

## LGPA 2017/18

## Accountability Requirements

Serere District

(Vote Code: 596)

| Assessment | Compliant | %   |
|------------|-----------|-----|
| Yes        | 5         | 83% |
| No         | 1         | 17% |

| Summary of requirements  | Definition of compliance | Compliance justification   | Compliant? |
|--|--------------------------|--|------------|
| Assessment area: Annual performance contract   |                          |  |            |
| LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year. | XXX                      | Serere DLG submitted a Draft Performance Contract for FY 2017/2018 on 7th April 2017 and issued with a receipt (No. 0536) by MoFPED. Subsequently, a Final Performance Contract was submitted on 14th July 2017 (refer to MoFPED Submission Schedule).  This submission of the | No         |
| Assessment area: Supporting Documents for the Bu   | udget required           | Final Performance Contract<br>for FY 2017/2018 was<br>done AFTER the<br>mandatory deadline of 30th<br>June 2017.<br>as per the PFMA are submitt  | ed and     |
| available  |                          |  |            |
| LG has submitted a Budget that includes a<br>Procurement Plan for the forthcoming FY (LG<br>PPDA Regulations, 2006).   | XXXXX                    | Serere District Local<br>Government has a Budget<br>for FY 2017/2018 including<br>a Procurement Plan for FY<br>2017/2018 – Approved on<br>30th May 2017 under<br>Minute: 34/4DC/05/2017<br>MOTION 1  | Yes        |
| Assessment area: Reporting: submission of annual   | and quarterly            | budget performance reports   |            |
| LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)    | XXXXX                    | Serere DLG submitted the Annual Budget Performance Report for FY 2016/2017 on 26th July 2017 (Receipt No. 0814) issued by MoFPED.  The submission was made before the deadline of 31st   | Yes        |

XXXXXX LG has submitted the quarterly budget Serere DLG submitted all performance report for all the four quarters of the the four Quarterly Budget previous FY; PFMA Act, 2015) Performance Reports for FY 2016/2017 to MoFPED as indicated below: Quarter One submitted on 16th November 2016 (Receipt No. 0066) issued by MoFPED. Quarter Two submitted on 22nd February 2017 (Receipt No. 0386) issued by MoFPED. Quarter Three submitted on 11th May 2017 (Receipt Yes No. 0703) issued by MoFPED. Quarter Four submitted on 26th July 2017 (Receipt No. 0814) issued by MoFPED. Quarter Four Report was submitted before the mandatory deadline of 31st July 2017. However, the other three quarterly

> reports were submitted after the end of respective months following each

quarter.

Assessment area: Audit

| The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General or Auditor General findings for the previous financial year by April 30 (PFMA s. 11 2g). This statement includes actions against all findings where the Auditor General recommended the Accounting Officer to take action (PFMA Act 2015; Local Governments Financial and Accounting Regulations 2007; The Local Governments Act, Cap 243). | XXXXX | Status report to Auditor General queries dated 21st February 2017, reference CR/250/2/ was submitted to PS/ST on 24th February 2017. This was before 30th April deadline hence, compliant. The following were 7 audit queries that had been raised the Auditor General and were responded to by the LG;  i. Low recovery of Youth Livelihood Program fund  ii. Understaffing  iii. Discrepancies between order and delivery of medicines  iv. Lack of Land Titles  v. Failure to meet minimum health standards at Serere Health Centre IV  vi. Irregular salary payments  vii. Failure to carry out monthly drug stock taking  Therefore, compliant. | Yes |
|--|-------|--|-----|
| The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer   | xxxxx | Unqualified audit opinion<br>for FY 2016/17 as per<br>Auditor General Report of<br>December 2017.<br>Therefore, compliant.   | Yes |



## LGPA 2017/18

## Crosscutting Performance Measures

Serere District

(Vote Code: 596)

Score 54/100 (54%)

# Crosscutting Performance Measures

| No.  | Performance<br>Measure   | Scoring Guide   | Score | Justification  |  |  |  |
|------|--|---|-------|--|--|--|--|
| Asse | Assessment area: Planning, budgeting and execution   |   |       |  |  |  |  |
| 1    | All new infrastructure projects in: (i) a municipality; and (ii) all Town Councils in a District are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans  Maximum 4 points for this performance measure. | Evidence that a municipality/district has: • A functional Physical Planning Committee in place that considers new investments on time: score 2. | 0     | There is a Physical Planning Committee, which is functional.  There was no Registration Book; instead registration of submitted plans was being done electronically. However, the schedule in which information was registered LACKED a column for 'Date of Submission' much as there is a column for 'Date of Approval'.  Therefore, it was not possible to establish whether the Physical Planning Committee considers new investments on time (i.e. within 28 days after submission). |  |  |  |
|      |  | • All new infrastructure investments have approved plans which are consistent with the Physical Plans: score 2.                                 | 0     | Serere District does not have a Physical Development Plan. THUS, the consistency of all new infrastructure investments with the Physical Plans could not be established.  It was noted that there are:  • Urban Physical Development Plan for Serere Town Council (2012 - 2022).  • Local Physical Development Plans for the Trading Centres of: Odemai; Opau Iyeng; Kamurojo; and Mulondo.  |  |  |  |

| 2 | 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 | Evidence that priorities in<br>AWP for the current FY are<br>based on the outcomes of<br>budget conferences: score 2.   | 2 | The priorities in AWP for FY 2017/2018 are clearly linked with the Budget Conference held during the 11th – 12th October 2916. For example, under Water the projects in the AWP (Pp. 29 - 31) are linked to the priorities in the Budget Conference Report – P. 36; and under Health the projects in the AWP (P. 17) are based on the priorities in the Budget Conference Report – P. 37.   |
|---|--|---|---|---|
|   |  | • Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If different, justification has to be provided and evidence that it was approved by Council. Score 2. | 2 | The capital investments in the Approved Annual Work Plan for 2017/2018 were derived from the approved Serere District Five-Year Development Plan (2015/2016 – 2019/2020). For instance, under:  • Health in the AWP (P. 17) there is 'Construction of Surgical Ward in Serere HC IV', which is linked to the DDP – Summary of Sectoral Programmes / Projects (P. !68 - 169).  • Education in the AWP (Pp. 22) there is 'Construction of a two-classroom block in Kateng PS', which is linked to the DDP – Summary of Sectoral Programmes / Projects (P. 169). |
|   |  | Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 1.   | 1 | The profiles were prepared and discussed by DTPC. Refer to Serere DDP (Pages 215 – 302).  |
| 3 | Annual statistical abstract developed and applied  Maximum 1 point on this performance measure   | Annual statistical abstract, with gender disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum 1 point.   | 0 | There is a soft copy (of Annual Statistical Abstract), which is yet to be discussed by the District Technical Planning Committee (DTPC)   |

| 4    | Investment activities in the previous FY were implemented as per AWP.  Maximum 6 points on this performance measure. | • Evidence that all infrastructure projects implemented by the LG in the previous FY were derived from the annual work plan and budget approved by the LG Council: score 2 | 2 | Information on the infrastructure projects implemented during FY 2016/2017 (as indicated in the Quarter Four Performance Report for 2016/2017) indicates that projects were derived from the respective AWP and Budget. For instance, under health the projects implemented (on Page 93 - 98 of the Fourth Quarter Report 2016/2017) were derived from the Budget (Annual Performance Contract) of FY 2016/2017 – Pages 15 – 19. |
|------|--|--|---|--|
|      |  | • Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. o 100%: score 4 o 80-99%: score 2 o Below 80%: 0     | 2 | From the list provided by the Procurement and Disposal Unit, 18 out of 19 investment projects implemented in FY 2016/2017 were completed as per work plan by end of FY. The uncompleted project is the 'Construction of a Surgical ward in Serere Health Centre IV.'   |
| 5    | The LG has executed the budget for construction of investment projects and O&M for all major                         | Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2                        | 0 | Not all investment projects were completed.  |
|      | infrastructure projects and assets during the previous FY  Maximum 4 points on this Performance Measure.             | • Evidence that the LG has<br>budgeted and spent at least<br>80% of O&M budget for<br>infrastructure in the previous<br>FY: score 2  | 2 | The total budget for O&M (for all departments) for FY 2016/2017 was UGX 212,374,000, while the actual expenditure was UGX 170,563,624.  This was 80.3% of the budget for O&M [as per Reports and Financial Statements for the Year Ended 30th June 2017].  |
| Asse | essment area: Human Re   | source Management  |   |  |

|   | ı   |  |   |  |
|---|---|--|---|--|
| 6 | LG has substantively recruited and appraised all Heads of Departments  Maximum 5 points on this Performance Measure.  | Evidence that HoDs have<br>been appraised as per<br>guidelines issued by MoPS<br>during the previous FY: score 2 | 2 | CFO SIGNED BY CAO DATE 27/07 /2017  DEO SIGNED BY CAO DATE 29/06/2017  ADMINISTRATION SIGNED BY CAO  PLANNER 17/10/2017  PRODUCTION AND MARKETING 30/6/2017  The substantive heads of department were appraised there appraisal reports were availed |
|   |   | Evidence that the LG has filled all HoDs positions substantively: score 3  | 0 | <ul> <li>The district has only five substantive heads of department</li> <li>The districts approved structure is dated 14th September 2017 Ref ARC135/306/01 in REF to REF. CR/210/5</li> </ul>  |
| 7 | The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.  Maximum 4 points on this Performance Measure | Evidence that 100 percent of<br>staff submitted for recruitment<br>have been considered: score 2                 | 2 | Minutes of 1st DSC HELD ON 15TH FEBRUARY     MINUTES OF THE 2ND DSC HELD FROM 28TH TO FEB 6TH     MINUTES OF 3RD DSC HELD ON 2ND TO 4TH MAY 2017  All staff submitted for recruited were considered  |

