



Local Government Performance Assessment

Serere District

(Vote Code: 596)

Assessment	Scores
Accountability Requirements	67%
Crosscutting Performance Measures	74%
Educational Performance Measures	79%
Health Performance Measures	41%
Water Performance Measures	66%

Summary of requirements	Definition of compliance	Compliance justification	Compliant?
Annual performance contract			
<p>LG has submitted an annual performance contract of the forthcoming year by June 30 on the basis of the PFMAA and LG Budget guidelines for the coming financial year.</p>	<ul style="list-style-type: none"> • From MoFPED's inventory/schedule of LG submissions of performance contracts, check dates of submission and issuance of receipts and: <ul style="list-style-type: none"> o If LG submitted before or by due date, then state 'compliant' o If LG had not submitted or submitted later than the due date, state 'non-compliant' • From the Uganda budget website: www.budget.go.ug, check and compare recorded date therein with date of LG submission to confirm. 	<p>Serere District was Compliant with the PFMAA and LG budget submission guidelines. Performance Contracts were submitted on line (generated) on the 23rd of July by the CAO. However, the inventory/schedule of LG submissions of Performance contracts generated at the MoFPED on the 28th of August 2018 indicates that the contract was submitted on the 30th of July and approved on the 31st of July. This was still before the expiry of the deadline of 1st August 2018. Hard copies of the Performance contracts are available for review at the District Planner's office</p>	Yes
Supporting Documents for the Budget required as per the PFMA are submitted and available			

<p>LG has submitted a Budget that includes a Procurement Plan for the forthcoming FY by 30th June (LG PPDA Regulations, 2006).</p>	<ul style="list-style-type: none"> • From MoFPED's inventory of LG budget submissions, check whether: <ul style="list-style-type: none"> o The LG budget is accompanied by a Procurement Plan or not. If a LG submission includes a Procurement Plan, the LG is compliant; otherwise it is not compliant. 	<p>Serere district was compliant with the PFMAA and LG budget submission guidelines. Budget Estimates (with a procurement Plan as an appendix) were submitted on line on the 2nd of August 2018 (as per hard copy at the Planner's office) while the inventory/schedule of LG submissions of Performance contracts generated at the MoFPED on the 28th of August 2018 indicated that the budget estimates were submitted on line on the 12th of August 2018 with an attachment of a procurement Plan were approved on the 13th of August 2018.</p>	<p>Yes</p>
<p>Reporting: submission of annual and quarterly budget performance reports</p>			
<p>LG has submitted the annual performance report for the previous FY on or before 31st July (as per LG Budget Preparation Guidelines for coming FY; PFMA Act, 2015)</p>	<p>From MoFPED's official record/inventory of LG submission of annual performance report submitted to MoFPED, check the date MoFPED received the annual performance report:</p> <ul style="list-style-type: none"> • If LG submitted report to MoFPED in time, then it is compliant • If LG submitted late or did not submit, then it is not compliant 	<p>Serere district was not compliant with the LG Budget Preparation Guidelines for the coming FY as per PFMA Act, 2015). The Annual Performance Report was generated online on the 15th of August 2018 (after the expiry of the deadline of 31st July 2018). The report was forwarded by CAO to the PS/ST on the same date as evidenced by CAO's letter Ref. No. CR/213/13 a copy of which was available at the Planner's office during the time of the assessment. The MoFPED Inventory/schedule of LG submissions of reports generated at the MoFPED on the 28th of August 2018 did not reflect the submission date of the performance report of Serere district.</p>	<p>No</p>

<p>LG has submitted the quarterly budget performance report for all the four quarters of the previous FY by end of the FY; PFMA Act, 2015).</p>	<p>From MoFPED's official record/ inventory of LG submission of quarterly reports submitted to MoFPED, check the date MoFPED received the quarterly performance reports:</p> <ul style="list-style-type: none"> • If LG submitted all four reports to MoFPED of the previous FY by July 31, then it is compliant (timely submission of each quarterly report, is not an accountability requirement, but by end of the FY, all quarterly reports should be available). • If LG submitted late or did not submit at all, then it is not compliant. 	<p>Serere district was not Compliant with the requirement for submission of all quarterly reports by the 31st of July to MoFPED. Evidence provided by the District Planner indicated that the quarter 4 report was generated on the 23rd of August 2018, which was passed the submission date deadline of 31st July 2018.</p> <p>The MoFPED Inventory/schedule of LG submissions of reports generated at the MoFPED on the 28th of August 2018 did not reflect the submission date for the Quarter 4 performance report of Serere district This implied that the report was submitted later than the 28th of August.</p>	<p>No</p>
<p>Audit</p>			

<p>The LG has provided information to the PS/ST on the status of implementation of Internal Auditor General and the Auditor General's findings for the previous financial year by end of February (PFMA s. 11 2g). This statement includes actions against all findings where the Internal Auditor and the Auditor General recommended the Accounting Officer to take action in lines with applicable laws.</p>	<p>From MoFPED's Inventory/record of LG submissions of statements entitled "Actions to Address Internal Auditor General's findings",</p> <p>Check:</p> <ul style="list-style-type: none"> • If LG submitted a 'Response' (and provide details), then it is compliant • If LG did not submit a 'response', then it is non-compliant • If there is a response for all – LG is compliant • If there are partial or not all issues responded to – LG is not compliant. 	<p>The LG submitted a report on the implementation of both internal audit and auditor general's recommendations on 23/03/2018 as evidenced by the stamp of the Directorate of Internal Audit and that of the MoFPED. 5 items were identified as audit findings and were successfully retired as reported in the report submitted.</p>	<p>Yes</p>
<p>The audit opinion of LG Financial Statement (issued in January) is not adverse or disclaimer.</p>		<p>From the Auditor General's report the LG obtained an unqualified report hence it is compliant.</p>	<p>Yes</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<p>Evidence that a district/ municipality has:</p> <ul style="list-style-type: none"> • A functional Physical Planning Committee in place that considers new investments on time: score 1. 	<p>Serere district has a functional Physical Planning Committee that considers new investments on time.</p> <p>The committee was first appointed by the CAO on the 21/03/2012 as per letter from CAO to all members ref. No. CR/202/4. The committee then was constituted of heads of departments including 2 Town clerks as follows:</p> <ul style="list-style-type: none"> - District Health Officer - District Education Officer - District Education Officer - District Engineer - District Roads Supervisor - Environment Officer - 2 Town Clerks - Agricultural Officer - Water Officer - Staff Surveyor <p>The committee was re-appointed on the 23rd of September 2016 as some members had left the district on promotion (ref Letter from CAO CR/214/46).</p> <p>The committee was again re-appointed on the 6th of July 2017 including Town Clerks of 2 newly created Town Councils of Kadungulu and Kidetok. Ref .CAO's letter ref. No. CR/214/46.</p> <p>The Committee sat 3 times in the previous FY on the following dates:</p> <ul style="list-style-type: none"> - 20/09/2017 (minutes not yet typed) - 12/01/2017 (Minutes not typed) - Minutes of the 3rd meeting not traceable 	<p>1</p>

