 5-stance lined VIP latrine at Maziba C/U Primary School;
- 4) A DDEG Project Screening report dated 26 October 2017 for construction of eight-in-one Staff house with 2-stance VIP latrine, kitchen and bathroom at Wantuluntu P/S and
- 5) A DLR Project Screening report dated 26 October 2017 for construction of a two classroom block, 4-stance VIP latrine and 50 desks at Namutaba P/S.

LG has
established
and maintains
a functional
system and
staff for
environmental
and social
impact
assessment
and land
acquisition

Maximum 6 points on this performance measure

• Evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents: score

• Evidence that the LG integrates environmental and social management plans in the preparation of contract bid documents. Those seen include:

- 1) Environmental and social management plan for a twoclassroom Block with an office and store, including furniture at St. Joseph Ssozi Primary school, Mpatta Sub-County. The costs were also calculated and attached at UGX2,500,000;
- 2) Environmental and social management plan for a construction of a 5-stance VIP Lined Latrine with two urinals at Namulugwe Primary school, Nama Sub-County. The costs were also calculated and attached at UGX200.000 and
- 3) Environmental and social management plan for construction of an eight-in-one Staff house, a kitchen and 4-stance latrine with two bathrooms, at Bunyiri UMEA Primary school, Kyampisi Sub-County. The costs were also calculated and attached at UGX500,000.

LG has
established
and maintains
a functional
system and
staff for
environmental
and social
impact
assessment
and land
acquisition

Maximum 6 points on this performance measure

• Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc..): score 1

Mukono District has a clearly tabulated Register of available Titles of District establishment. The Register indicated 30 Titles and tabulated them by Title, Plot No., Block No., Approximate Acreage, Registered Date, Volume District and Folio No., Lease Period and Expiry Date.

Out of 13 Sub-Counties, 9 have Land Titles. One Health Centre – Nakifuma health Centre – has a Title. Interestingly, 14 Land titles have been registered as abattoirs in Kyetume. One Technical Institute at Namataba has a Mailo Title.

Environmental and Social Mitigation Certification Forms seen where the Environment and CDO visited sites together on the following projects:

- 1) Construction of Zonal Offices Lot 3 Mukono in May (exact date not written on the report) 2018 and
- 2) Construction of 10 Ministry offices and a dormitory and multi-purpose Hall at the Institute of Surveys on 27th June 2018.

LG has
established
and maintains
a functional
system and
staff for
environmental
and social
impact
assessment
and land
acquisition

Maximum 6 points on this performance measure

 Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1 Environmental and Social Mitigation Certification Forms availed where the Environment and CDO visited sites together on the following projects:

- 1) Construction of Zonal Offices Lot 3 Mukono in May (exact date not written on the report) 2018 and
- 2) Construction of 10 Ministry offices and a dormitory and multi-purpose Hall at the Institute of Surveys on 27th June 2018.

Education Performance Measures 2018

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource pla	nning and management		
The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school) Maximum 8 for this performance measure	• Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4	Mukono District Education Office (DEO) has budgeted for a Head Teacher and 7 teachers per school as evidenced by the staff lists of August 2018.	4
The LG education de- partment has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school) Maximum 8 for this performance measure	• Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school (or minimum of a teacher per class for schools with less than P.7) for the current FY: score 4	Mukono District Education Office (DEO) has a shortfall of 51 teachers as evidenced by the letter of 04/04/18 from the DEO to the Chief Administrative Officer (CAO).	0
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	Mukono District Education Office (DEO) has filled 1707 of the 1758 (97%) of the structure for primary schools as evidenced by the letter of 04/04/18 from the DEO to the Chef Administrative Officer (CAO).	3

where there is a wage bill provision. Maximum 6 for this performance measure			
department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current	Evidence that the LG Education department has submitted a ecruitment plan to HRM for the current FY o fill positions of Primary Teachers: score 2	Mukono District Education Department has advertised for the all the 51 existing vacant positions as evidenced in the New Vision advertisement of 05/06/18 ref: No: MDI/2018.	2
department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current	Evidence that the LG Education department has submitted a ecruitment plan to HRM for the current FY of ill positions of School Inspectors: score 2	Evidenced by the DEOs letter of 04/04/18 to the CAO, Ref: Submission of vacant posts from Department of Education and Sports.	2

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

The LG Education

Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY

• 100% school inspectors: score

3

There was evidence that the 2 Inspectors of schools were appraised; Kikomeko Rashid (School Inspector; 12th /09/2018) and Namuli Mary (Ag School Inspector; 15th /08/2018).

department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during

Maximum 6 for this performance measure

the previous FY.

Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY

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

There was evidence in the sampled 20 files of head teachers out of the 80 namely; Nakasula R/C, Maggwa C/U, Namira P/S, Namagunga Boarding, Namagunga Mixed, Kyoga C/U, Nazigo Sseta, St Joseph Naggalama, Butere, Busenya, Walubira, Kyabazaala Public, Mugomba UMEA, Nabalonga, Kakukkulu R/C, Kyabakadde R/C, Ssempape Memorial, Ssitankya and Kyanika C/U that 19 head teachers had been appraised. The head teachers appraised were 19 (95%) out of the total 20 (The head teacher of Namagunga Mixed had not been appraised at time of assessment).