|      |   | Evidence that 100 percent of<br>staff submitted for<br>confirmation have been<br>considered: score 1   | 1 | Minutes of DSC 4TH MEETING<br>9TH- 12TH MAY 2017     Minutes of DSC 5TH MEETING<br>20TH September 2017  All staff submitted for confirmation were considered.   |
|------|---|--|---|---|
|      |   | Evidence that 100 percent of<br>staff submitted for disciplinary<br>actions have been considered:<br>score 1   | 1 | MINUTES OF DSC 2nd meeting<br>28th – 6th march 2017. Minute<br>9/2017  The disciplinary case submitted was considered   |
| 8    | Staff recruited and retiring access the salary and pension payroll respectively within two months   | • Evidence that 100% of the staff recruited during the previous FY have accessed the salary payroll not later than two months after appointment: score 3   | 0 | The staff recruited did not access<br>the payroll within two months. those<br>recruited for June 2nd 2017 were not<br>on the July and august pay roll<br>extract submitted  |
|      | Maximum 5 points on this Performance Measure.   | • Evidence that 100% of the staff that retired during the previous FY have accessed the pension payroll not later than two months after retirement: score 2                                      | 0 | The staff that retired 2016/17 have not accessed the pay roll.  The process of verification takes long and some the queries day the accessing   |
| Asse | essment area: Revenue N   | Mobilization   |   |   |
| 9    | The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)  Maximum 4 points on this Performance Measure. | • If increase in OSR from previous FY but one to previous FY is more than 10%: score 4 points • If the increase is from 5 -10%: score 2 point • If the increase is less than 5%: score 0 points. | 4 | Own Source Revenue collection in FY 2015/16 was UGX 235,013,391 which increased to UGX 268,686,544 in FY 2016/17. The increase was UGX 33,673,153 which is to 14.3%. The increase is more than 10%.  Therefore, a maximum score of 4. |

| 10 | LG has collected local revenues as per budget (collection ratio)  | If revenue collection ratio   |   | Own Course Devenue was budgeted   |
|----|---|---|---|---|
|    | Maximum 2 points on this performance measure  | (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within /-10%: then 2 points. If more than /- 10%: zero points. | 0 | Own Source Revenue was budgeted at UGX 324,374,000 in the FY 2016/17 and the actual collection was UGX 268,686,544. This translates into negative variance or UGX 55,687,456 equivalent to -17.2%. The variance is more than -10%.  Therefore, zero score.  |
| 11 | 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   | 0 | There was no evidence of remittance of local revenue to LLGs by Serere District during FY 2016/17 except Town Council where all the four remittances of 65% for July, August, September, and October 2016 were made accordingly. This is contrary to Section 85 (4) of the Local Governments Act, CAP 243, and Regulation 39(2) of the Local Governments (Financial and Accounting Regulations) 2007.  Although there was an argument that there was a Memorandum of Understanding between the district and Sub-counties to withhold the 65% of LST meant for LLGs and use it to purchase stationery like receipt books, this is against the law. In addition, there was no DEC and council minutes to show that the top leadership had an idea about it.  Therefore, score zero. |

|      |  | • Evidence that the LG is not using more than 20% of OSR on council activities: score 2   | 0 | <ul> <li>UGX 68,010,000 was spent on council activities in FY 2016/17 which is more than 20% of local revenue collected in FY 2015/16 (UGX 47,002,678). Total local revenue in FY 2015/16 was ugx 235,013,391 with 20% being UGX 47,002,678.</li> <li>First Schedule of the Local Governments Act, CAP 243, requires that expenditure on council activities should not be more than 20% of the total local revenue collection of the previous financial year.</li> <li>Therefore, zero score.</li> </ul> |
|------|--|---|---|--|
| Asse | essment area: Procureme  | ent and contract management   |   |  |
| 12   | The LG has in place the capacity to manage the procurement function  Maximum 4 points on this performance measure. | • Evidence that the District has the position of a Senior Procurement Officer and Procurement Officer (if Municipal: Procurement Officer and Assistant Procurement Officer) substantively filled: score 2 | 0 | The position of Senior Procurement officer is vacant. The Procurement officer is present with an Assistant.  |
|      |  | Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1  | 1 | TEC minutes and Contracts committee reports are presented in the files of each project that works on a particular project. Selected 10 and all have TEC minutes and contract committee report inside.  |
|      |  | Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1   | 1 | Minutes are present no deviation. Technical committee is well represented and all issues handled during the evaluation where all parties are invited.  |

| 13 | The LG has a comprehensive Procurement and Disposal Plan covering infrastructure activities in the approved AWP and is followed.  Maximum 2 points on this performance measure. | • a) Evidence that the procurement and Disposal Plan for the current year covers all infrastructure projects in the approved annual work plan and budget and b) evidence that the LG has made procurements in previous FY as per plan (adherence to the procurement plan) for the previous FY: score 2 | 0 | <ul> <li>No AWP</li> <li>Procurement plan for current FY was in soft copy, not signed and stamped.</li> <li>Some project do appear in the previous FY and also in the current FY example is low cost seal of Kamod-Kasilo road,, Geophysical a hydrological site investigations, drilling and pump testing, casting an installation.</li> </ul>   |
|----|---|--|---|---|
| 14 | The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with  | • For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/infrastructure by August 30: score 2   | 0 | • Not done on time. Best Evaluated bidder notice were placed on the biding notice board on the 21st of November 2017 that is past the anticipated 30th August.  |
|    | established thresholds.  Maximum 6 points on this performance measure   | • For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2   | 0 | The Contracts register is partially filled and still has gaps.  Not updated.  |
|    |   | • For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects): score 2.  | 2 | <ul> <li>Design for the intake works in Gaarama landing site piped water supply system contract value of 53,000,000 (Open biding)</li> <li>Drilling and installation of 6 hand pump boreholes and 2 production boreholes contract value 169,006,800 (Open biding)</li> <li>Low cost seal of Serere corners Kamod-Kasilo 383,588,150 (Open biding)</li> <li>Construction of a fish pond and supply of feed in Kagwara contract value of 13,500,000 (National Selective biding)</li> <li>Construction of 3 stance drainage pit latrine in Owii P/S contract value 12,314,598 (National Selective biding)</li> </ul> |

| 15   | The LG has certified and provided detailed project information on all investments  Maximum 4 points on this performance measure | • Evidence that all works projects implemented in the previous FY were appropriately certified — interim and completion certificates for all projects based on technical supervision: score 2                  | 2 | <ul> <li>Interim certificates presented example is dated 24th April 2017 for the design for the intake works in Gaarama landing site piped water supply system,</li> <li>Completion certificates presented example is the low cost sealing of Kamod-Kasilo road signed by District Engineer on 17th Jan 2018</li> </ul> |
|------|---|--|---|---|
|      |   | • Evidence that all works projects for the current FY are clearly labelled (site boards) indicating: the name of the project, contract value, the contractor; source of funding and expected duration: score 2 | 0 | No site boards found on the current FY projects.  |
| Asse | essment area: Financial m   | nanagement   |   |   |
| 16   | The LG makes monthly and up to-date bank reconciliations  Maximum 4 points on this performance measure.                         | • Evidence that the LG makes monthly bank reconciliations and are up to-date at the time of the assessment: score 4  | 4 | <ul> <li>There is evidence of bank reconciliation from July 2016 up to December 2017.</li> <li>At the time of assessment, the only reconciling items were January transactions which month has not ended hence, not yet reconciled.</li> <li>Therefore, a score of 4.</li> </ul>  |
| 17   | The LG made timely payment of suppliers during the previous FY  Maximum 2 points on this performance measure                    | • If the LG makes timely payment of suppliers during the previous FY – no overdue bills (e.g. procurement bills) of over 2 months: score 2.  | 2 | <ul> <li>There was no evidence of any overdue bills during FY 2016/17.</li> <li>All bills are paid within the 60 days period.</li> <li>Therefore, a score of 2.</li> </ul>  |

The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations

Maximum 6 points on this performance measure.

 Evidence that the LG has a substantive Senior Internal Auditor and produced all quarterly internal audit reports for the previous FY: score 3.

3

0

Although there is no Substantive Senior Internal Auditor, there is an effective Internal Auditor with effect from 26th June 2014. The department produces and submits quarterly internal audit reports on time as follows;

- 4th Quarter date 15th August 2017, submitted to PS/ST on 22nd August 2017
- 3rd Quarter dated 30th May 2017, submitted on 12th June 2017
- 2nd Quarter dated 20th February 2017, submitted on 24th February 2017
- 1st Quarter dated 15th November 2016, submitted on 7th December 2016

Since internal audit reports were produced and submitted on time, therefore a score of 3.

• Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries: score 2.

- There was no evidence to show provision of information to council and LG PAC on the status of implementation of internal audit findings for the previous year.
- While LG PAC comes up with recommendations after reviewing internal audit reports, status of implementation of their recommendations is always not communicated nor discussed in the Finance, Planning and Administration Committee.