<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that district/MLG has submitted at least 4 sets of minutes of Physical Planning Committee to the MoLHUD score 1. 	<p>Serere district did not share minutes of the Physical Planning Committee meetings with the Ministry of Lands Housing and Urban Development.</p>	<p>0</p>
<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> • All infrastructure investments are consistent with the approved Physical Development Plan: score 1 or else 0 	<p>Investment plans were not appraised against any Physical Development Plan to ascertain consistency, as the district has not yet developed a Physical Development Plan due to inadequate funding.</p>	<p>0</p>

<p>All new infrastructure projects in: (i) a municipality / (ii) in a district are approved by the respective Physical Planning Committees and are consistent with the approved Physical Plans</p> <p>Maximum 4 points for this performance measure.</p>	<ul style="list-style-type: none"> Action area plan prepared for the previous FY: score 1 or else 0 	<p>No Area Action Plans were prepared during the FY due to inadequate funding to the Physical Planning Unit. However, the unit embarked on developing topographical surveys for; Opawiyeng trading centre, Iningo trading Centre, Kyere Trading Centre and Yaredi Corner Trading Centre.</p>	<p>0</p>
<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that priorities in AWP for the current FY are based on the outcomes of budget conferences: score 2. 	<p>The district Planner presented to the Assessor evidence to confirm that priorities in AWP for the current FY were based on the outcomes of budget conferences.</p> <p>- A review of the Budget Conference Report revealed that priorities of the sectors of Education, Health and Water were listed on the following pages:</p> <p>Education: Page 12; priorities included completion of the education office block, construction of 2 classroom blocks at Otirono and Ogera PS, supply of 2 seater desks.</p> <p>Health: Page 14; Construction of the general ward at Serere HC IV, construction of an Incinerator, fencing of health facilities, purchase of dental equipment, renovation of Pingire HC III maternity ward, construction of staff houses.</p> <p>Water : Page 14; Drilling of boreholes at Agonyoro 1 village, Drilling of boreholes at Ajuba Village , construction of piped water scheme at Ajuba village, extension of piped water line at Kamod rural growth area, to Bugondo HC III and Apapai HC IV.</p>	<p>2</p>

The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles

Maximum 5 points on this performance measure.

• Evidence that the capital investments in the approved Annual work plan for the current FY are derived from the approved five-year development plan. If differences appear, a justification has to be provided and evidence provided that it was approved by the Council. Score 1.

Verified evidence included a review of the 5 Year Development Plan to ascertain the capital investments that were projected in the five year plan. The capital investments for the sectors of Education, health and Water were named on the following pages of the 5 Year Development Plan:

- Education- page 392. Stated in the AWP on page 56.

- Health- Page 181. Stated in the AWP on page 53.

- Water- Page 191. Stated in the AWP on page 66&67.

The same projects are included in the current FY Work Plan on page 56 for the Education priorities, page 66 and 67 for the Water sector priorities and page 53 for the Health sector priorities.

<p>The prioritized investment activities in the approved AWP for the current FY are derived from the approved five-year development plan, are based on discussions in annual reviews and budget conferences and have project profiles</p> <p>Maximum 5 points on this performance measure.</p>	<ul style="list-style-type: none"> • Project profiles have been developed and discussed by TPC for all investments in the AWP as per LG Planning guideline: score 2. 	<p>Project Profiles were developed as part of the 5 Year Development Plan and were appended to the 5 Year Development Plan on pages 255- 845. The profiles adhere to the formats of local government planning. For each financial year, extracts of the relevant project files to the planned investments are extracted and appended to the Annual workplans and budgets.</p> <p>- The Project Profiles were discussed at the TPC sitting of the 4th of August 2017 as per minute extract 5/DTPC/07/ 2017.</p>	<p>2</p>
<p>Annual statistical abstract developed and applied</p> <p>Maximum 1 point on this performance measure</p>	<ul style="list-style-type: none"> • Annual statistical abstract, with gender-disaggregated data has been compiled and presented to the TPC to support budget allocation and decision-making- maximum score 1. 	<p>A Booklet of Statistical Abstracts (2017/18) exists in the office of the District Planner.</p> <p>The Statistical Abstracts were presented to the TPC meeting of 4/08/17 under minute extract 04/DTPC/07/2017 and were used for budget allocation.</p>	<p>1</p>

<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • 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 	<p>Evidence was provided to the Assessor to confirm 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.</p> <p>The evidence included a review of key infrastructure projects as an extract from the previous Annual Work Plan, that were compared with the projects that were presented in the annual work plan and budget (approved by Council on the 25/03/2017 as per minute extract 25/3DC/03/2017).</p> <p>The key projects verified included:</p> <p>Water and Sanitation: Construction of Water and Sanitation piped water system at Atira, deep borehole drilling and installation at Kamusala square at Oburo-Sigira (cited at page 60 of the approved AWP 2017/18).</p> <p>Health: Construction of the general surgical ward at Serere HC IV (cited at page 49 of the approved AWP 2017/18).</p> <p>Education: Construction of classrooms at Pingire, Kamodo and Kerim primary schools (cited at page 49 of the approved AWP 2017/18).</p>	<p>2</p>
<p>Investment activities in the previous FY were implemented as per AWP.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the investment projects implemented in the previous FY were completed as per work plan by end for FY. <ul style="list-style-type: none"> o 100%: score 4 o 80-99%: score 2 o Below 80%: 0 	<p>Obtained the projects monitoring report and this was matched with payments as per the draft financial statements and noted that the investment projects were completed as per work plan by the end of the financial year. All these projects had the retention fees outstanding. The projects include</p> <p>i. Non-residential buildings amounting to shs. 294,100,858 and construction of the surgical ward at Serere HCIV that was budgeted at shs.300,754,000.</p> <p>Reviewed expenditure on Non-residential buildings amounting to shs.355,401,480 and furniture and fittings of shs.15,296,000. Amount budgeted respectively were shs.237,675,000 and shs. 30,355,000</p> <p>Reviewed expenditure on other structures amounting shs.296,425,797 and furniture and fittings of shs.17,640,000. The budgeted amounts respectively were shs.353,719,000 and shs. 15,,000,000</p> <p>In all the above cases the projects were completed before the year end and had the retention monies outstanding. This puts the completion status at 95%.</p>	<p>2</p>