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

Maximum 12 for this performance measure

- Evidence that all licenced or registered schools have been inspected at least once per term and reports produced:
- o 100% score 12
- o 90 to 99% score 10
- o 80 to 89% score 8
- o 70 to 79% score 6
- o 60 to 69% score 3
- o 50 to 59 % score 1
- o Below 50% score 0.

The District Inspector of Schools (DIS) made the requisite inspection for all (100%) private and public schools as evidenced in the following reports:

- i. 1st term inspection report of 02/01/18; and
- ii. 2nd term inspection report of 25/08/18.

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

Evidenced by the minutes of the following meetings:

- i. Departmental meeting of 11/12 /17 which discussed the following issues among others:
- ii. Inadequate support supervision by Head teachers;
- iii. Poor classroom environment in most schools;
- iv. Schools that don't display the Universal Primary Education (UPE) funds as received by the school; and
- v. Departmental meeting of 29/01/18 which discussed among other topics, the implementation of the policy of inspection of both Private and government aided schools.

The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES Maximum 10 for this performance measure	Evidence that the LG has submitted accurate/consistent data: o List of schools which are consistent with both EMIS reports and PBS: score 5	The data submitted is not consistent for both EMIS and PBS reports as evidenced from data collected from the two sources: a. EMIS (Set obtained from the Ministry of Education and Sports): 162 schools; and b. PBS: 187 schools.	0
The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES Maximum 10 for this performance measure	Evidence that the LG has submit- ted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and PBS: score 5	Data on number of pupils enrolled primary schools from the two reports of EMIS and PBS is not consistent as verified from data from two sources below: a. EMIS (Set obtained from the Ministry of Education and Sports): 66857 pupils; and b. PBS: 76330 pupils.	0
Governance, oversig	ht, transparency and acco	puntability	
The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council Maximum 4 for this performance measure	Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc. during the previous FY: score 2	There was evidence that the sector committee responsible for education met and discussed service delivery issues. This was evidenced by the Sector committee minutes dated 24th May 2017 under min.13/EH/17: Presentation of 2017/2018 sector draft budget by Education Sector.	2

The LG committee re- sponsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council

Maximum 4 for this performance measure

 Evidence that the education sector committee has presented issues that require approval to Council: score 2 There was evidence that the education sector committee presented issues that required approval to Council. This was confirmed by minutes of Council meeting dated 28/05/2018 under min.27/COU/18: Motion seeking approval of District budget estimates 2018/2019; and meeting dated 29/05/2017 under min.05/16/MDC/2017: Motion seeking approval of (1) Mukono district recurrent and development budgets and (2) revision of district budget and supplementary budgets.

Primary schools in a LG have functional SMCs

Maximum 5 for this performance measure

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

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

The district has 187 government schools and all had duly appointed and functional SMCs. 5 schools sampled include:

- 1) Kasenge Primary School. Minute of SMC meetings held on 27/08/2018 under Min2/1/2018: Welcome Remarks by the Vice Chairperson SMC; Min3/1/2018 (a) Welcoming Members of the SMC and PTA;
- 2) Kawuku Boarding primary school: Minutes of SMC and PTA Executive Meeting dated 3/01/2018: Communication from the Chairperson;
- 3) St. Agnes Catholic Girls Boarding Primary School Naggalama; SMC budget meeting held on 24th April 2017 at 10:00am under Min2/SMC/Budget/TermII-2017: Communication from the Chairperson SMC;
- 4) Sempape Memorial Primary School: Joint SMC/PTA Executive meetingheld on 3rd March 2017. Min06/2017: Issuing letters to SMC members and induction on their roles; and
- 5) Namagunga Primary Boarding School; Min11/4/2018 (a) Thanking SMC members for fruitful deliberations.

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 nonwage recurrent grants e.g. through posting on public notice boards: score 3	Publications (undated) of Universal Primary Education (UPE) funds received for term 1 of 2018/19 were available at the District Education Notice Board.	3
Procurement and co	ntract management		
The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements, to the Procurement Unit that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	Evidence that the sector has submitted procurement input to Procurement Unit that covers all investment items in the approved Sector annual work plan and budget on time by April 30: score 4	Evidenced by the annual user departmental workplan of 23/03/18.	4
Financial manageme	ent and reporting		
The LG Education department has certified and initiated payment for supplies on time Maximum 3 for this performance measure	• Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3.	The LG Education department certified and initiated payment for supplies on time for example: -A requisition for VIP latrines at Lwanyonyi primary school worth UGX 9,904,000 made by PEREMI Construction company Ltd on May 25, 2017, was forwarded by the DEO on 7/6/2017; and -A request for construction of staff house in Kiyanja parish st Joseph P/S worth UGX 58,830,712 made by MAPLE Technical services ltd on 31/8/2017 was forwarded by DEO on 11/11/2017.	3

2

The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit

Maximum 4 for this performance measure

• Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by 15th of July for consolidation: score 4

The education department submitted to the planner the annual and all quarterly performance reports for the previous FY for consolidation as follows: Quarter 1 on 10/10/2017, Quarter 2 on 08/01/2018, Quarter 3 on 10/04/2018; and Quarter 4 on 11/07/2018.

The evidence availed shows that all the quarterly reports and annual report were submitted by 15th July 2018.