Therefore, zero score.

|    |   | Evidence that internal audit reports for the previous FY were submitted to LG Accounting Officer, LG PAC and LG PAC has reviewed them and followed-up: score 1 | 1 | There is evidence that all internal audit reports for 4 Quarters of FY 2016/17 were submitted to CAO and LG PAC as follows;  • 4th Quarter – date 15th August 2017, delivered to CAO and LG PAC on 21st August 2017  • 3rd Quarter – dated 30th May 2017, delivered to CAO and LG PAC on 1st June 2017  • 2nd Quarter – dated 20th February 2017, delivered to CAO and LG PAC on 23rd February 2017  • 1st Quarter – dated 15th November 2016, delivered to CAO and LG PAC on 24th December 2016  Therefore, a score of 1. |
|----|---|--|---|--|
| 19 | The LG maintains a detailed and updated assets register  Maximum 4 points on this performance measure.      | • Evidence that the LG maintains an up-dated assets register covering details on buildings, vehicle, etc. as per format in the accounting manual: score 4      | 0 | <ul> <li>There was no up dated assets register for the LG</li> <li>Land and buildings among others, are not in the assets register</li> <li>Each department has a register though not up dated.</li> <li>Therefore, score zero.</li> </ul>   |
| 20 | The LG has obtained an unqualified or qualified Audit opinion  Maximum 4 points on this performance measure | Quality of Annual financial statement from previous FY: • unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0                | 4 | Unqualified audit opinion for FY 2016/17 as per Auditor General Report of December 2017. Therefore, a score of 4.  |

| 21 | The LG Council meets and discusses service delivery related issues   |   |   | Serere District Council met and discussed service delivery related issues as evidence below:  |
|----|--|---|---|---|
|    | Maximum 2 points on this performance measure   | Evidence that the Council meets and discusses service delivery related issues including TPC reports, monitoring reports, performance assessment results and LG PAC reports for last FY: score 2 | 2 | <ul> <li>MIN. 36/4DC/05/2017 (Minutes of District Council meeting held 31st May 2017)</li> <li>MIN. 25/3DC/03/2017 &amp; MIN. 26/3DC/03/2017 (Minutes of District Council meeting held 29th March 2017)</li> <li>MIN. 18/2DC/12/2016 &amp; MIN. 18/2DC/12/2016 - repeated (Minutes of District Council meeting held 20th December 2016)</li> <li>MIN. 11/1DC/09/2016 (Minutes of District Council meeting held 27th – 28th September 2016)</li> </ul> |
| 22 | The LG has responded to the feedback/complaints provided by citizens  Maximum 2 points on this Performance Measure | • Evidence that LG has designated a person to coordinate response to feedback (grievance /complaints) and responded to feedback and complaints: score 2.  | 0 | The Principal Assistant Secretary (PAS) is in charge of coordinating responses to feedback. However, there is no written instruction to confirm this.   |
| 23 | The LG shares information with citizens (Transparency)   | Evidence that the LG has published: • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2  | 2 | The district published and displayed the LG Payroll and Pensioner Schedule on public notice board in the Administration Block at Serere District Headquarters.  |
|    | Total maximum 4 points on this Performance Measure   | Evidence that the procurement plan and awarded contracts and amounts are published: score   | 1 | The district has a Procurement Plan and published and displayed information on awarded contracts and amounts at Serere District Headquarters.   |

|  | • Evidence that the LG performance assessment results and implications, are published e.g. on the budget website for the previous year (from budget requirements): score 1.                                    | 0 | Not Applicable. The Central<br>Government did not conduct the<br>Annual Performance Assessment for<br>LGs in 2016/2017.<br>Also, the Serere District Website is<br>not functional.   |
|--|--|---|--|
| The LGs communicates guidelines, circulars and policies to LLG provide feedback to the citizens  Maximum 2 points this performance | communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1   | 1 | The district has endeavoured to communicate and explain guidelines, circulars and policies issued by the national level to LLGs during FY 2016/2017. For instance:  • Dressing Code for Non-Uniformed Officers in the Public Service (from HR, CR/103/4, dated 13th July 2017) |
| measure  | • Evidence that LG during previous FY has conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc) with the public to provide feed-back on status of activity implementation: score 1. | 0 | It was reported that community dialogues were conducted during FY 2016/2017. However, no report on such meetings was availed.  |
| Assessment area: 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 LG gender focal person has provided guidance and support to sector departments to mainstream gender into their activities score 2.

- Guidance is present in the Gender sector including among others 2 reports on Youth Livelihood programmes,
- Mentoring of staff on gender issues at the district dated 23rd May 2017,
- Report on current strategies to address inequalities between men and women dated 27th June 2017,
- Training of youth, elderly, and PWDs on income enhancements dated 18th April 2017,
- Report on awareness sensitisation dated 9th May 2017
- Minutes of disability council executives presented date 21st Sept 2017, 16th June 2017, 24th Jan 2017
- Minutes of women council presented and dated 21st Nov 2017, 7th March 2017

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

0

2

No budget is presented and there.
 Presented budget of previous FY.
 Current budget was in soft copy. GFP claims they have limited budgets

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

Maximum 6 points on this performance measure

• Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 2

2

1

2

- Environmental compliance monitoring reports for maintenance of 21 selected National roads is provided and dated 10th September 2017.
- Environmental compliance for primary schools also presented dated 3rd Jan 2017.
- Activity report for monitoring and compliance inspections of wetlands in Serere sub counties presented dated 24th Nov 2016
- Screening reports presented dated 14th Sept 2017, 23rd Dec 2016, and 29th Aug 2016. These also have attachment of Environmental and Social mitigation plans.
- A budget of monitoring and evaluation of environmental compliance was availed and last year it was to a tune of 1,942,000

• Evidence that the LG integrates environmental and social management plans in the contract bid documents: score 1

- The presented works and infrastructure projects all integrated ESMP involving tree planting, tree seedlings availed and environmental restoration present in the bids.
- Environmental consultations carried out for projects evidence is consultancy services carried out under contract Sere596/SVc/2016-2017/00001
- Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc..): score 1
- No land agreements were presented
- Evidence that all completed projects have Environmental and Social Mitigation
   Certification Form completed and signed by Environmental
   Officer: score 2
- Environmental Certificate form presented on maintenance of 21 selected National roads signed by Environment Officer dated 14th September 2017.



## **LGPA 2017/18**

### **Educational Performance Measures**

Serere District

(Vote Code: 596)

Score 22/100 (22%)

| No.  | Performance<br>Measure   | Scoring Guide   | Score | Justification   |
|------|--|---|-------|---|
| Asse | essment area: Human  | Resource Management   |       |   |
| 1    | The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)  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 | 0     | According to the LG Performance Contract 2017/2018, the district has a wage provision of 7,487,201 billion for primary teachers.  Meanwhile, the LG has 2 schools which have only 5 teachers. Also, 25 schools do not have a substantive Head Teacher therefore the LG falls short of the requirement for a Head Teacher and a minimum of 7 teachers per school |
|      |  | Evidence that the LG has deployed a<br>Head Teacher and minimum of 7<br>teachers per school for the current FY:<br>score 4  | 0     | According to the OBT 2017/2018, the LG has 2 schools which have only 5 teachers and 25 schools do not have a substantive Head Teacher. This falls short of the requirement for a substantive Head Teacher and a minimum of 7 teachers per school  |
| 2    | LG has substantively recruited all primary school teachers where there is a wage bill provision  Maximum 6 for this performance measure  | • Evidence that the LG has filled the structure for primary teachers with a wage bill provision o If 100% score 6 o If 80 - 99% score 3 o If below 80% score 0                          | 3     | According to HRM, the LG has a ceiling of 1215 teachers, while the teachers on the payroll are 1125. This translates to 93% positions filled within the wage ceiling.   |

| 3 | LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.  Maximum 6 for this performance measure         | • Evidence that the LG has substantively filled all positions of school inspectors as per staff structure, where there is a wage bill provision: score 6 | 6 | The structure of the LG has 3 positions of school inspector. There is one position for senior inspector of schools that is filled and 2 positions of inspector that are also filled   |
|---|---|--|---|---|
| 4 | The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.  Maximum 4 for this performance measure | Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of Primary Teachers: score 2      | 0 | The Education Department submitted a recruitment plan to HRM with a provision of 22 Head Teachers, 38 Deputy Head Teachers, 97 Principal Education Assistants, 65 Senior Education Assistants as per the recruitment plan in the OBT 2017/2018.  Meanwhile recruitment of any teacher at any level may not happen unless there is an increase in the wage bill. |
|   |   | Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of School Inspectors: score 2     | 2 | The positions of school inspectors in the LG are filled   |

| depa<br>cond<br>perfo  | LG Education rtment has ucted rmance aisal for school                                     | Evidence that the LG Education department appraised school inspectors during the previous FY • 100% school inspectors: score 3                            | 0 | One personnel file for inspectors of schools was seen ie CR/D/10269 Appraised the other two were not seen.   |
|--|---|---|---|--|
| ensu<br>perfo<br>appra<br>prima<br>head<br>cond<br>the p                 | ectors and red that armance aisal for all ary school teachers is ucted during revious FY. | Evidence that the LG Education department appraised head teachers during the previous FY. • 90% - 100%: score 3 • 70% - 89%: score 2 • Below 70%: score 0 | 0 | No performance reports were<br>seen for the primary school<br>head teachers. However there<br>performance agreements were<br>seen  |
| Assessme   | nt area: Monitor  | ing and Inspection  |   |  |
| Depa<br>effect<br>commexplated<br>guide<br>circul<br>the nother poschool | nunicated and kined elines, policies, lars issued by ational level in revious FY to ols   |   |   | The LG did not have an inventory of guidelines, policies and circulars issued by the national level so it could not be ascertained that the list provided was complete. Also, the inconsistencies between the district and the visited schools (in regards to the documents received) means that the LG may not have a systematic way of communicating guidelines, policies and circulars to schools.  At the time of assessment, the circulars availed included;  • Permission to purchase motor vehicles dated 15th July, 2016 from Ministry of Education and Sports (MOES)  • Dressing code for non-uniformed officers in the public service, notice 1 of 2017 from the Ministry of Public Service (MOPS)  • Guidance on re-employment of Public Officers who contested in the 2016 elections dated 22nd August 2016 from |