<p>The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that all investment projects in the previous FY were completed within approved budget – Max. 15% plus or minus of original budget: score 2 	<p>A comparison was made of the planned investment projects in the Annual work Plan and Budget with the projects reported in the Annual Budget Performance Report and the final accounts available in the CFO's office.</p> <p>Reviewed expenditure on the Non-residential buildings amounting to shs. 294,100,858 as presented in the Draft Financial Statements. Looked at the work plan as well as budget and construction of the surgical ward at Serere HCIV that was budgeted at shs.300,754,000. This represents 98% performance of the budget.</p> <p>Reviewed expenditure on Non-residential buildings amounting to shs.355,401,480 and furniture and fittings of shs.15,296,000. Amount budgeted respectively were shs.237,675,000 and shs. 30,355,000</p> <p>Reviewed expenditure on other structures amounting shs.296,425,797 and furniture and fittings of shs.17,640,000. The budgeted amounts respectively were shs.353,719,000 and shs. 15,,000,000</p> <p>All projects looked at were completed within the threshold of +-15% of the approved budget.</p>	2
<p>The LG has executed the budget for construction of investment projects and O&M for all major infrastructure projects during the previous FY</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that the LG has budgeted and spent at least 80% of the O&M budget for infrastructure in the previous FY: score 2 	<p>While some of the departments/Units did not budget for O&M, a review of the sector budgets revealed that some departments that planned for O&M spent the budgets to at least 80% and in most cases at 100% . An extract was made from the AWP 2017/18 of the budget lines for O&M across the sectors and compared with the final expenditure figures reflected in the Final Accounts by the close of the financial year. The summary performance is indicated below:</p> <ul style="list-style-type: none"> Planning Unit: Budgeted 49M and spent 49M, constituting 100% expenditure Finance Department: Budgeted 5M and spent 5M, constituting 100% expenditure Administration: Budgeted 5M and spend 5M, constituting 100% expenditure Water: Budgeted 15M and spent 15M , constituting 100% expenditure 	2
Human Resource Management			

<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that the LG has filled all HoDs positions substantively: score 3 	<p>The staff structure of the District as approved by the MoPS on 14th Sept 2017 Ref No: ARC 135/306/1. Provides for 10 HoD positions. Of the 10 departments, six are substantively filled while four are in acting positions. Detail of three of the four HoDs in acting positions are indicated below:</p> <p>Emesu Simon: Works; was appointed on promotion as a Senior Assistant Engineering officer/superintendent of works on May 5th 2015 under DSC minute No: 5/2015 (c). His currently the acting head of works. The officer was assigned duties of the District Engineer by the CAO on 20th Jan 2015 ref No: CR/161/4.</p> <p>Omal Nelson: Natural Resources; was appointed on probation as Physical planner under DSC Minute No: DSC/15/2011. On 5th/ 01/2015 he was assigned duties of Acting District Natural Resources officer by the Acting CAO. Letter Ref No: CR/161/4</p> <p>Baan Joseph; Internal Audit; the officer was given an acting appointment as a District Internal Auditor under DSC Minute No: 29/2017 (i) on 20th Nov 2017.</p> <p>The district alleged that they have not been able to fill all positions because they don't not have a wage bill.</p>	<p>0</p>
<p>LG has substantively recruited and appraised all Heads of Departments</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> Evidence that HoDs have been appraised as per guidelines issued by MoPS during the previous FY: score 2 	<p>From review of staff files for HoDs, it was found out that all the HoDs had their performance reports signed. Below is a presentation of a sample of three HoDs appraisal status:</p> <p>a) Ogiro Vincent: Production; 2017/18 performance report seen signed by CAO on 29/06/2018. File ref No: CR/D/10214</p> <p>b) Odeke Joe Engemu: Health Services; 2017/18 performance report seen signed by CAO on 3/07/2018. File ref No: CR/D/10122</p> <p>c) Omal Nelson: Natural Resources; 2017/18 performance report seen signed by CAO on 10/07/2018. File ref No: CR/D/10270. Appraisal report for 2017/18 signed by Deputy CAO on 11/7/2018 seen</p>	<p>2</p>

<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that 100 % of staff submitted for recruitment have been considered: score 2 	<p>From the review of the declaration of vacancy file (File No: DSC/156/15), 16 positions were submitted to the DSC for appointment these positions were for appointment on promotion (i.e. not new recruits).</p> <p>All these positions were considered in the DSC meetings of:</p> <ul style="list-style-type: none"> o 22nd to 23 February 2018 o 9th to 10th November 2017 o 20th September 2017 <p>Under the following minutes:</p> <ul style="list-style-type: none"> o Minute No: 3/2018 (c); Minute No: 29/2017 (n); Minute No: 29/2017 (h); Minute No: 29/2017 (r); Minute No: 29/2017 (s); No: 25/2017 (e); Minute No: 29/2017 (u); Minute No: 3/2018 (b) and Minute No: 25/2017 (g) <p>It is important to note that in 2017/18 there were no declarations for new recruits as such no new recruits were considered. All submissions were either for appointment on promotion or transfer within the service.</p>	<p>2</p>
<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that 100 % of positions submitted for confirmation have been considered: score 1 	<p>From review of the submission file for confirmation, file no DSC/159/2, 87 submission for confirmation were sent to DSC in 2017/18.</p> <p>These submission were considered in meetings of;</p> <ul style="list-style-type: none"> o 26 to 27th June 2018 o 22 to 23rd Feb 2018 o 9th to 10th Nov 2017 o 20th Sept 2017 <p>Under minute numbers:</p> <ul style="list-style-type: none"> o 9/2018 (q); 9/2018 (j); 3/2018 (f); 3/2018 (o); 4/2018; 29/2017 (i); 29/2017 (k); 29/2017(m); 29/2017 (o); and 25/2017 (g) 	<p>1</p>

<p>The LG DSC has considered all staff that have been submitted for recruitment, confirmation and disciplinary actions during the previous FY.</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • Evidence that 100 % of positions submitted for disciplinary actions have been considered: score 1 	<p>There were no cases submitted to the DSC for disciplinary action in 2017/18 as such DSC received full score on this indicator. It was reported that cases of disciplinary actions were handled in the rewards and sanctions committee.</p>	<p>1</p>
<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • 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 	<p>From the review of the staff list and the DSC minute extracts, it was found out that there no new recruits appointed in 2017/18 hence there were no new staff to enroll on the payroll.</p>	<p>3</p>