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

Maximum 4 for this performance measure

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

o If sector has no audit query

score 4

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

o If all queries are not respond-

ed to score 0

The LG Education Sector had 4 audit issues and were all responded on a letter from Mr. Baraza Vicent, the District Education Officer dated July 30, 2018.

Social and environmental safeguards

LG Education Department has disseminated and promoted adherence to gender guidelines Maximum 5 points for this performance measure	• Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills, etc.: Score 2	Evidenced by the minutes of the orientation meeting for the senior women and men teachers of 07/03/18 at the Mukono District Headquarters.	2
LG Education Department has disseminated and promoted adherence to gender guidelines Maximum 5 points for this performance measure	• Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2	Evidenced by the 1st term inspection report of 02/01/18; and the 2nd term inspection report of 25/08/18.	2

LG Education
Department has
disseminated and
promoted
adherence to
gender guidelines

Maximum 5 points for this performance measure

• Evidence that the School Management Committee meets the guideline on gender composition: score 1 All primary schools in Mukono District meet the guideline on gender composition as evidenced from the information from the files and notice boards in the Head teachers' offices of the visited schools:

- i. Nakifuma Primary School (Out of the 6 School Management Committee ,foundation body representatives, 3 are female);
- ii. Kiyunga Islamic Primary school (Out of the 6 School Management Committee, foundation body representatives, 2 are female);
- iii. Kisowera Primary School (Out of the 6 School Management Committee, foundation body representatives, 3 are female);
- iv. Naggalama Primary School (Out of the 6 School Management Committee, foundation body representatives, 3 are female); and
- v. Nakanyonyi Primary School (Out of the 6 School Management Committee, foundation body representatives, 3 are female).

LG Education department has ensured that guidelines on environmental management are dissemi- nated and complied with

Maximum 3 points for this performance measure

• Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 1:

Verified evidence from the letter from the District Natural resources officer of 13/03/18 to DEO: Ref: Dissemination of guidelines on Environment Management in Schools.

LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with Maximum 3 points for this performance measure	• Evidence that all school infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: Score 1	No evidence availed.	0	
LG Education department has ensured that guide- lines on environmental management are dissemi- nated and complied with Maximum 3 points for this performance measure	The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 1	Verified evidence from Environment report of 14/02/18 by the District Natural Resources Officer.	1	

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource plann	ing and management		
LG has substantively recruited primary health care workers with a wage bill provision from PHC wage	Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY	There was evidence that Mukono LG filled the structure for primary health care with a wage bill provision from PHC wage for the current FY, as it was noted that 88% (398 out of 450) positions of the primary health workers were filled as reflected in PBS. (from the list of staff, structure and indicative planning figures for the current FY),	8
this performance measure	 More than 80% filled: score 8 60 – 80% - score 4 Less than 60% filled: score 0 		
The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department	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	There was evidence that Health department submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of primary health care workers as, it was noted that a recruitment plan dated 16th/03/2018 with 46 positions of primary health care workers was submitted and received by HRM on 16th/03/2018.	6
Maximum 6 points for this performance measure	workers: score 6		

4

The LG Health department has conducted performance appraisal for Health Centre IVs and Hospital Incharge and ensured performance appraisals for HC III and II in-charges are conducted

Maximum 8 points for this performance measure

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

- o 100%: score 8
- o 70 99%: score
- o Below 70%: score 0

There was evidence that all 31 In-charges (100%) had been appraised at the time of the assessment (1 HC IV, 12 HC III and 18 HC II); Kojja HC IV (6th/09/2018), Katoogo HC III (4th/09/2018), Kyabazaala HC III (3rd/09/2018), Sseeta Namuganga (6th/08/2018), Nagojje HCIII (3rd/09/2018), Kyampisi HC III (25th /07/2018), Kasana HCIII (3rd/09/2018), Mpuge HC III (4th/09/2018), Kabanga HC III (4th/09/2018), Nakifuma HC III (31st/07/2018), Kasawo HCIII (4th/09/2018), Nabalanga HCIII (3rd/09/2018), Sseta Nazigo HC III (3rd/09/2018), Kansambwe HC II (6th/07/2018), Kateete HC II (3rd 08/2018), Bugoye HC II (18th/07/2018), Katente HC II (3rd/08/2018). Namasumbi HC II (17th/07/2018), Mbaliga HC II (28th/08/2018), Mpooma HCII (3rd/09/2018), Sseta Kasawo HC II (4th/07/2018), Wagala HC II (5th/09/2018), Kimenyedde HC II (3rd/09/2018), Kigogola HCII (9th/08/2018), Bulika HC II (4th/08/2018), Buntaba HC II (28th/08/2018), Ddamba HCII (5th/09/2018), Kasana HCII (3rd/09/2018), Kiyoola HC II (28th/08/2018), Kyabatoogo HC II (28th/08/2018), Mwanjanjiri HCII (13th/09/2018).

The Local
Government Health
department has
deployed health
workers across health
facilities and in
accordance with the
staff lists submitted
together with the
budget in the current
FY.

Maximum 4 points for this performance measure

• Evidence that the LG Health department has deployed health workers in line with the lists submitted with the budget for the current FY, and if not provided justification for deviations: score 4 There was evidence that Mukono LG Health department deployed health workers in line with the lists submitted with the budget for the current FY, as it was noted that the deployment list that had 396 primary health care workers was available and it was similar to was reflected in the PBS. The cadres on the lists were similar on both lists.