• Evidence that the LG Education department has communicated all guidelines, policies, circulars issued by the national level in the previous FY to schools: score 1

- Construction and maintenance of public sanitary facility for community use for urban and rural dated 28th November 2016 from Ministry of Local Government
- Teachers Support Supervision in Schools dated June 30th 2017 from MOES

In Ojama P/S, the circulars received in FY 2016/2017 were:

- Consideration for candidates with Special Needs PLE 2016 dated 30th August 2016 from UNEB
- Early Grade Reading
   Assessment dated 29th August
   2016 from MOES
- Provision of Programme Support to your schools dated 28th September 2016 from MOES
- Dressing Code for nonuniformed officers in the Public Service, Notice 1 2017

In Sapir P/S, the Head Teacher did not present any circular

In Serere P/S, the school had the following circulars;

- Teachers Support Supervision in Schools dated June 30th 2017 from MOES
- Dressing Code for nonuniformed officers in the Public Service, Notice 1 2017

Olio P/S had the following circulars;

- Teachers Support Supervision in Schools dated June 30th 2017 from MOES
- Dressing Code for nonuniformed officers in the Public Service, Notice 1 2017
- Uganda National Primary
   School Performing Arts festival

|   |   |   |   | syllabus dated 17th February<br>2017 from MOES  |
|---|---|---|---|---|
|   |   | Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level, including on school feeding: score 2                           | 0 | There is no indication that the circulars presented at assessment were explained to the Head Teachers at the meetings held on 28th-29th September 2016, 10th February 2017 and 25th April 2017. The matters in these circulars did not appear on the agenda of these meetings and neither could they be traced in the minutes |
| 7 | The LG Education Department has effectively inspected all private and public primary schools  Maximum 12 for this performance measure | • Evidence that all private and public primary schools have been inspected at least once per term and reports produced: o 100% - score 12 o 90 to 99% - score 10 o 80 to 89% - score 8 o 70 to 79% - score 6 o 60 to 69% - score 3 o 50 to 59% score 1 o Below 50% score 0. | 0 | Only two school inspection reports were seen;  The report for Term I is dated 24th May 2017. The report lacked information on how many schools were inspected  The report for Term II indicated that the 103 Government Primary Schools were inspected  |
| 3 | LG Education<br>department has<br>discussed the<br>results/reports of<br>school inspections,  | Evidence that the Education department has discussed school inspection reports and used reports to make recommendations for corrective actions during the previous FY: score 4  | 0 | There were no minutes to show that the Department had held meetings to discuss school inspection reports  |
|   | used them to make recommendations for corrective actions and followed recommendations  Maximum 10 for this performance                | • Evidence that the LG Education department has submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports (MoES): Score 2   | 0 | Only one submission to the Directorate of Education Standards (DES) was seen at the time of assessment. This was the 2nd Term report/Quarter 4. It is a requirement that an inspection report is submitted to DES per Quarter.  |

|   |  | Evidence that the inspection recommendations are followed-up: score 4   | 0 | There was no evidence of follow up of inspection recommendations.   |
|---|--|---|---|---|
| 9 | 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 OBT: score 5       | 0 | The List of schools in the Department is inconsistent with the List of Schools on OBT and EMIS  The List that was found in the Department has 104 schools (97 Government Schools and 7 Community Schools)  EMIS and OBT present 98 Government Schools  The EMIS list also has 72 Private Schools that do not appear on the List that was found in the Department  |
|   |  | Evidence that the LG has submitted accurate/consistent data: • Enrolment data for all schools which is consistent with EMIS report and OBT: score 5 | 0 | There are inconsistencies in the enrolment data on the List in the Department, EMIS and OBT For instance, Lemton P/S has 927 pupils in EMIS, 879 in OBT and 841 pupils on the list in the Department  Mulondo P/S has 342 pupils in EMIS, 414 in OBT and 405 on the list in the Department  Odapokol P/S has 1049 pupils in EMIS, 1070 in OBT and 1002 on the list in the Department  Okodo P/S has 825 pupils in EMIS, 825 in OBT and 845 on the list in the Department  Owii P/S has 399 pupils in EMIS, 434 in OBT and 167 on the List in the Department |

Assessment area: Governance, oversight, transparency and accountability

The LG committee responsible for education met, discussed service delivery issues and presented issues that require approval to Council

Maximum 4 for this performance measure

• Evidence that the council committee responsible for education met and discussed service delivery issues including inspection, performance assessment results, LG PAC reports etc...during the previous FY: score 2

During FY 2016/2017 the Community Based and Social Services met and discussed service delivery issues as follows:

- Minutes of the Committee meeting held during 24th – 25th May 2017 (under MIN. 27/4SSCM/05/2017 & MIN. 28/445SAM/05/2017).
- Minutes of the Committee meeting held during 9th – 10th March 2017 (under MIN. 20/3SSCM/03/2017).

2

2

- Minutes of the Committee meeting held on 12th December 2016 (under MIN. 14/2SSCM/12/2016).
- Minutes of the Committee meeting held during 15th – 16th September 2016 (under MIN. 05/1SSCM/09/2016 & MIN. 06/1SSCM/09/2016).

• Evidence that the education sector committee has presented issues that requires approval to Council: score 2 The Community Based and Social Services Committee met and generated recommendations for presentation to the District Council. Refer to:

- 'The Report from the Social Services on Recommendations Made as at 13th December 2016' presented during the District Council meeting held on 20th December 2016 (under MIN. 18/2DC/12/2016).
- 'The Report from the Social Services on Recommendations Made as at 15th and 16th December 2016' presented during the District Council meeting held during 27th 28th September 2016 (under MIN. 11/1DC/09/2016).

| 11   | Primary schools in a LG have functional SMCs  Maximum 5 for this performance measure                          | Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO) • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80% schools: score 0 | 0 | At the time of assessment, only 39 /97 had SMC files in the DEO's office. The status of the 5 sampled schools was as follows:  Aboloi Primary School and AEP Primary School had 2 sets of minutes for 2017 in their files. Omirai Primary School had 4 sets of minutes in 2017, Jelel Primary School had only one set of minutes while Anyalai Primary School did not have a single of minutes for 2017  This is an indicator that either schools are not holding the 3 mandatory meetings or they are not submitting minutes to the DEO's office. |
|------|---|---|---|--|
| 12   | The LG has publicised all schools receiving non-wage recurrent grants  Maximum 3 for this performance measure | Evidence that the LG has publicised<br>all schools receiving non-wage<br>recurrent grants e.g. through posting<br>on public notice boards: score 3  | 0 | At the time of assessment, the LG had not posted non-wage recurrent grants on the district notice board. 3 of the schools visited (Ojama P/S, Olio P/S and Sapir P/S) had posted non-wage grants in the Head Teachers Office. Serere P/S had not posted the latest non-wage grants in the Head Teachers office   |
| Asse | essment area: Procure   | ement and contract management   |   |  |

| 3 | The LG Education department has submitted procurement requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget  Maximum 4 for this performance measure | • Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30: score 4 | 4 | The Education Department submitted procurement requests to PDU in time as follows;  Supply of 36, 3 seater desks to Ayep P/S, Owii P/S and Kamurojo Kakor at the cost of 4,320,000/= for each school. Date of submission to PDU was 6/3/2017  Supply of 36, 3 seater desks to the lower primary in Katonge P/S, Aswii P/S and Kamod P/S at the cost of 4,320,000/= for each school. Date of submission to PDU was 18/4/2017  Construction of 2, 4 classroom block in Kelim P/S at the cost of 102,000,000/=. Date of submission to PDU was |
|---|--|--|---|--|
|   |  |  |   | 18/4/2017  Construction of a two classroom block in Kamod and Pingire P/S at the cost of 51,000,000/= each. Date of submission to PDU was 18/4/2017  |
| 4 | The LG Education department has certified and initiated payment for supplies on time  Maximum 3 for this performance measure   |  |   | There are no delays in certification, recommendation, and payment of suppliers in the health sector for example, some of the major contracts in the sector during the year were; i. Name of Contractor – Neco Enterprises Ltd  a. Nature of Contract – Construction of one Block of 2 classrooms at Aswii Primary School  b. Award dated – 25th October 2016   |
|   |  |  |   | c. Contract signed – 28th<br>October 2016<br>d. Request for payment – 2nd  |

February 2017 e. Date of Certificate - 2nd February 2017 f. Approval – 2nd February • Evidence that the LG Education 2017 departments timely (as per contract) 3 certified and recommended suppliers g. Payment date - 3rd for payment: score 3 points February 2017 ii. Name of Contractor - Imas Engineering and Cons Ltd a. Nature of Contract -Construction of a one Block of 2 Classrooms at AEP Primary School b. Award dated – 25th October 2016 c. Contract signed – 28th October 2016 d. Request for payment – 16th December 2016 e. Certificate – 21st December 2016 f. Approval – 21st December 2016 Payment – 22nd December Therefore, a score of 3.