<p>Staff recruited and retiring access the salary and pension payroll respectively within two months</p> <p>Maximum 5 points on this Performance Measure.</p>	<ul style="list-style-type: none"> • 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 	<p>From the review of the pensioner's affairs book, it was found out that 6 staff were due for retirement in 2017/18. Only two (33%) of the six had accessed the payroll by the time of the assessment. Details of the six staff are indicated below:</p> <p>Okiror Maxwell 395114; due date of retirement 4/01/2018. Has not accessed – had issues with date of Birth thus file rejected at MoPS</p> <p>Ogole Anna Grace 395365; due date of retirement 7/07/2017. Has not accessed – had issues with 1st appointment (had appointment was regularized in 2003)</p> <p>Okello Alex 395155; due date of retirement 01/01/2018. Accessed in June 2018</p> <p>Okoed Ojangole JP 395285; due date of retirement 26/04/2018. Accessed in July 2018</p> <p>Olula Peter Ecalu 394835; due date of retirement 02/03/2018. Had not accessed</p> <p>Odicha Christopher 395415; due date of retirement 07/08/2017. Had not accessed</p>	<p>0</p>
<p>Revenue Mobilization</p>			
<p>The LG has increased LG own source revenues in the last financial year compared to the one before the previous financial year (last FY year but one)</p> <p>Maximum 4 points on this Performance Measure.</p>	<ul style="list-style-type: none"> •• If increase in OSR (excluding one/off, e.g. sale of assets) from previous FY but one to previous FY is more than 10 %: score 4. • If the increase is from 5% -10 %: score 2. • If the increase is less than 5 %: score 0. 	<p>Total of OSR for FY 2016/2017 was shs.268,686,544</p> <p>Total of OSR for FY 2017/2018 was shs.279,479,619</p> <p>Increase/Decrease Shs.10,793,075</p> <p>Percentage increase was 4%</p> <p>The OSR for FY 2016/17 was extracted from the final accounts for the FY 2016/17</p> <p>Reviewed the Draft financial statements for the LG for the FY2017/18 and extracted the figure of OSR as provided. This draft report is dated 28/08/2018. Looked at the FY 2016/17 for comparative figures.</p> <p>since the LG percentage increase is 4% which is below the 5% yardstick the LG scores zero</p>	<p>0</p>

<p>LG has collected local revenues as per budget (collection ratio)</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • If revenue collection ratio (the percentage of local revenue collected against planned for the previous FY (budget realisation) is within +/- 10 %: then score 2. If more than +/- 10 %: Score 0. 	<p>Total Local Revenue Planned/Budgeted for FY 2017/2018 was shs.306,488,000</p> <p>Total Local Revenue collected during FY 2017/2018 was shs.279,479,619</p> <p>Performance 91%</p> <p>The Draft financial statements for the LG for the FY2017/18 were availed but subject to audit. The details of revenue are extracted from the prepared draft financial.</p>	<p>2</p>
<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the District/Municipality has remitted the mandatory LLG share of local revenues: score 2 	<p>Local Revenue collections subjected to sharing with LLGs was shs.66,084,750 for FY 2017/18</p> <p>Amount of local revenue remitted to LLGs was shs.12,183,400</p> <p>Status of compliance: 18.4%</p> <p>The LG only remitted a percentage of 18.4% of the LST instead of shs. 42,955,088 which is the 65% mandatory requirement</p> <p>Extracted from the revenue register and the payment vouchers.</p> <p>There are 4 town councils that received the share of the revenue that included: Kasilo that received shs. 2,093,404, Kidetok that received shs.3,018,832, Kadungulu Town council that received shs. 2,025,000 and Serere town council that received shs. 5,046,164 that makes up an aggregate total of shs.12,183,400</p> <p>The District didn't remit the 65% mandatory transfers to the Local Lower Governments.</p>	<p>0</p>
<p>Local revenue administration, allocation and transparency</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the total Council expenditures on allowances and emoluments- (including from all sources) is not higher than 20% of the OSR collected in the previous FY: score 2 	<p>Total expenditure on council allowances during FY 2017/2018 Shs.46,260,000</p> <p>Percentage expenditure on allowances and emoluments is 16.5% which is below the yardstick of 20% mark for the council activities</p>	<p>2</p>
<p>Procurement and contract management</p>			

<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> 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 	<p>The District does not have a substantive senior procurement officer. The Principal Assistant Secretary was assigned roles of caretaking as the head of unit. The letter of assignment of duties was issued by the CAO on 13th November 2018 (letter ref no. CR/156/7).</p>	<p>0</p>
<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> Evidence that the TEC produced and submitted reports to the Contracts Committee for the previous FY: score 1 	<p>TEC produced and submitted reports to the Contracts Committee.</p> <p>For example Technical evaluation Committee meeting was held 19/October /2017 (Ref; Sere 596/Wrks/17-18/00001: Low Cost sealing of Kamod-Kasilo RD, 1.2km</p> <p>Produced report (19 /October / 2017) submitted to contracts committee. The report</p> <p>recommended Pehan, Construction Limited for the award of the contract at a bid price of UGX 312,602,238.</p> <p>Technical evaluation Committee meeting was held 19/October /2017 (Ref; Sere 596/Wrks/17-18/00002) Drilling, pump testing, casting and installation of 8 boreholes and 1 solar powered borehole. Produced report (19 /October / 2017) submitted to contracts committee. The report</p> <p>Recommended Icon projects LTD be awarded a contract at UGX 147,620, 096.</p>	<p>1</p>

<p>The LG has in place the capacity to manage the procurement function</p> <p>Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the Contracts Committee considered recommendations of the TEC and provide justifications for any deviations from those recommendations: score 1 	<p>Contracts Committee considered recommendations of the TEC. For example -Report of the contracts committee seating on 30/November/2017, minute no 103/CC/011/2017 as per TEC recommendation, Contracts committee looked at the evaluation report and considered its recommendation of awarding contract to Pehan, Construction Limited for the award of the contract at a bid price of UGX 312,602,238.</p> <p>-Report of the contracts committee seating on 30/November/2017, minute no 102/CC/011/2017 as per TEC recommendation, Contracts committee looked at the evaluation report and considered its recommendation of awarding contract to Icon projects LTD be awarded a contract at UGX 147,620, 096.</p>	<p>1</p>
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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

The procurement and Disposal Plan for 2018/2019 year covers all infrastructure projects in the approved annual work plan and budget. For example -Completion of Education office block at UGX 120 Million

-Phased construction of general ward in Serere HCIV, Phase 3 at UGX 350 Million.

- Drilling of big bore holes in selected villages at UGX 150 Million.

- Rehabilitation of 5 boreholes UGX 40 Million.

- Low cost sealing Kamod-Kasilo Road) at UGX 350 Million).

In FY 2017/2018 procurements were done as per plan in accordance with the procurement plan).

- Low Cost sealing of Kamod-Kasilo RD, 1.2km(Ref; Sere 596/Wrks/17-18/00001) at UGX 312,602,238.

- Drilling, pump testing, casting and installation of 8 boreholes and 1 solar powered borehole. (Ref; Sere 596/Wrks/17-18/00002)at UGX 147,620, 096.

-Extension of finance block (Ref; Sere 596/Wrks/17-18/00008)at UGX 49,905,738.

-Construction of 2 classroom blocks at Pingire Primary School (Ref; Sere 596/Wrks/17-18/00005) at UGX 49,553,510.

-Construction and fencing of A slaughter slab at Adoku Trading Centre, Pingire Sub County (Ref; Sere 596/Wrks/17-18/00025) at UGX 10, 453,915.