Monitoring and Supervision

The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities

Maximum 6 for this performance measure

• Evidence that the DHO/ MHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3 There was evidence that the DHO communicated guidelines, policies, circulars issued by the national level in the previous FY,as delivery notes and acknowledgement lists for 6 policies, guidelines and circulars were available. These included:

 Sector Grant and budget guidelines 2016 - 2021 and consolidated guidelines for prevention and treatment of HIV in Uganda;

There was also an acknowledgement list by 14 in charges dated 14th/09/2017 on consolidated guidelines for prevention and treatment of HIV in Uganda and sector Grant and budget guidelines 2016 - 2021:

- An acknowledgement list by 12 in charges dated 14/09/2017 on national HIV testing services and implementation guidelines:
- An acknowledgement list by 27 in-charges dated 10th/03/2017 on payment of monthly transport and /unit allowances for supporting clinic and follow-up of HIV clients at community level and Acknowledgement list by 27 in-charges dated 13/06/2018 on medical camps guidelines and RBF (Result based financing guidelines.

The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities

Maximum 6 for this performance measure

• Evidence that the DHO/ MHO has held meetings with health facility incharges and among others explained the guidelines, policies, circulars issued by the national level: score 3 There was evidence that the DHO held meetings with health facility in-charges and among other things explained the guidelines, policies, issued by the national level, as noted under minute 03/04/08/17 (introducing MOH guidelines for DHO), the DHO explained a policy on RBF where he told members that health facilities will be paid basing on the work done and also under the same minute the DHO discussed with members sector grant budget guidelines.

The LG Health Department has effectively provided support supervision to district health services

Maximum 6 points for this performance measure

Evidence that DHT/MHT has supervised 100% of HC IVs and district hospitals (including PNFPs receiving PHC grant) at least once in a quarter: score

There was evidence that DHT supervised 100% of HC IVs and district hospitals (including PNFPs receiving PHC grant), as Kojja Health centre IV- Mukono South HSD and St. Francis Hospital Naggalama- Mukono North HSD, were adequately support supervised as reflected in all the 4 quarterly supervision reports dated,15th/06/2017, 29th/Nov/2017, 2nd/02/2018 and 9th/05/2018 respectively.

The LG Health
Department has
effectively provided
support supervision to
district health services

Maximum 6 points for this performance measure

Evidence that DHT/MHT has ensured that HSD has super- vised lower level health facili- ties within the previous FY:

- If 100% supervised: score 3
- 80 99% of the health facilities: score 2
- 60% 79% of the health facilities: score 1
- Less than 60% of the health facilities: score 0

There was no evidence that DHT ensured that HSD supervised lower level facilities with in the previous FY as reflected below:

Mukono South HSD (Kojja H/C IV);

- Quarter 1, no evidence of support supervision:
- Quarter 2, Mukono South HSD supervised 45% (5 out of 11 units) (i.e. Kabanga H/C III, Bugoye H/C II, Mpunge HC III, Kyabalogo H/C II and Seeta Nazigo H/C III);
- Qarter 3, Mukono south HSD supervised 45% (5 out of 11 Units) (i.e. Seeta Nazigo, Mpunge H/C III, Kyetume community based health care H/C III, Kyabalongo H/C II and Bugoye H/C II);
- And quarter 4, Mukono South HSD, supervised 72% (8 out of 11 units) (i.e. Kabanga H/C III, Mpunge H/C III, Bugoyee H/C II, Seeta Nazigo H/C III, Kiyola H/C II. Kyetume community Based health care H/C III, Kyabalogo H/C II and Katente H/C II. Thus Mukono south HSD supervised $0\% + 45\% + 45\% + 72\% = 162/400 \times 100 = 40\%$.

Mukono North HSD (St. Francis Hospital Naggalama):

- Quarter 1, Mukono North HSD support supervised
 92% (12 out of 13) (i.e. Noah's Ark H/C III, Takajjunge
 H/C II, Mpoma H/C II, Bulika H/C II, Katooga H/C III,
 Mukono Church of Uganda H/C IV, Nama wellness,
 kyetume SDA H/C III, Mbaliga H/C II, Nantabulirwa H/C
 II, Buntaba H/C II Kyampisi H/C III);
- Quarter 2, No evidence of supper supervision of lower health units by Mukono North HSD;
- Quarter 3, Mukono North HSD supervised 30% (4 out of 13) (i.e. Seeta Namuganga H/C III, Nabalenga H/C lii and Kigogolo H/C II);
- And quarter 4, no evidence of support supervision of lower health units by Mukono North HSD. Thus Mukono North HSD supervised $92\% + 0\% + 30\% + 0\% = 120/400 \times 100 = 30\%$.
- Hence, supervision was below 60%, thus score 0.

6

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

• 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

There was evidence that all the 4 quarterly reports were discussed and used to make recommendations (in each quarter) for corrective actions as noted under minute 03.01.19.2018 of DHT meeting titled dissemination of support supervision findings among DHT members held on 19th/01/2018, training of Midwives and Nurses as reflected in integrated support supervision report for first quarter 2017/2018 dated 15/07/2017, report on the data quality assurance exercise conducted from the 23 -27/10/2017, supervision report third quarter 2017/2018 had critical issues for follow up such as Data quality inadequate information, education and communication materials, sewage at Naggalama Hospital and stock out of drugs for treating malaria, and lastly health facility inventory for facility equipment established in all health facilities as noted in support supervision report for fourth quarter 2017/2018 dated 09/05/2018.