Assessment area: Financial management and reporting

| 15 | The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit  Maximum 4 for this performance measure | Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by mid-July for consolidation: score 4  | 0 | The Department submitted the Annual Performance Report for 2016/2017 (as well as all four quarterly reports) to the Planner. The District Planner used to copy respective OBT Baby Files to departmental computers for each head of department to prepare a quarterly report. The department submitted to planner on a flash.  Thus, it could not be established whether the submission was by mid-July 2017.  |
|----|---|---|---|--|
| 16 | LG Education has acted on Internal Audit recommendation (if any)  Maximum 4 for this performance measure  | • Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points o If all queries are not responded to score 0 | 0 | <ul> <li>There was no evidence that the sector had provided information on status of implementation of internal audit findings.</li> <li>For example, there was no evidence that the following audit queries as raised in 4th Quarter 2016/17 internal audit report and further recommended by LG PAC, had been handled by the education department;</li> <li>o 2 teachers not staying at school (Omiriai Primary School) despite parents' efforts to construct the 2 houses.</li> <li>o No up to date staff list at Olobai Primary School.</li> <li>2nd Quarter raised the following internal audit queries;</li> <li>o Unaccounted for funds totaling to UGX 4,260,000 for fuel. Although accountability documents were not available during the assessment, LG PAC had dropped query.</li> <li>Therefore, this was not enough evidence and so, zero score.</li> </ul> |

| LG Education Department has disseminated and promoted adherence to gender guidelines | • Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills etc: Score 2 | 0 | There is no evidence of dissemination of guidelines of how senior women/men teacher should provide guidance to girls and boys to handle hygiene, reproductive health, life skills  |
|--|---|---|--|
| Maximum 5 points<br>for this<br>performance<br>measure                               | Evidence that LG Education<br>department in collaboration with gender<br>department have issued and explained<br>guidelines on how to manage sanitation<br>for girls and PWDs in primary schools:<br>score 2  | 0 | There is no evidence of issue and explanation of guidelines on how to manage sanitation for girls and PWDs in primary schools.   |
|  | Evidence that the School Management Committee meet the guideline on gender composition: score 1   | 0 | The requirement of the gend composition as per the 2nd Schedule of the Education Ad 2008 is at least 2 women on Foundation Body which has a total of 6 people.  The schools visited were Oja P/S, Sapir P/S, Serere P/S ar Olio P/S  In Serere P/S, the Foundatio body membership is 2 wome and 4 men while that of Olio P/S has 3 women and 3 men In Ojama P/S and Sapir P/S to SMC Foundation body membership is 5 men and 1 woman which is contrary to the gender composition guideline for SMC's |

| 18 | LG Education department has ensured that guidelines on environmental management are disseminated  Maximum 3 points for this performance measure | • Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc): score 3: | 0 | There is no evidence of issue of guidelines on environmental management to the schools by the Education Department in collaboration with the Environment Department |
|----|---|--|---|---|
|----|---|--|---|---|



### Health Performance Measures

Serere District

(Vote Code: 596)

Score 53/100 (53%)

#### Health Performance Measures

| No.   | Performance<br>Measure  | Scoring Guide   | Score | Justification   |  |  |  |
|---|---|---|-------|---|--|--|--|
| Assessment area: Human resource planning and management |   |   |       |   |  |  |  |
| 1   | LG has substantively recruited primary health workers with a wage bill provision from PHC wage  Maximum 6 points for this performance measure             | Evidence that LG has filled the structure for primary health workers with a wage bill provision from PHC wage for the current FY • More than 80% filled: score 6 points, • 60 – 80% - score 3 • Less than 60% filled: score 0 | 6     | • The District Health office provided a list of health workers staff recruited during the FY 2016/17 containing 7 Enrolled Nurses, 5 Enrolled Midwives and a Medical Officer as an evidence. LG has filled the structure of the Health Workers staff but not other non health workers support staff. This recruitment was based on the wage bill allocated to the district and could not recruit non-health workers or non-technical staff. 100% of Health workers have been recruited but when we consider adding non- health workers and Health workers together then the staffing level is at 64% filled |  |  |  |
| 2   | The LG Health department has submitted a comprehensive recruitment plan to the HRM department  Maximum 4 points for this performance measure              | Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of health workers: score 4  | 4     | DHO said that the district achieved recruitment of 100% of technical staff and no need for another plan. However it needs recruitment of non-technical staff e.g porters and askaris.   |  |  |  |
| 3   | The LG Health department has ensured that performance appraisal for health facility in charge is conducted  Maximum 8 points for this performance measure | Evidence that the health facility in-charge have been appraised during the previous FY: o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0  | 0     | The district has 2 health centre iv and the two health facility in charges do not have performance reports.   |  |  |  |

| 4  | The Local Government Health department has equitably deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.  Maximum 4 points for this performance measure | • Evidence that the LG Health department has deployed health workers equitably, in line with the lists submitted with the budget for the current FY: score 4                   | 4 | Transfer instructions letters for all the 7 Enrolled Nurses, 5 Enrolled Midwives, a Medical Officer were presented to this assessment and all letters dated 2 March 2016 and executed by Mr Rwanguha benon Ag. Chief Administrative officer.  |
|----|---|--|---|---|
| As | ssessment area: Monitoring  | g and Supervision  |   |   |
| 5  | The DHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities  Maximum 6 for this performance measure   | • Evidence that the DHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3                     | 3 | A signed list containing signatures of incharges of health facilities who received guidelines was presented as evidence, dated 3rd August 2016. The list was for distribution of guidelines and policies. The DHO informed this assessment that distribution of national documents has a challenge in that few copies are sent to the district and district expected to reproduce copies for distribution and dissemination. However, the District has no budget provisions for such. |
|    |   | • Evidence that the DHO has held meetings with health facility in-charges and among others explained the guidelines, policies, circulars issued by the national level: score 3 | 0 | No evidence presented to this assessment that meetings were held with health facility in-charges and among others to explain guidelines, policies, circulars issued by the national level   |

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

Maximum 6 points for this performance measure

Evidence that DHT has supervised 100% of HC IVs and district hospitals: score 3

3

2

The evidence reports presented for this assessment are as follows:

- Support Supervision reports dated 30th March 2017, for Health for lower level facilities; The supervision of AkoboiHCII, Kamod HCII, Bugondo HCII, Kamusala HCI for Kamod I Kateta HCII and Kateta Moru HCII,;
- Support Supervision dated 25th
   October 2016 for supervision of Drug shops, private labs and maternal homes
- Integrated Support supervision dated
   31st October 2016 to all 23 health facilities in the district.

All documents are filed in a file folder named Supervision reports DHO

Evidence that DHT has supervised lower level health facilities within the previous FY: • If 100% supervised: score 3 points • 80 - 99% of the health facilities: score 2 • 60 - 79% of the health facilities: score 1 • Less than 60% of the health facilities: score 0

The DHO office presented one report of the following as evidence;

- Report of support supervision dated
   22rd Dec 2016, for Kasilo and Serere
   Health Sub-District, visted in two groups
- Kasilo HSD;- Visited the following Health Facilities; Kamod, HCII, Bugondo HCIII, Kadungulu HCIII, Aarapoo HCII, Pingire HCIII, Apapai HCIV of Kasilo
- Serere HSD Visited the following Health Centres; Akoboi, HCII. Atiira HCIII, Omagoro HCII, Kamusala HCII, Kateta HCIII

All documents are filed in a file folder named Supervision reports DHO

| 7 | The Health Sub- district(s) have effectively provided support supervision to lower level health units  Maximum 6 points for this performance measure  | Evidence that health facilities have been supervised by HSD and reports produced: • If 100% supervised score 6 points • 80 - 99% of the health facilities: score 4 • 60 - 79% of the health facilities: score 2 • Less than 60% of the health facilities: score 0 | 2 | This assessment visited Serere HSD and reviewed the visits made by the DHO's office and some visits relate to supervision and mentorship but others are not. The visits were dated as follows  Visit Dates Purpose Personnel  2rd Sept 2016 QI Mentorship Biostatistician  20-Jan-17 QI Mentorship Biostatistician  1st feb 2017 Sport Check DHO  22-Feb-17 Waste health care management meeting DHT  8th may 2017 Site identification for construction of adolescent center DHO  |
|---|---|---|---|---|
| 8 | The LG Health department (including HSDs) have discussed the results/reports of the support supervision and monitoring visits, used them to make recommendations for corrective actions and followed up  Maximum 10 points for this performance measure | • Evidence that the reports have been discussed and used to make recommendations for corrective actions during the previous FY: score 4   | 4 | o The DHO office presented documents indicating that reports are discussed during the monthly DHT meetings and during quarterly coordination of monitoring and review of activity implementation.  Among documents presented include the following, the DHO office checklist used for integrated supervision of health centres to identify issues emerging from support supervision and make recommendations in the space for comments and dates are noted. The checklist covers all programmatic areas under 5 illness, Immunisation,  Reproductive health, Nutrition TB, HIV infection prevention and control, Finances and administrative issues. Each health facility has a separate checklist and recommendations plus actions |
|   | • Evidence that the recommendations are followed – up and specific activities undertaken for correction: score 6  |   | 0 | No evidence presented regarding follow-<br>up of recommendations  |
| 9 | The LG Health   |   |   | ALL Health facility reporting rates HMIS  |

department has submitted accurate/consistent reports/date for health facility lists as per formats provided by MoH