-Completion of a 3 class room block in Toror P/S (Ref; Sere 596/Wrks/17-18/00028) at UGX 11, 492,138

<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • For current FY, evidence that the LG has prepared 80% of the bid documents for all investment/ infrastructure by August 30: score 2 	<p>For FY 2018/2019, By August 30 2018, all bid documents for all investment/infrastructure were prepared above 80%. These include</p> <p>Completion of Education office block at UGX 120 Million</p> <ul style="list-style-type: none"> -Phased construction of general ward in Serere HCIV , Phase 3 at UGX 350 Million. - Drilling of big bore holes in selected villages at UGX 150 Million. - Rehabilitation of 5 boreholes UGX 40 Million. - Low cost sealing Kamod-Kasilo Road) at UGX 350 Million). 	<p>2</p>
<p>The LG has prepared bid documents, maintained contract registers and procurement activities files and adheres with established thresholds.</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • For Previous FY, evidence that the LG has an updated contract register and has complete procurement activity files for all procurements: score 2 	<p>For FY 2017/2018, contract register fully updated (2017-2018).</p> <p>Contracts Register FY 2017/2018 is fully updated such as</p> <ul style="list-style-type: none"> - Low Cost sealing of Kamod-Kasilo RD, 1.2km(Ref; Sere 596/Wrks/17-18/00001) at UGX 312,602,238. - Drilling, pump testing, casting and installation of 8 boreholes and 1 solar powered borehole. (Ref; Sere 596/Wrks/17-18/00002)at UGX 147,620, 096. -Extension of finance block (Ref; Sere 596/Wrks/17-18/00008)at UGX 49,905,738. -Construction of 2 classroom blocks at Pingire Primary School (Ref; Sere 596/Wrks/17-18/00005) at UGX 49,553,510. Completion of a 3 class room block in Toror P/S (Ref; Sere 596/Wrks/17-18/00028) at UGX 11, 492,138 -Construction and fencing of A slaughter slab at Adoku Trading Centre, Pingire Sub County (Ref; Sere 596/Wrks/17-18/00025) UGX 10, 453,915 	<p>2</p>

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

Maximum 6 points on this performance measure.

• For previous FY, evidence that the LG has adhered with procurement thresholds (sample 5 projects):
score 2.

For FY 2017/2018, procurement thresholds were well adhered to. Example of sampled projects

- Low Cost sealing of Kamod-Kasilo RD, 1.2km(Ref; Sere 596/Wrks/17-18/00001) at UGX 312,602,238. (Open domestic bidding in New Vision, Thursday September 6th 2017).

-Drilling, pump testing, casting and installation of 8 boreholes and 1 solar powered borehole. (Ref; Sere 596/Wrks/17-18/00002)at UGX 147,620, 096. (Open domestic bidding in New Vision, Thursday September 6th 2017).

-Extension of finance block (Ref; Sere 596/Wrks/17-18/00008)at UGX 49,905,738.

510 (Selective bidding invitation letter dated 6th /9/2017)

-Construction of 2 classroom block at Pingire Primary School (Ref; Sere 596/Wrks/17-18/00005) at UGX 49,553,510 (Selective bidding invitation letter dated 6th /9/2017)

-Completion of a 3 class room block in Toror P/S (Ref; Sere 596/Wrks/17-18/00028) at UGX 11, 492,138 (Selective bidding invitation letter dated 6/9/2017).

-Construction and fencing of A slaughter slab at Adoku Trading Centre, Pingire Sub County (Ref; Sere 596/Wrks/17-18/00025) UGX 10, 453,915 (Selective bidding invitation letter dated 6/9/2017).

<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> Evidence that all works projects implemented in the previous FY were appropriately certified – interim and completion certificates <p>for all projects based on technical supervision: score 2</p>	<p>Projects implemented in the FY 2017/18 were appropriately certified with interim and completion certificates as per technical supervision. For example Completion certificates</p> <ul style="list-style-type: none"> - Low Cost sealing of Kamod-Kasilo RD, 1.2km(Ref; Sere 596/Wrks/17-18/00001) Interim payment certificate dated 17th January 2018. -Drilling, pump testing, casting and installation of 8 boreholes and 1 solar powered borehole. (Ref; Sere 596/Wrks/17-18/00002) completion certificate dated 23/08/2018 -Extension of finance block (Ref; Sere 596/Wrks/17-18/00008) Interim payment certificate dated 5th September 2018. -Construction of 2 classroom blocks at Pingire Primary School (Ref; Sere 596/Wrks/17-18/00005) Interim payment certificate dated 28th February 2018. -Completion of a 3 class room block in Toror P/S (Ref; Sere 596/Wrks/17-18/00028) Completion payment certificate dated 11th April 2018. -Construction and fencing of A slaughter slab at Adoku Trading Centre, Pingire Sub County (Ref; Sere 596/Wrks/17-18/00025) Interim payment certificate dated 15th May 2018. 	<p>2</p>
<p>The LG has certified and provided detailed project information on all investments</p> <p>Maximum 4 points on this performance measure</p>	<ul style="list-style-type: none"> 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 	<p>The FY 2018/2019 project site boards for all projects are not yet erected available but even the one that is erected Construction of finance block is not clearly labelled. It misses information on contract value and expected duration.</p>	<p>0</p>
<p>Financial management</p>			

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

Month	Status	Date
August 2017	Done	31/08/2018
October 2017	Done	31/10/2018
December 2017	Done	31/12/2018
March 2018	Done	31/03/2018
May 2018	Done	31/05/2018
June 2018	Done	30/01/2018

Reviewed the bank reconciliations and established that they were performed on the closing date for the month.