Maximum 10 points for this performance measure

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

- Evidence that the recommendations are followed
- up and specific activities undertaken for correction: score 6

There was evidence that the recommendations were followed up and specific activities undertaken for correction as noted in annual performance report on key outputs and targets for financial year 2017/2018 dated 27th/08/2018 that had implementation of action points reports for all 4 quarters 2017/2018 attached and sanctioned by DHO.

Maximum 10 points for this performance measure

The LG Health department has submitted accurate/ consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH

Maximum 10 for this performance measure

 Evidence that the LG has submitted accurate/consistent data regarding:

o List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10 There was evidence that Mukono LG submitted accurate/consistent data as it was noted that all the 31 health units receiving PHC non wage- recurrent funds as reflected in PBS reported accurately and consistently. The 31 health facilities reflected in PBS and reported accurately and consistently were, Kojja HCiv, Naggalama Hospital, Seeta Nazigo HC III. kasawo HC III, Nakifuma HCIII, katogo HC III, Mpunge HC III, Kabanga HC III, Koome HC III, Kyampisi HC III, Nabalanga HC III, Kyabazaala HC III. Kimenyedde HC II, Kasania HC II, NOAHs ARK HCII. Kyetume HC III, Nagojje HCiii, Namuganga HC III, kansambwe HCII, Ddamba HC II, Bugoye HC II Kiyoola HC II, Katente HC II Kigogola HC II Mwanyangira HC II Mpoma HC II, Buntaba HC II, Bukika HC II, Mbaliga HC II, Namasamba HC II, and Waggala HC II.

Governance, oversight, transparency and accountability

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

Maximum 4 for this performance measure

• Evidence that the LG committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY:

There was evidence that the LG committee responsible for health met and discussed service delivery issues including supervision reports. This was evidenced by minutes of the sector committee meeting dated 24/05/2017 under min.14/EH/17: Presentation of 2017/2018 sector draft budget by health sector.

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

Maximum 4 for this performance measure

 Evidence that the health sector committee has presented issues that require approval to Council: score 2

score 2

There was evidence that the health sector committee presented issues that required approval to Council. This was confirmed by minutes of Council meeting dated 28/05/2018 under min.27/COU/18: Motion seeking approval of District budget estimates 2018/2019; and meeting dated 29/05/2017 under min.05/16/MDC/2017: Motion seeking approval of (1) Mukono district recurrent and development budgets and (2) revision of district budget and supplementary budgets.

The Health Unit
Management
Committees and
Hospital Board are
operational/functioning

Maximum 6 points

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

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

There was evidence that health facilities and Hospitals had functional HUMCs/Boards (established, meetings held and budget and resource issues discussed, as reflected in the following meetings:- (From the 5 sampled Health facilities):

 Kojja H/C IV met 4 times on;10th/06/2017; 27th/11/2017; 05/03/2018 and 20th/06/2018.

This accounted for 100% of the mandatory HUMC Meetings.

Seeta Nazigo H/C III met 4 times on: 06/07/2017;
 22/12/2017; 23/04/2018 and 20/06/2018.

Thus this accounted for 100% of the mandatory HUMC Meetings.

Katoga H/C III met 3 times: 05th/01/2018;
 29th/03/2018: and 28th/06/2018.

Missed 1st quarter 2017/2018 mandatory HUMC meeting.

Thus this accounted for 75% of the mandatory HUMC Meetings.

• St. Francis Hospital (Naggalama)

Met 4 times: 27th/01/218; 23rd/02/2018; 28th/04/2018 and 11th/05/2018 :

Missed Board of governors meeting due to expiry of term of office of old board members in 1st quarter 2017/2018 financial year. However, they met twice in third quarter of 2017/2018. Thus this accounted for 75% of the mandatory HUMC Meetings.

Nakifuma H/C III met 3 times on: 13th/12/2017;
 21st/12/2017; 30th/03/2018 and 29th/06/2018.

Missed 1st quarter 2017/2018 Financial year HUMC meeting.

Thus this accounted for 75% of the mandatory HUMCs meetings.

Hence on average $100\% + 100\% + 75\% + 75\% = 350/400 \times 100 = 87\%$ Thus score 4.

The LG has publicised all health facilities receiving PHC nonwage recurrent grants Maximum 4 for this performance measure	• Evidence that the LG has publicised all health facilities receiving PHC nonwage recurrent grants e.g. through posting on public notice boards: score 4	There was evidence that Mukono LG published all health facilities receiving PHC non wage recurrent grants through posting on public notice boards as 2 lists of releases to health facilities with PHC non wage recurrent figures were pinned on the DHO's notice board covering quarters 3 and 4 of F/Y 2017/2018. (These were undated).	4
Procurement and contra	act management		
The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	• Evidence that the sector has submitted input to procurement plan to PDU that cover all investment items in the approved Sector an- nual work plan and budget on time by April 30 for the current FY: score 2	There was no evidence that the sector submitted input to procurement plan to PDU that covered all investment items in the approved sector annual work plan and budget on time as, it was noted that request was submitted and received by PDU on 27/5/2017 and had 10 items. However, the submission was made late after the deadline of 30th/04/2017 . Hence score 0.	0
The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget	• Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2.	There was evidence that Mukono LG Health department submitted procurement request form (Form PP5) to the PDU as, one form PPI was submitted and received by PDU on 28th/07/2017 and covered 2 items, that included, diesel 810 litres and Petrol 969 litres.	2
Maximum 4 for this performance measure			