Maximum 10 for this performance measure

• Evidence that the LG has submitted accurate/consistent data regarding: o List of health facilities which are consistent with both HMIS reports and OBT: score 10

105.1 was 100% for SERERE DISTRICT JULY 2016-JUNE 2017

See below

Health unit HMIS 105:1 Reporting rate HMIS 108:1 Reporting rate HMIS 106a:1-2 Reporting rate HMIS 012: Reporting rate HMIS 033b: Reporting rate

Aarapoo HC II 100 0 100 100 40.4

Apapai HC IV 100 100 100 91.7 96.2

Atiira HC III 100 100 100 91.7 92.3

Bugondo HC III 100 100 100 91.7 86.5

Doctor`s Clinic Serere 100 0 0 0 0

Kadungulu HC III 100 0 100 100 96.2

Kagwara HC II 100 0 100 100 100

Kamod HC II 100 0 75 75 96.2

Kamusala HC II 100 0 0 91.7 100

Kateta Gvt HC III 100 100 100 100 100 84.6

Kateta Moru HC II 100 0 100 91.7 71.2

Kateta Ngo HC II 100 0 75 91.7 75

Kidetok HC III 100 100 100 100 96.2

Kyere HC III 100 100 100 100 92.3

Kyere mission HC III 100 100 100 91.7 82.7

Lake Kyoga Falher Nursing Home 100 0 0 0 0

Miria HC II 100 0 0 0 96.2

10

| Oburin HC II 100 0 0 100 88.5             |
|---|
| Omagoro HC II 100 0 75 91.7 76.9          |
| Pingire HC III 100 100 100 100 100        |
| Serere Akoboi HC II GOVT 100 0 0 100 100  |
| Serere HC IV 100 100 100 96.2             |
| St. Martins Amakio HC III 100 100 100 100 |
| District 100 100 96 95 89                 |
|   |

Assessment area: Governance, oversight, transparency and accountability

10

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

Maximum 4 for this performance measure

• Evidence that the council committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2

2

During FY 2016/2017 the Community Based and Social Services met and discussed service delivery issues as follows:

- Minutes of the Committee meeting held during 24th – 25th May 2017 (under MIN. 27/4SSCM/05/2017 & MIN. 28/445SAM/05/2017).
- Minutes of the Committee meeting held during 9th 10th March 2017 (under MIN. 20/3SSCM/03/2017).
- Minutes of the Committee meeting held on 12th December 2016 (under MIN. 14/2SSCM/12/2016).
- Minutes of the Committee meeting held during 15th – 16th September 2016 (under MIN. 05/1SSCM/09/2016 & MIN. 06/1SSCM/09/2016).

|                                     |  | • Evidence that the health sector committee has presented issues that require approval to Council: score 2   | 2 | Services Committee met and generated recommendations for presentation to the District Council. Refer to:  • 'The Report from the Social Services on Recommendations Made as at 13th December 2016' presented during the District Council meeting held on 20th December 2016 (under MIN. 18/2DC/12/2016).  • 'The Report from the Social Services on Recommendations Made as at 15th and 16th December 2016' presented during the District Council meeting held during 27th – 28th September 2016 (under MIN. 11/1DC/09/2016). |
|-------------------------------------|--|--|---|---|
| Mar<br>Con<br>Hos<br>ope            | e Health Unit<br>nagement<br>mmittees and<br>spital Board are<br>erational/functioning                                     | Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues): • If 100% of randomly sampled facilities: score 5 • If 80-99%: score 3 • If 70-79%: : score 1 • If less than 70%: score 0 | 5 | 10 members. The HUMC meets regulary and on 19 April 2017, the committee met to have a new chairperson. On 15 july 2016 the committee discussed issues of budget allocations for transporting patients of Kateta HCIII because the centre had no functioning ambulance.  |
| all h<br>rece<br>wag<br>Max<br>perf | e LG has publicised<br>nealth facilities<br>eiving PHC non-<br>ge recurrent grants<br>ximum 3 for this<br>formance measure | Evidence that the LG     has publicised all health     facilities receiving PHC     non-wage recurrent     grants e.g. through     posting on public notice     boards: score 3  ent and contract management   | 0 | No public noticeboard at DHO office. And no transfers publicised.   |

| 13 | The LG Health department has submitted procurement requests,  | Evidence that the sector<br>has submitted<br>procurement requests to<br>PDU that cover all<br>investment items in the  | 0 | DHO said No procurement plan submitted in the current FY   |
|----|---|--|---|--|
|    | complete with all<br>technical<br>requirements, to PDU<br>that cover all items in<br>the approved Sector  | approved Sector annual<br>work plan and budget on<br>time by April 30 for the<br>current FY: score 2   |   | in the current i   |
|    | annual work plan and budget  Maximum 4 for this performance measure   | Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2  | 0 | No procurement request submitted for the current FY  |
| 14 | The LG Health department has supported all health facilities to submit health supplies procurement plan to NMS  Maximum 8 points for this performance measure | <ul> <li>Evidence that the LG Health department has supported all health facilities to submit health supplies procurement plan to NMS on time:</li> <li>100% - score 8</li> <li>70-99% - score 4</li> <li>Below 70% - score 0</li> </ul> | 0 | No convincing evidence produced for this assessment regarding supporting Health facilities to submit health supplies procurement plans but the dispenser at serere health facility informed this assessment that he provides support to lower level facilities. This is not evidenced. |

| 15 | The LG Health department has certified and initiated payment for supplies on time |  |   | There are no delays in certification, recommendation, and payment of suppliers/contractors in the health sector as seen in the 2 contracts executed in FY 2016/17 as follows; |
|----|---|--|---|---|
|    | Maximum 2 for this  |  |   | i. Name of Contractor – Neco Enterprises<br>Ltd   |
|    | performance measure   |  |   | a. Nature of Contract – Rehabilitation of boreholes `   |
|    |   |  |   | b. Award dated – 25th October 2016  |
|    |   |  |   | c. Contract signed – 28th October 2016  |
|    |   |  |   | d. Request for payment – 3rd April 2017   |
|    |   | . Fridance that the DLIC                                     |   | e. Approval – 4th April 2017  |
|    |   | Evidence that the DHO     (as per contract) certified        |   | f. Payment date – 5th April 2017  |
|    |   | and recommended suppliers timely for payment: score 2 points | 2 | ii. Name of Contractor – Vecos<br>Construction of Mini Solar Well Pumping<br>for safe and clean water   |
|    |   |  |   | a. Nature of Contract – Construction of piped water supply system   |
|    |   |  |   | b. Award dated – 31st March 2016  |
|    |   |  |   | c. Contract signed – 5th April 2016   |
|    |   |  |   | d. Request for payment – 14th November 2016   |
|    |   |  |   | e. Certificate – 25th November 2016   |
|    |   |  |   | f. Approval – 1st December 2016   |

Payment – 7th December 2016

Therefore, a score of 2.

Assessment area: Financial management and reporting

| 16   | The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit  Maximum 4 for this performance measure | • Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 4   | 0 | The Department submitted the Annual Performance Report for 2016/2017 (as well as all four quarterly reports) to the Planner. The District Planner used to correspective OBT Baby Files to departmental computers for each head department to prepare a quarterly report The department submitted to planner or flash.  Thus, it could not be established whether the submission was by mid-July 2017.              |
|------|--|---|---|--|
| 17   | LG Health department has acted on Internal Audit recommendation (if any)  Maximum 4 for this performance measure   | Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year • If sector has no audit query score 4 • If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 points • If all queries are not responded to score 0 | 2 | <ul> <li>2nd Quarter internal audit report had a issue of unaccounted for funds totalling UGX 3,620,000 for fuel and registration/census update of community schools in the health sector.</li> <li>Accountability sheets were seen attached on Voucher Nos. 1/11 dated 3r November 2016 for UGX 2,000,000 and 14/11 dated 9th November 2016 for UG 1,620,000.</li> <li>Therefore, a score of 2 points.</li> </ul> |
| Asse | essment area: Social and   | environmental safeguards  |   |  |
| 18   | Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.  | • Evidence that Health<br>Unit Management<br>Committee (HUMC) meet<br>the gender composition<br>as per guidelines: score 2  | 2 | This assessment visited Serere HCIV an reviewed the list of HUMC members. 3 members are women and 7 members ar men which is more than 30% gender balance ratio of women to men   |
|      | Maximum 4 points   | • Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2  | 0 | The DHO said that this is incorporate in supervision visits but there is no evidence presented in the supervision reports that the DHO issued guidelines that the decilities to confirm the practice.  |

| The LG Health department has issued guidelines on medical waste management  Maximum 2 points  • Evidence that the LGs has issued guidelines on medical waste management, including guidelines for construction of facilities for medical waste disposal : score 2 points. | is<br>m<br>H<br>0 tir<br>re<br>T<br>ju | The DHO said that the district does not assue specific guidelines on how to hanage waste in health facilities. However, the district conducted a oneme mentorship visit on 23th Feb 2017 regarding health care waste management. The evidence of this is not sufficient to ustify that the LG issued guideline on hedical waste |
|---|--|---|
|---|--|---|