<p>The LG made timely payment of suppliers during the previous FY</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • 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. 	<p>Reviewed payment vouchers together with the requests for payment and established that the LG makes timely payment of suppliers and there were no overdue bills. Vouchers looked at are detailed below:</p> <p>VR 9/10 dated 20/10/17 for payment of PLE exercise from LG as top-up amounting to shs.2,000,000. Requisition registered on 04/10//2017. Verified on 20/10/2017 passed for payment on 20/10/2017</p> <p>VR 8/10 for payment of PLE Administration. Request submitted on 3/10/2017 by District Inspector of Schools, passed by the vote controller on 3/10/2017, approved for payment on 11/10/2017 (CFO) and authorised on 11/10/2017(CAO). Recommended by DEO on 10/11/2017</p> <p>VR 7/10 dated 20/10/2017 for facilitation of school inspection. Request submitted by DIS 03/10/2017, passed by vote controller on 3/10/2017, approved by CFO on 4/10/2012 and authorised by CAO on 04/10/2017 and was paid on 20/10/2017.</p> <p>VR 3/10 dated 4/10/2017 w.r.t retention for construction of classroom block at Aswii P/S . Request prepared by 7/09/2017 and recommended by DEO on 03/10/2017 . Payment was done on 04/10/2017</p> <p>VR 5/9 dated 13/09/2017 for construction of 2 classroom block at Owiri PS paid on 13/09/2017 DEO recommended for payment on 05/07/2017</p> <p>VR 5/8 to follow up of certified old villages was paid on 10/08/2017 DHO approved on 04/09/2018</p> <p>VR 07/04 dated 17/04/2018 for service of vehicle. Invoice was received on 12/04/2018 and request was submitted by the District Water Office on 12/04/2018 and was passed by the vote controller on 7/04/2018 and paid on 17/04/2018</p> <p>VR 02/01 dated 05/01/2018 for feasibility study and design of the Intake works for Garama landing site piped water supply was paid on 05/01/2018 request submitted on 04/12/2017</p> <p>The LG timely made payment of suppliers.</p>	<p>2</p>
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<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • Evidence that the LG has a substantive Senior Internal Auditor: 1 point. • LG has produced all quarterly internal audit reports for the previous FY: score 2. 	<p>Appointment of Mr. Baan Joseph as the Internal Auditor was seen done by the CAO Mr. Mbooge Isa on 20/11/2018 as per reference CR/165/2. Acceptance of appointment seen dated 24/11/2018.</p>	<p>1</p>															
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> • LG has produced all quarterly internal audit reports for the previous FY: score 2. 	<table border="1"> <thead> <tr> <th>Quarter</th> <th>Date of report</th> <th>Reference</th> </tr> </thead> <tbody> <tr> <td>Quarter 1</td> <td>21/11/2017</td> <td>No reference</td> </tr> <tr> <td>Quarter 2</td> <td>27/02/2018</td> <td>No reference</td> </tr> <tr> <td>Quarter 3</td> <td>11/05/2018</td> <td>No reference</td> </tr> <tr> <td>Quarter 4</td> <td>31/08/2018</td> <td>No reference</td> </tr> </tbody> </table> <p>1st quarter report was prepared on 21/11/2018 and received by the Central Registry on 24/11/2018. 8 items were identified</p> <p>2nd quarter report was prepared on 27/02/2018 and received at MoFPED ON 23/03/2018. Education had 5 items pointed out</p> <p>3rd quarter report was prepared on 11/05/2018</p> <p>The internal audit report for the 4th quarter was prepared on 31/08/2018</p>	Quarter	Date of report	Reference	Quarter 1	21/11/2017	No reference	Quarter 2	27/02/2018	No reference	Quarter 3	11/05/2018	No reference	Quarter 4	31/08/2018	No reference	<p>2</p>
Quarter	Date of report	Reference																
Quarter 1	21/11/2017	No reference																
Quarter 2	27/02/2018	No reference																
Quarter 3	11/05/2018	No reference																
Quarter 4	31/08/2018	No reference																

<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<p>Evidence that the LG has provided information to the Council and LG PAC on the status of implementation of internal audit findings for the previous financial year i.e. follow up on audit queries from all quarterly audit reports: score 2.</p>	<p>Seen a communication from CAO dated 8/02/2018 to the NUSAF Desk Officer referenced CR/210/5 on the status of implementation of the audit findings.</p> <p>There is evidence that internal audit reports were submitted to LG Accounting officer, LG PAC and LG PAC reviewed them. For instance, the report of Serere District Public Accounts Committee for the 2nd quarter as per deliberations held on 13th and 14th December 2017 was presented to the LG Council and the minister responsible for Local Government on 16/01/2018 and received on 24/01//2018 and 25 Jan 2018 respectively. Reviews were done and recommendations made and follow ups were done.</p> <p>The report LG PAC report for the 3rd quarter was prepared on 09/04/2018 submitted to council on 10/04/2018 and office of the minister of LG on 11/04/2018 was discussed on 20th and 21 March 2018. Reviews were made and recommendations made for follow up action.</p>	<p>2</p>
<p>The LG executes the Internal Audit function in accordance with the LGA section 90 and LG procurement regulations</p> <p>Maximum 6 points on this performance measure.</p>	<ul style="list-style-type: none"> 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. 	<p>There is evidence that internal audit reports were submitted to LG Accounting officer, LG PAC and LG PAC reviewed them. For instance, the report of Serere District Public Accounts Committee for the 2nd quarter as per deliberations held on 13th and 14th December 2017 was presented to the LG Council and the minister responsible for Local Government on 16/01/2018 and received on 24/01//2018 and 25 Jan 2018 respectively. Reviews were done and recommendations made and follow ups were done.</p> <p>The report LG PAC report for the 3rd quarter was prepared on 09/04/2018 submitted to council on 10/04/2018 and office of the minister of LG on 11/04/2018 was discussed on 20th and 21 March 2018. Reviews were made and recommendations made for follow up action.</p>	<p>1</p>

<p>The LG maintains a detailed and updated assets register Maximum 4 points on this performance measure.</p>	<ul style="list-style-type: none"> • 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 	<p>Reviewed the assets register and noted the following:</p> <ul style="list-style-type: none"> • Whereas the assets are register in accordance with asset type and allocation and description provided many of the assets carry no value. • Date of purchase is not indicated • Depreciation and net book value are not stated. • Land and buildings and other landed properties are not recorded in the assets register <p>The assets register is thus not adequately updated.</p>	0
<p>The LG has obtained an unqualified or qualified Audit opinion Maximum 4 points on this performance measure</p>	<p>Quality of Annual financial statement from previous FY:</p> <ul style="list-style-type: none"> • Unqualified audit opinion: score 4 • Qualified: score 2 • Adverse/disclaimer: score 0 	<p>The LG obtained an unqualified opinion for the FY 2017/18</p>	4
<p>Governance, oversight, transparency and accountability</p>			