The LG Health department has certified and initiated payment for supplies on time Maximum 4 for this performance measure	• Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4.	The LG Health department certified and initiated payment for supplies on time for example: -A request by total of shs 6,005,910 used for delivery of vaccines to health centers put in on 11/10/2017 was recommended by the District Health Officer (DHO) on 12/10/2017; -Another request from Total of shs 6,001,700 put in on 8/1/2018 was timely recommended on the same day 8/1/2018; and	4
Financial management	and reporting	-A request for training funds for massive bilhazia administration put in on 28/2/2018 was recommended by the DHO on 1/3/2018.	
The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit Maximum 4 for this performance measure	• Evidence that the depart- ment submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4	The health department submitted to the planner the annual and all quarterly performance reports for the previous FY for consolidation as follows: Quarter 1 on 10/10/2017, Quarter 2 on 03/01/2018, Quarter 3 on 10/04/2018; and Quarter 4 on 9/07/2018. The evidence availed shows that all the quarterly reports and annual report were submitted by 15th July 2018.	4

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

 Score 2 points
- If all queries are not

responded to Score 0

The LG health sector responded to the one audit issue raised on letter dated 12/11/2017, this was on accountability by health center 2.

Social and environmental safeguards

Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.

Maximum 4 points

 Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines (i.e. minimum 30

% women: score 2

There was no evidence that Health Unit Management Committee met the gender composition as the guidelines as it was realized that two out of the five sampled health facilities did not meet the gender requirement of one third as follows:

- Kojja H/C IV, 22% (2 females out of 9 members);
- Seeta Nazigo, 37% (3 females out of 8 members);
- Katogo H/C III, 43% (3 females out of 7 members);
- St Francis hospital Naggalama, 28% (4 females out of 14 Board members) and
- Nakifuma H/C III, 57% (4 females out of 7 committee members.

Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities. Maximum 4 points	• Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2.	There was no evidence that Mukono LG issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women, as there were no sanitation guidelines in all of the five sampled health units, (i.e. Kojja H/C IV, St. Francis Hospital Naggalama Hospital, Seeta Nazigo H/C III, Katoogo H/C III and Nakifuma H/C III). Katoogo H/C III did not have sanitary facilities separated into males and females, though Kojja H/C IV, St. Francis Hospital Naggalama and Nakifuma H/C III had their facilities well segregated and labelled "for men only" and " for women only).	0
LG Health department has ensured that guidelines on environmental management are disseminated and complied with Maximum 4 points for this performance measure	Evidence that all health facility infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: Score 2	There was evidence that health infrastructure development projects were screened prior to approval for construction as was it noted in a document, titled "The environment and social impact report for construction of OPD (out patient department) building at Kasawo H/C III in Kasawo sub-county, Kitovu village dated 26th/10/2017, from environmental officer.	2
LG Health department has ensured that guidelines on environmental management are disseminated and complied with Maximum 4 points for this performance measure	• The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 2	There was no evidence that environmental and community development officers visited sites and checked whether mitigation plans were complied with as, noted with Kasawo H/C III ODP construction that had mitigation plans as stipulated in environmental screening report, but there were no monitoring reports that checked compliance with mitigation plans.	0

The LG Health department has issued guidelines on medical waste management

Maximum 4 points

• 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 disposal2: score 4.

There was evidence that Mukono LG issued guidelines on medical waste management as it was noted that all of the five sampled health facilities had copies of infectious medical waste management guidelines and medical waste segregation charts in their laboratories. The sampled health facilities included, Kojja H/C IV, Seeta Nazigo H/C III, Katoogo H/C III, St Francis hospital Naggalama and Nakifuma H/C III. There was also an acknowledgement list signed by all health unit in charges in DHOs office in regard to issuance of infectious medical waste management guidelines.

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and	Planning, budgeting and execution		
The DWO has targeted allocations to sub-counties with safe water coverage below the district average. Maximum score 10 for this performance measure	• Evidence that the district Water department has targeted sub- counties with safe water coverage below the district average in the budget for the current FY: o If 100 % of the budget allocation for the current FY is allocated to S/Cs below average coverage: score 10 o If 80-99%: Score 7 o If 60-79: Score 4 o If below 60 %: Score 0	The Safe Water Coverage data for Mukono DLG show that the district has safe water access of 65.2%. Four sub counties were below district safe water access coverage: • Koome S/C-20.9%; • Ntenjeru S/C(includes Mpunge and Mpatta S/Cs)-57.2%; • Kyampisi S/C-57.1% and • Nama S/C-0.19%. In the AWP for FY 2018/19 received by the MoWE on 16th July 2018, Ntenjeru S/C(rehabilitation of boreholes) and Kyampisi S/C (rehabilitation of boreholes). Koome S/C and Nama S/C were not targeted in the current FY. In conclusion, about 60% of S/Cs with safe water coverage below district coverage of 65.2% have been targeted in the current FY 2018/19 hence the score 4.	4

The district Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)

Maximum 15 points for this performance measure

• Evidence that the district Water department has implemented budgeted water projects in the targeted subcounties 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

In the annual progress report for quarter four of FY2017/18 submitted on 16th July 2018 and received by MoWE on 20th August 2018, Mukono DLG implemented water projects in the targeted S/Cs with safe water coverage below district coverage of 65.2%:

- Rehabilitation of Koome GFS in Koome S/C;
- Punching and drilling of boreholes (hand pumps) in Ntenjeru S/C. Also rehabilitation of boreholes done &
- Borehole rehabilitations in Kyampisi S/C.
- No targeted project implemented in Nama S/Cs in the last FY2017/18.