## LGPA 2017/18

## Water & Environment Performance Measures

Serere District

(Vote Code: 596)

Score 76/100 (76%)

## Water & Environment Performance Measures

| No.  | Performance<br>Measure  | Scoring Guide   | Score | Justification  |  |  |  |
|------|---|---|-------|--|--|--|--|
| Asse | Assessment area: Planning, budgeting and execution  |   |       |  |  |  |  |
| 1    | The DWO has targeted allocations to subcounties with safe water coverage below the district |   |       | Serere district local government safe water coverage is reported to be 74.68% ( AWP and Budget for the FY 2017/2018)  The same documents categorizes   |  |  |  |
|      | average.  |   |       | safe water coverage data for sub counties in the district as seen here under:  |  |  |  |
|      | Maximum score 10 for this   |   |       | - Atiira s/c 98.49%  |  |  |  |
|      | performance   |   |       | - Bungondo s/c 78.92%  |  |  |  |
|      | measure   |   |       | - Kadungulu s/c 60.37%   |  |  |  |
|      |   |   |       | - Kateta s/c 72.04%  |  |  |  |
|      |   |   |       | - Kyere s/c 65.02%   |  |  |  |
|      |   |   |       | - Labori s/c 70.05%  |  |  |  |
|      |   |   |       | - Olio s/c 83.60%  |  |  |  |
|      |   |   |       | - Pingire s/c 81.62%   |  |  |  |
|      |   |   |       | From the above sub counties with safe  |  |  |  |
|      |   |   |       | water coverage below district average  |  |  |  |
|      |   | Evidence that the LG Water  |       | are; Kadungulu, Kateta, Kyere, and   |  |  |  |
|      |   | department has targeted sub-<br>counties with safe water coverage     | 10    | Labori.  |  |  |  |
|      |   | below the district average in the budget for the current FY: score 10 |       | • The approved Serere water department budget for the current FY 2017/2018 shows that sub counties with safe water coverage below district average were targeted for water and sanitation services. Examples below justifies this; |  |  |  |
|      |   |   |       | - 01 deep borehole was budgeted<br>for Kateta s/c at Achilakweny village<br>under DWSCG  |  |  |  |
|      |   |   |       | - 03 deep boreholes were<br>budgeted for Kyere s/c in the villages<br>of Osigira- Obur, Moru-Atyang and  |  |  |  |

|  |   |    | Akisim under DWSCG funding  - 01 deep borehole was budgeted for in Kadungulu s/c in Madaka village under DWSCG funding  - 0I deep borehole was budgeted for at Kakus-Olio polytechnic in Olio s/c under DWSCG.  This above justifies that serere DLG planed to provide safe water to sub counties bell district average in the current FY 2017/2018  |
|--|---|----|--|
| The LG Water department has implemented budgeted water projects in the targeted subcounties (i.e. subcounties with safe water coverage below the district average)  Maximum 15 points for this performance measure | • Evidence that the LG Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY: score 15 | 15 | <ul> <li>According to the Annual water and sanitation performance report for the financial year 2016/2017 dated 24th/7/2017, sub counties with safe water coverage below the district average were being targeted and monitored for efficiency delivery.</li> <li>For example deep boreholes were implemented per sub county as follows;</li> <li>Okodo central DWD52543 in Kateta sub county location 0558827/Grid 0158932 was reported as functional</li> <li>Oceketum DWD52547, Kadungulu s/c location 0569422, Grid 0160100 was reported as functional</li> <li>Kabulabula DWD52544, Kadungulu s/c location 0518157, Grid 0166139 was reported as functional</li> <li>Obangai P/S DWD 2892 Labori s/c location 0533508, Grid 0163805 was reported functional.</li> <li>Approved Budget for the previous FY 2016/2017 shows budget allocations to the sub counties with water coverage below district average as shown below:</li> <li>Kabulabulu village one deep</li> </ul> |

borehole at estimated cost of 19,700,000/= (spent)

- Obangai p/c i deep borehole was rehabilitated at estimated cost of 9,000,000/= (spent)
- Okodo central 01 deep borehole was budgeted for at estimated cost of 19,700,000/= (spent)
- Oceketum village 1 deep borehole was budgeted for at estimated cost of 19,700,000/= (spent)

This proposes that Serere DLG has been

planning to provide safe water to sub

counties below average district status in

the previous financial year 2016/2017

## Assessment area: Monitoring and Supervision

The LG Water department carries out monthly monitoring and supervision of project investments in the sector

Maximum 15 points for this performance measure

- Serere district local government annual water and sanitation sector report for previous financial year 2016/2017 dated 24th/7/2017 pages 16-17 the water department had planned to monitor the WSS under takings as follows:
- 08 new boreholes
- 03 boreholes rehabilitation
- Design for the intake works at Garama landing site
- Completion of phase 11 Toror mini-solar scheme

The total wss facilities planned for monitoring were 13 in the previous Financial year.

The supervision and monitoring plan of the DWO reveals thus;

Supervision report for

Evidence that the LG Water department has monitored each of WSS facilities at least annually • If

|   |   | more than 95% of the WSS facilities monitored: score 15 • 80 - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60 - 69% monitored: score 3 • Less than 50% of WSS facilities monitored - score 0 | 15 | construction of the main solar pumping system by Vecos investments ltd, under the funding of DWSCG 2016/2017 dated 23/7/2017.  - 08 deep boreholes construction and supervision report under the DWSCG 2016/2017FY. Namely; Apokor T/C, Arafait, Agola, Okodo central, Akoboi, HC II, Koromojo central, Oceketum, and Kabulabula dated 27/4/2017  - Supervision report for Design of the intake works for Garama landing site under the contractor of ARK Associates ltd in financial year 2016/2017 dated 27/4/2017  - Supervision report for the rehabilitation of 3 boreholes by Neco enterprises ltd under the funding of DWSCG FY 2016/2017 dated 4/3/2017. The boreholes rehabilitated were; Kadungulu p/s borehole, Obangin p/s borehole and Ogelak p/s borehole.  The above planned supervision reports shows that Serere district local government did supervise all WSS projects as planned for the previous financial year 2016/2017. |
|---|---|--|----|--|
| 4 | The LG Water department has submitted accurate/consistent reports/data lists of water facilities as per formats provided by MoWE  Maximum 10 for this performance measure | • Evidence that the LG has submitted accurate/consistent data for the current FY: o List of water facility which are consistent in both sector MIS reports and OBT: score 10   | 10 | • According to the sector MIS observed, lists of water sources per Sub County were consistent and similar to what exists at MoWE MIS records. This information portrays functionality of the water facility, name of the water facility, source of funding and location. This covers all the eight sub counties of Serere district local government. Namely Atiira s/c, Bugondo s/c,Kadungulu s/c, Kateta s/c, Kyere s/c, Labori s/c, Olio s/c, and Pingire s/c.   |
|   | essmem area: Procure  | ement and contract management  |    |  |
| 5 | The LG Water department has   |  |    | The DWO of Serere district local<br>government submitted procurement   |

submitted
procurement
requests, complete
with all technical
requirements, to
PDU that cover all
items in the
approved Sector
annual work plan
and budget

Maximum 4 for this performance measure

Evidence that the sector has submitted procurement requests to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4 request to DPU that cover all investment items in the approved sector annual work plan and budget on time by 30th/April. The under mention procurement requests were observed as seen here under:

- SER596/WRKS/2017-2018/00003 Rehabilitation of 3 deep boreholes funded by DWSCG at estimated unit cost of 17,333,300/= resulting into total estimated cost of 52,000,000/= requested on date 30/12/2017
- SERE596/WRKS/2017-2018/00001 (a)

Drilling, pump testing, casting of aprons and motorized installation of deep boreholes under DWSCG funding. Date of request 30/9/2017.

Unit/quantity 1

Estimated unit cost 30,000,000/=

Estimated total cost 30,000,000/=

- SER596/WRKS/2017-2018/00001(b)

Drilling, pump testing, casting of aprons and motorized installation of 7 deep boreholes at estimated unit cost of 16,997,600/= and total estimated cost of 119,000,000/= requested on 30/9/2017

- SER596/SERS/2017-2018/00002

Feasibility study and design of the piped water supply under DWSCG funding.