<p>The LG Council meets and discusses service delivery related issues</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • 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 	<p>Serere Local Government council met and discussed service delivery issues. The council met 5 times during the previous FY and discussed service delivery issues as follows:</p> <p>Meeting of 26th September 2017. Service delivery issues discussed as per minute extract no. 0/09/2017 included; regulating number of staff that go for upgrading, assessment of pupil's ability to join primary schools to ensure good performance at PLE (Ref. Minute Ext. no.07/1DC/09/2017). Health Issues discussed included a recommendation that CAO should formally write to MoH requesting for -the accreditation of Serere HC IV and Apapai HC IV to offer hepatitis B treatment (Ref. Minute Extract No. 07/1 DC/09/2017.</p> <p>Meeting of the 21st December 2017. Education Issues discussed included the need to register all private primary schools in the district, while health issues included the need to ban the sale of food supplements in the district and the need to register all traditional herbalists in the district, as per minute extract 15/2DC/12/2017. No water related issues were discussed at this particular meeting.</p> <p>Meeting of 28/03/2018. Mainly focused on the need to constitute a team led by the RDC to monitor primary schools in the district and verify whether they are properly constituted. Need to ensure that salaries for primary school teas are paid in time (Minute Extract 22/3DC/03/2018). Health issues discussed included the issue of the need to transfer some of the health workers at Apapai HC IV who had become complacent having worked at the facility for a number of years and were undermining efforts of the medical officer.</p> <p>Meeting of the 30th May 2018. Issues discussed included the need to re-verify that schools that had been closed to ascertain whether they had met the requirements set by government so that they could be re-opened. Health issues discussed included the issue of the need to transfer some of the health workers at Apapai HC IV who had become complacent having worked at the facility for a number of years and were undermining efforts of the medical officer.</p>
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<p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> • Evidence that LG has designated a person to coordinate response to feed-back (grievance /complaints) and responded to feedback and complaints: score 1. 	<p>Evidence was provided to the Assessor by the Principal Administrative Secretary (PAS) to confirm that the LG designated a person to coordinate responses and feedback (grievances and complaints from communities) and that the LG has a specified system of recording , investigating and responding to grievances.</p> <p>- The evidence included a formal appointment from the CAO to the PAS assigning him additional responsibilities to record coordinate and ensure response to grievances and complaints from the citizenry. A copy of the appointment letter was seen by the Assessor dated 3/07/ 2017, Ref. No. CR/161/4.</p> <p>The CAO communicated to the DEC members about the appointment and a file for Grievances and Complaints (seen at the office of the PAS) was opened.</p> <p>- PAS receives the complaints (written) and directs them to the appropriate officers to handle and provide formal (documented) feedback to the complaining parties(s).</p> <p>- Issues that require disciplinary action are forwarded to the Rewards and Sanctions Committee for appropriate action (File of minutes and other correspondences was available the office of the PAS).</p>	<p>1</p>
<p>The LG has responded to the feedback/ complaints provided by citizens</p> <p>Maximum 2 points on this Performance Measure</p>	<ul style="list-style-type: none"> • The LG has specified a system for recording, investigating and responding to grievances, which should be displayed at LG offices and made publically available: score 1 	<p>PAS receives the complaints (written) and directs them to the appropriate officers to handle and provide formal (documented) feedback to the complaining parties(s). There a fully fledged file for <i>Complaints and Grievances from Citizens</i> available in the office of the PAS where all complaints are registered.</p> <p>- Issues that require disciplinary action are forwarded to the Rewards and Sanctions Committee for appropriate action (File of minutes and other correspondences was available the office of the PAS).</p>	<p>1</p>

<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<p>Evidence that the LG has published:</p> <ul style="list-style-type: none"> • The LG Payroll and Pensioner Schedule on public notice boards and other means: score 2 	<p>There was evidence to confirm that the LG share information with the citizens as exhibited by a display of the August Payroll register on public notice boards particularly at administration notice board and the HRM notice boards.</p>	<p>2</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> • Evidence that the procurement plan and awarded contracts and amounts are published: score 1. 	<p>There was evidence to confirm that information about the awarded contracts and amounts were published (copies of the successful bidder notices were displayed at public notice boards at the Procurement office and the administration block), however, the procurement plan was not displayed but copies were available in the procurement office for review.</p> <p>The Best Evaluated Bidder notices contain information including ; date of the bidder notices, subject of procurement, name of the provider and total contract price.</p>	<p>1</p>
<p>The LG shares information with citizens (Transparency)</p> <p>Total maximum 4 points on this Performance Measure</p>	<ul style="list-style-type: none"> • 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. 	<p>Evidence was provided to the Assessor to confirm that assessment results and implications were disseminated to the district leadership heads of departments and the lower level local governments.</p> <p>Verified evidence included minutes of the TPC meeting held on the 9th October 2017 that indicated that the performance assessment results were discussed as per minute no 11/10/TPC/2017.</p> <p>Minutes of the Council meeting that sat on 30/05/18, discussed performance assessment results as per minute no. 35/5DC/05/ 2018.</p> <p>The District Planner also shared extracts of the synthesis report of the national assessment results with the Lower Local Governments through an email with an attachment of highlights of the results. The email was sent on 14th May, 2018. During the meeting with Senior management performance assessment results were discussed as per Min. 05/05/SMM/2018.</p>	<p>1</p>

<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the HLG have communicated and explained guidelines, circulars and policies issued by the national level to LLGs during previous FY: score 1 	<p>Evidence was provided by the District Planner to confirm that the HLG communicated and explained guidelines, circulars and policies issued by the national level to lower local governments.</p> <p>The evidence included:</p> <p>DDEG guidelines discussed at the TPC that sat on 11/10/2017 as per minute extract no. 11/10/TPC/2017. TPC members were given copies of the guidelines during the TPC meeting that sat on 9th October 2017.</p> <p>DDEG guidelines were discussed at the Council meeting that sat on the 11/10/2018 as per minute extract no. 35/4DC/05/2018.</p> <p>The First Budget Call Circular calls was discussed on 9th October 2017 the while second BCC was discussed at TPC. meetings held on 12th February 2018</p>	<p>1</p>
<p>The LGs communicates guidelines, circulars and policies to LLGs to provide feedback to the citizens</p> <p>Maximum 2 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that LG during the previous FY conducted discussions (e.g. municipal urban fora, barazas, radio programmes etc.) with the public to provide feed-back on status of activity implementation: score 1. 	<p>While evidence was adduced in form of minutes of partners meeting that was held at the council Chambers on the 11th June 2018 (Minute 41/06/TPC/2018) to among other issues discuss the progress of project implementation of activities, there was no other evidence adduced to confirm that the general public was provided with feedback on the status of activity implementation.</p>	<p>0</p>
<p>Social and environmental safeguards</p>			

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 and CDO have provided guidance and support to sector departments to mainstream gender, vulnerability and inclusion into their activities score 2.

Guidance has been provided by gender focal point person to departments regarding how to mainstream gender. For example

-Report (Ref Date: 21, May, 2018) MENTORING STAFF ON GBV FOR ALL HEADS OF DEPARTMENTS GENDER MAIN STREAMING IN PLANNING PROCESS. Held at District Council Hall Serere,

-The training covered (Practical steps in gender main streaming, cross cutting issues such as HIV/AIDS).

-Training of the Youth, women, Elderly at PWDs on 11/may/2018 Held at District Council hall, Serere

-Sensitization on Gender Rest Issues through a meeting held 30/May 2018 at CAOs Office in senior management briefing.

-Dissemination of Information on Gender and other policies (dated 12/June/2018)

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

Maximum 4 points on this performance measure.

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

and social inclusions and that more than 90 % of previous year's budget for gender activities/ vulnerability/ social inclusion has been implement-ted: score 2.

In FY 2018/19 Gender focal point person and CDO have planned activities (work plan) Vote:596 Serere District).