There was evidence that 80 % of S/Cs with safe water coverage below district coverage of 65.2% were implemented in the FY 2017/18 hence the score 10.

Monitoring and Supervision

The district Water department carries out monthly monitoring of project investments in the sector

Maximum 15 points for this performance measure

Evidence that the district Water department has monitored each of WSS facilities at least annually.

- If more than 95% of the WSS facilities monitored: score 15
- 80% 95% of the WSS facilities -

monitored: score 10

- 70 79%: score 7
- 60% 69% monitored: score 5
- 50% 59%: score 3
- Less than 50% of WSS facilities monitored: score 0

There was evidence of monthly progressive and monitoring reports for all Water projects submitted to CAO by the DWO for the last FY 2017/18 on the following dates:1st October 2017;1st November 2017;1st December 2017;1st February 2018;

3rd March 2018;5th April 2018 and 1st August 2018.

This indicates 100% of the WSS facilities were monitored annually by the DWO hence score 15.

The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE

Maximum 10 for this performance measure

- Evidence that the district has submitted accurate/consistent data for the current FY: Score 5
- List of water facility which are consistent in both sector MIS reports and PBS: score 5

The Safe Water Coverage data for Mukono District LG show that the district has safe water access of 65.2%, Koome S/C-20.9%,Ntenjeru S/C(includes Mpunge and Mpatta S/Cs)-57.2%, Kyampisi S/C-57.1%,Nama S/C-0.19%,Nabbale S/C-68.0%, Ntunda S/C-69.7%, Kimenyedde S/C-71.0%, Kasawo S/C-82.9%, Nagojje S/C-75.2% and Seeta-Namuganga S/C-68.3%.

This was contrary to the MIS report that shows Mukono DLG has safe water access of 73% (rural). There was also divergence in S/C access e.g Koome S/C has 6%.

In conclusion, inconsistent data for the current FY found hence score 0.

The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE

Maximum 10 for this performance measure

 List of water facility which are consistent in both sector MIS reports and PBS: score 5 The list of water facilities reported by Mukono DWO for FY 2017/18 were consistent in both PBS and MIS reports that is 433 springs, 408 shallow wells, 494 boreholes, 66 gravity flow systems (taps).

Procurement and contract management

The district Water department has submitted input for district's procurement plan, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget Maximum 4 for this performance measure	Evidence that the sector has submitted input for the district procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4	Input from DWO for the district Procurement plan to PDU from for FY 2018/19 was submitted late on 7th June 2018 after 30th April 2018 and received on same date by the CAO for the following projects: Borehole siting and drilling supervision; Borehole construction and rehabilitation materials and Test pumping, casting and installation of boreholes.	0
The district has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	If the contract manager prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2	There was evidence that DWO prepared contract management plan and also conducted site meetings for example the minutes of site meetings on the construction of Mayangayanga RGC water supply system dated 7th August 2018 were found on file.	2
The district has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	If water and sanitation facilities constructed as per design(s): score 2	The designs for WSS visited during field work were found similar with what is mentioned in their Bills of Quantities for example the construction of Mayangayanga RGC water supply system.	2

The district has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	If contractor handed over all completed WSS facilities: score 2	No hand over reports of completed projects were found on file in the DWO.	0
The district has appointed Contract Manager and has effectively managed the WSS contracts Maximum 8 points for this performance measure	If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2	There was evidence that WSS projects were appropriately certified by DWO and awarded certificate of completion of repair and handover for the following: • Bunakija-Golomolo handpump, Ntenjeru S/C awarded on 22nd February 2018 and • Bunakija-Lugali handpump, Ntenjeru S/C awarded on 19th February 2018. It was also noted that the payment certificates to contractors were generated by the DWO for example the major rehabilitation of community boreholes by Mastak Investments Ltd. Contract No .Muk/542/Srves/17-18/013. Awarded on 03rd April 2018.	2
The district Water depart- ment has certified and initi- ated payment for works and supplies on time Maximum 3 for this performance measure	Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points	The LG water department certified and initiated payment for works and supplies on time, for example: -A request from MASTAK investments for rehabilitation of 25 boreholes in Kyampisi, Mpunge and Ntenjeru sub counties worth UGX 21,250,000 put in on 6/3/2018 was recommended by the DWO on 3/4/2018; and -A request from Victoria pumps ltd for construction of Mayangayanga RGC piped water supply system worth initial payment UGX 99,197,438 put in 7/6/2018 was forwaded by the DWO on 14/6/2018.	3