Unit/quantity 01

Estimated unit cost 48,000,000/=

Total estimated cost 48,000,000/=

Request date 30/9/2017

SER596/Supplies/2017-

4

|   |   |   |   | 2018/00001  Description: supply of assorted furniture under DWSCG funding.  Unit: 1, unit cost 14,500,000/=  |
|---|---|---|---|--|
|   |   |   |   | requested on 30/9/2017  The above procurement requests were planned under sector annual work plan and Budget for the current FY 2017/2018 attached as annex page 34. This demonstrates the serere district local government submitted procurement requests to DPU that cover all investment items in approved sector work plan and budget for the current financial year   |
| 6 | The DWO has appointed Contract Manager and has effectively managed the WSS contracts  Maximum 8 points for this performance measure | If the DWO prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2 | 0 | <ul> <li>While there was dissemination report of the design for Garama landing site water supply system intake works at DWO, meeting held at water board room dated 18/7/2017 to update the district executive committee members on the progress of the project it didn't cover all other water projects in the district.</li> <li>No contract manager was substantively appointed to manage was infrastructure records and establish if they were constructed as per the BOQs/ specification. The sample of 5 wss projects was not taken to validate the findings from the files which were not observed at the time of assessment</li> </ul> |

| If water and sanitation facilities<br>constructed as per design(s):<br>score 2                           | 2 | Dissemination report of the design for Garama landing site water supply system intake works was obtained at DWO. The meeting was held at water board room dated 18/7/2017 to update the district executive committee members on the progress of the project. This report up dated technical committee members on project design and specifications as outlined in the architectural design of the project implementation in water department of Serere district local government. |
|--|---|---|
| If contractor handed over all completed WSS facilities: score 2  | 0 | No handover report on all<br>completed WSS facilities was<br>obtained at DWO  |
| If DWO appropriately certified all<br>WSS projects and prepared and<br>filed completion reports: score 2 | 0 | No certificates of projects<br>completion were certified and<br>completion reports obtained at DWO  |

 Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points

> • Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points

3

There are no delays in certification, recommendation, and payment of suppliers in the water sector during FY 2016/17 as seen in 2 contracts below which were picked at random during the assessment;

- i. Name of Contractor Water Resources and Environmental Consultants Ltd
- a. Nature of Contract Siting, design and drilling supervision of 8
   boreholes `
- b. Request for payment 29th March 2017
- c. Date of certificate 4th April 2017
- d. Approval 7th June 2017
- e. Payment date 13th June 2017

The delay to approve payment by CAO in (i) above was due to contractual obligations that required the contractor to fulfil certain conditions before payment and, this was provided for in the contract agreement.

- ii. Name of Contractor Icon Projects Limited
- a. Nature of Contract Drilling and installation of 6 hand pump boreholes and 2 production boreholes
- b. Contract signed 26th October 2016
- c. Request for payment 6th March 2017
- d. Certificate 7th March 2017
- e. Approval 7th March 2017
- f. Payment 13th March 2017

Therefore, a score of 3.

Assessment area: Financial management and reporting

| 8 | The LG Water department has submitted annual reports (including all quarterly reports) in time to the Planning Unit  Maximum 5 for this performance measure | • Evidence that the department submitted the annual performance report for the previous FY (including all four quarterly reports) to the Planner by mid-July for consolidation: score 5  | 0 | The Department submitted the Annual Performance Report for 2016/2017 (as well as all four quarterly reports) to the Planner. The District Planner used to copy respective OBT Baby Files to departmental computers for each head of department to prepare a quarterly report. The department submitted to planner on a flash.  Thus, it could not be established whether the submission was by mid-July 2017. |
|---|---|--|---|---|
| 9 | LG Water Department has acted on Internal Audit recommendation (if any)  Maximum 5 for this performance measure   | • Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year o If sector has no audit query score 5 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 3 If queries are not responded to score 0 | 5 | There were no queries in water sector as per internal audit reports for FY 2016/17. Therefore, a maximum score of 5.  |

Assessment area: Governance, oversight, transparency and accountability

The LG committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council

Maximum 6 for this performance measure

• Evidence that the council committee responsible for water met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports and submissions from the District Water and Sanitation Coordination Committee (DWSCC) etc. during the previous FY: score 3

3

3

During FY 2016/2017 the Production, Works and Natural Resources Committee met and discussed service delivery issues as follows:

- Minutes of the Committee meeting held during 22nd – 23rd May 2017 (under MIN. 28/4PCM/05/2017 & MIN. 29/4PCM/05/2017).
- Minutes of the Committee meeting held during 6th – 7th March 2017 (under MIN. 19/3PCM/03/2017).
- Minutes of the Committee meeting held on 12th December 2016 (under MIN. 10/2PCM/12/2016).
- Minutes of the Committee meeting held during 13th – 14th September 2016 (under MIN. 05/1PCM/09/2016).

• Evidence that the water sector committee has presented issues that require approval to Council: score 3 The Production, Works and Natural Resources Committee met and generated recommendations for presentation to the District Council. Refer to:

- 'The Report from the Production, Works and Natural Resources on Recommendations Made as at 12th December 2016' presented during the District Council meeting held on 20th December 2016 (under MIN. 18/2DC/12/2016).
- 'The Report from the Production, Works and Natural Resources on Recommendations Made as at 13th and 14th September 2016' presented during the District Council meeting held on 27th – 28th September 2016 (under MIN. 11/2DC/09/2016).

• 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

0

No information on the AWP, Budget and development grant releases and expenditure was obtained on either the district notice boards or district website as per the PPDA act.

Maximum 6 points

 All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2

 From a sample of five water projects visited, labels existed but not adequate to meet assessment justification. While name of the project, date of construction, and source of funding existed, there was hardly contractors name inscribed on the water facilities visited.

Examples below depict this:

Okodo central borehole

Funding source DWSCG

26/11/2016

Freedom borehole

**DWSCGF** 

19/4/2016

- Osigire-obur borehole

DWSCG

0

11/1/2017

Oburin HC 11borehole

**DWSCG** 

**DWD NO:49378** 

Ojepa village borehole

DWSCG-SDLG

**DWD NO:49377** 

15/4/2016

· This poses a big question as to how a genuine contractor wouldn't to associate himself with the good work under his supervision and construction

indicating contractor name/contract, and contract sum was obtained on district notice boards. Examples are; - Name of the best evaluated bidder: Water resources and environmental consultancy Total cost: 16,130,220/= Information on tenders and Dated 21/11/2017 contract awards (indicating contractor name /contract and 2 contract sum) displayed on the - Procurement ref: District notice boards: score 2 ser596/wrks/2017-2018/00001 Subject of procurement: Protection of one spring well at okunguro-Abuket Best evaluated bidder: Neco enterprises Itd Contract sum: 19,745,000/= Date: 21/11/2017

| Participation communities WSS programme Maximum in for this performance measure | es in rammes 3 points ce w p (i | If communities apply for vater/public sanitation facilities as per the sector critical requirements including community contributions) for the current FY: score 1                         | 1 | <ul> <li>Community applications for WSS facilities were obtained at DWO as seen here under;</li> <li>Kamusala HC 11, application for a deep borehole</li> <li>Dated 15/07/2015</li> <li>Kaminit village, application for a borehole</li> <li>Dated 11/7/2017</li> <li>Ongangai-kidtok p/s, application to repair a borehole</li> <li>Dated 26/9/2017</li> <li>Aminit-otoboi village. Application for a borehole</li> <li>Dated 21/9.2017</li> <li>Omiriar p/s. Application for a borehole</li> <li>Dated 14/8/2017</li> </ul> |
|---|---------------------------------|--|---|---|
| Accommentare  | w<br>e<br>fu<br>m<br>fc         | Number of water supply facilities with WSCs that are functioning evidenced by collection of O&M unds and carrying out preventive naintenance and minor repairs, or the current FY: score 2 | 0 | No community meetings minutes were obtained at the district water office to justify WSCs that are functioning evidenced by collection of o and m funds and carry out preventive maintenance and minor repair in the current financial year. The explanation given is that minutes do exist at the community level records per borehole.   |
| Assessment area: Social and environmental safeguards                            |                                 |  |   |   |

| 13 | The LG Water department has devised strategies for environmental conservation and management |
|----|--|
|    | Maximum 4 points for this performance measure  |

- Evidence that environmental screening (as per templates) for all projects and EIAs (where required) conducted for all WSS projects and reports are in place: score 2
- No screening templates were obtained from ENR office.
- No EIA were observed in the ENR office to justify 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

0

 No evidence whatsoever, to justify that there was follow up support provided in case of unacceptable environmental concerns in the past financial year.

- Evidence that construction and supervision contracts have clause on environmental protection: score
   1
- There was evidence that construction and supervision of contracts have a clause on environmental protection.

For example all water projects have a clause that require the contractor to plant at least ten trees around the source point within a radius of 30 metres however, this could not be verified in the field since no trees were observed to have been planted around the source points for environmental protection as per the clause.

| 14 | The LG Water department has promoted gender equity in WSC composition.  Maximum 3 points for this performance measure           | • If at least 50% WSCs are women as per the sector critical requirements: score 3                          | 0 | <ul> <li>According to water and sanitation sector progress report for the financial year 2017/2018 dated 18/1/2108 pages 34-36 gender equity in WSC composition was observed. However, no single facility had at least 50% WSCs as women as per the sector critical requirements.</li> <li>Examples are;</li> <li>Madaka deep borehole women-4 men 5</li> <li>Kamusala deep borehole women 4 while men are 5</li> <li>Koromojo borehole women 4 while men are 5</li> <li>Acela-Akweny borehole women 4 while men 5. This justifies gender equity but not at 50% as a critical requirement</li> </ul> |
|----|---|--|---|--|
| 15 | Gender- and special-needs sensitive sanitation facilities in public places/RGCs.  Maximum 3 points for this performance measure | If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3 | 3 | <ul> <li>Field visits to the public sanitation facilities below meet gender and special needs in public places of Serere district local government.</li> <li>These are;</li> <li>Kamusala P/S</li> <li>Mouruatiang P/S</li> <li>Kyere HC 111</li> <li>Kyere- Ocapa water supply system public toilet</li> <li>Kyere-Ocapa town water supply and sanitation public toilet</li> </ul>  |