The district Water department has submitted annual reports (including all quarterly reports) in time to the Plan- ning Unit Maximum 5 for this performance measure	Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5	There was evidence that the Water department submitted to the planner the annual and all quarterly performance reports for the previous FY for consolidation as follows: Quarter 1 on 4/10/2017, Quarter 2 on 08/01/2018, Quarter 3 on 5/05/2018; and Quarter 4 on 6/07/2018. The evidence availed shows that all the quarterly reports and annual report were submitted by 15th July 2018.	5
The District Water Department has acted on Internal Audit recommendation (if any) Maximum 5 for this performance measure	Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year olf sector has no audit query score 5 olf the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0	The LG Water sector had 2 audit issues and were all responded to, on letter dated 26/7/2018 signed by the District water officer.	3
Governance, oversight,	transparency and accountability		
The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council Maximum 6 for this performance measure	Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3	There was evidence that the LG committee responsible for water met and discussed service delivery issues including supervision reports. This was evidenced by minutes of Sectoral committee meeting for Works and Technical services dated 9/03/2018 under minute min.16/WTSSC/2017/2018: Presentation from Water Department by the District Water Officer.	3

The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council Maximum 6 for this performance measure	Evidence that the water sector committee has presented issues that require approval to Council: score 3	There was evidence that the health sector committee presented issues that required approval to Council. This was confirmed by minutes of Council meeting dated 29/05/2017 under min.05/16/MDC/2017: Motion seeking approval of (1) Mukono district recurrent and development budgets and (2) revision of district budget and supplementary budgets.	3
The district Water department has shared information widely to the public to enhance transparency Maximum 6 points for this performance measure	The AWP, budget and the Water Development grant releases and expenditures have been displayed on the district notice boards as per the PPDA Act and discussed at advocacy meetings: score 2.	There was evidence on Mukono DLG noticeboard information on Water Development Grant releases for FY 2018/2019 for example quarter one release-Ugshs 217,753,587 for water and sanitation published by the CAO on 09th August 2018.	2
The district Water department has shared information widely to the public to enhance transparency Maximum 6 points for this performance measure	All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2	The assessor conducted field visits at 5 water facilities and found that they were not well labelled: • Mayangayanga RGC piped water system phase 1 in Kimenyede S/C(No labelling at all); • Gaaza borehole of Nakisunga S/C(No name of contractor and source of funding) and • Kikubankima borehole (No name of contractor and source of funding).	0

Social and environmental safeguards

is sufficient for the score.

The LG Water department has devised strategies for environmental conservation and management	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	There was evidence of environmental and Social impact screening conducted by the ENR officer for the construction of Mayangayanga RGC piped water system phase 1 in Kimenyede S/C.	2
Maximum 4 points for this performance measure			
The LG Water department has devised strategies for environmental conservation and management	Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1	No cases of unacceptable environmental concerns in the FY 2017/18 were documented by the DWO.	1
Maximum 4 points for this performance measure			
The LG Water department has devised strategies for environmental conservation and management	Evidence that construction and supervision contracts have clause on environmental protection: score 1	There was no clause on environmental protection in the construction and supervision contracts issued by Mukono DLG.	0
Maximum 4 points for this performance measure			
The district Water department has promoted gender equity in WSC composition.	If at least 50% WSCs are women and at least one occupying a key position (chairperson, secretary or Treasurer) as per the sector	The District Water Office had displayed the Water User Committees on the noticeboard dated 30th June 2018 as follows:	3
Maximum 3 points for this performance	critical requirements: score 3	 Kirudu L.C.1, Mpunge S/C (F=14, Total=30), F-10 holding key position; Masuju L.C.1, Mpunge S/C (F=10, 	
measure		Total=18), F-6 holding key position;	

- Total=30), F-8 holding key position;
- Bukule L.C.1, Mpatta S/C (F=6, Total=10), F-5 holding key position;
- Mawoto L.C.1, Mpatta S/C (F=3, Total=10), F-3 holding key position;
- Kabanga L.C.1, Mpatta S/C (F=6, Total=10), F-3 holding key position;
- Mpoma L.C.1, Nama S/C (F=10, Total=20), F-6 holding key position;
- Katoogo L.C.1, Nama S/C (F=26, Total=40), F-10 holding key position;
- Namulungwe L.C.1, Nama S/C (F=8, Total=10), F-4 holding key position;
- Namubiru L.C.1, Nama S/C (F=12, Total=20), F-6 holding key position;
- Bulika L.C.1, Nama S/C (F=3, Total=10), F-3 holding key position.
- Kyabalogo L.C.1, Nakisunga S/C (F=6, Total=10), F-3 holding key position;
- Lusera L.C.1, Nakisunga S/C (F=10, Total=20), F-7 holding key position;
- Seeta-Nazigo L.C.1, Nakisunga S/C (F=8, Total=20), F-6 holding key position;
- Buzu L.C.1, Nakisunga S/C (F=6, Total=10), F-4 holding key position;
- Kyawanvubu L.C.1, Nakisunga S/C (F=10, Total=20), F-8 holding key position;
- Namanoga L.C.1, Seeta-Namuganga S/C (F=7, Total=10), F-5 holding key position;
- Kitale L.C.1, Seeta-Namuganga S/C (F=20, Total=40), F-12 holding key position and
- Nisaji L.C.1, Seeta-Namuganga S/C (F=20, Total=40), F-12 holding key position.

From above statistics, more than 50% WSCs were women (14 out of 19 villages) and occupied key positions hence score 3.

Gender and special needs-sensitive sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3 RGCs provided by the Water Department. Maximum 3 points for this performance measure	-