These include

-Gender Main streaming

- children and youth services,

-community based services and

-support to disabled and elderly, representation on Women councils.

-probation and welfare support

-operation of community based services Department.

-Adult Literacy

In FY 2017/18 over 90% of the planned activities on gender activities/vulnerability/social inclusion well implemented e.g 100% achievement was registered as was planned (Annual report dated 26 June 2017, Activity Report dated 8, May, 2017-Sensitization on Gender, Activity Report on training of Women, youth, elderly and PWDs dated 18th April, 2017, panning meeting for PWDs on 16/June/ 2017 Minutes reviews) Departments were helped on how to use data for planning, mentoring of departments on gender main streaming, facilitating youth council meetings, supporting people with disabilities, dissemination of gender aggregated data, conducting radio talk shows.

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that environmental screening or EIA where appropriate, are carried out for activities, projects and plans and mitigation measures are planned and budgeted for: score 1 	<p>Environmental screening and EIA are carried out for activities and projects are planned and budgeted for in respective BOQs for specific projects in each department depending on the department e.g</p> <ul style="list-style-type: none"> -Construction of 2 classroom block at Kamod P/S -Rehabilitation of Community access road at Oblue PAG to Kamusala to Pokor B, -Periodic maintenance of Apapai Apunoi Rd -Maintenance of Agule-Akocho landing site access road. -Low Cost sealing of Kamod-Kasilo RD, 1.2km -Drilling, pump testing, casting and installation of 8 boreholes and 1 solar powered borehole. -Extension of finance block -Construction of 2 classroom blocks at Pingire Primary School -Completion of a 3 class room block in Toror P/S - Construction and fencing of A slaughter slab at Adoku Trading Centre, Pingire Sub County 	<p>1</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG integrates environmental and social management and health and safety plans in the contract bid documents: score 1 	<p>Environmental and social management and health and safety plans are integrated and appended on the bid documents are contracts agreements for example: for example bid documents.</p> <ul style="list-style-type: none"> -Phased construction of general ward in Serere HCIV , Phase 3 - Drilling of big bore holes in selected villages - Rehabilitation of 5 boreholes - Low cost sealing Kamod-Kasilo Road) 	<p>1</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all projects are implemented on land where the LG has proof of ownership (e.g. a land title, agreement etc.): score 1 	<p>All projects are implemented on land where the LG has proof of ownership. For example</p> <ul style="list-style-type: none"> - Extension of finance block (Ref; Sere 596/Wrks/17-18/00008) at Block 8, Plot 496 at KIKOTA SERERE CENTRAL CELLS and Block 8, Plot 450 at KAMUROJO CENTRAL -Drilling of bore holes was done on Private land and agreements were made and were available and MOUs. The agreements are witnessed witnessed by community members 	<p>1</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that all completed projects have Environmental and Social Mitigation Certification Form completed and signed by Environmental Officer and CDO: score 1 	<p>All completed projects have Environmental and Social Mitigation Certification. For example</p> <ul style="list-style-type: none"> -Low Cost sealing of Kamod-Kasilo RD, 1.2km -Drilling, pump testing, casting and installation of 8 boreholes and 1 solar powered borehole. -Extension of finance block -Construction of 2 classroom blocks at Pingire Primary School -Completion of a 3 class room block in Toror P/S - Construction and fencing of A slaughter slab at Adoku Trading Centre, Pingire Sub County <p>Mitigation Certification Forms completed and signed by Environmental Officer and CDO and they stamped.</p>	<p>1</p>

<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the contract payment certificated includes prior environmental and social clearance (new one): Score 1 	<p>The contract payment certificated includes prior environmental and social clearance. Clearance is done after inspection of contracts committee and based on the report of this committee.</p> <p>e.g</p> <ul style="list-style-type: none"> - Low Cost sealing of Kamod-Kasilo RD, 1.2km(Ref; Sere 596/Wrks/17-18/00001) -Drilling, pump testing, casting and installation of 8 boreholes and 1 solar powered borehole. -Extension of finance block. -Construction of 2 classroom blocks at Pingire Primary School -Completion of a 3 class room block in Toror P/S - Construction and fencing of A slaughter slab at Adoku Trading Centre, Pingire Sub County 	<p>1</p>
<p>LG has established and maintains a functional system and staff for environmental and social impact assessment and land acquisition</p> <p>Maximum 6 points on this performance measure</p>	<ul style="list-style-type: none"> • Evidence that environmental officer and CDO monthly report, includes a) completed checklists, b) deviations observed with pictures, c) corrective actions taken. Score: 1 	<p>Reports were prepared though by only environmental officer. No reports were prepared by both environmental officer and CDO together. No evidence in terms of monthly reports prepared by both officers (Environmental and CDO) were found at the time of assessment at Serere District.</p>	<p>0</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			
<p>The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has budgeted for a Head Teacher and minimum of 7 teachers per school (or minimum a teacher per class for schools with less than P.7) for the current FY: score 4 	<p>The LG Education department of Serere District Performance Contract FY 2018/2019 dated 23/7/18 (Vote: 596) indicates budgeting for head teachers and teachers. Also a list of 97 primary schools, a list of 1,138 teachers including Head teachers, staff list by school show at least the seven teachers (ref: List of teachers as per performance contract 2018/19 dated 23/7/18)</p>	4
<p>The LG education department has budgeted and deployed teachers as per guidelines (a Head Teacher and minimum of 7 teachers per school)</p> <p>Maximum 8 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG has deployed a Head Teacher and minimum of 7 teachers per school (or minimum of a teacher per class for schools with less than P.7) for the current FY: score 4 	<p>As per teachers list, deployment is done accordingly ascertained with H/R payroll. For example:</p> <ul style="list-style-type: none"> -Adoku P/S has a head teacher and 10 classroom teachers. -Kateta Model P/S has 13 teachers including the head teacher. -Kidetok P/S has 17 teachers including the head teacher. -Ogangai Kidetok P/S has 14 teachers including the head teacher. -Serere Town ship P/S has 14 teachers including the head teacher 	4

<p>LG has substantively recruited all primary school teachers where there is a wage bill provision</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has filled the structure for primary teachers with a wage bill provision <ul style="list-style-type: none"> o If 100%: score 6 o If 80 - 99%: score 3 o If below 80%: score 0 	<p>According to Serere District approved structure as per DEO's proposed work plan to the H/R dated 30/5/18 structure for primary teachers is filled with a wage bill provision. The wage bill provision is for 1,143 teachers.</p> <p>Teachers proposed by office of the DEO was 1,143, the wage bill provision is 1,143, placements filled is 1,138 which is 99.6 %</p> <p>The Education department has already submitted request for filling the gap, ref; letter dated 20/8/18.</p>	6
<p>LG has substantively recruited all positions of school inspectors as per staff structure, where there is a wage bill provision.</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> • 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 	<p>Serere District approved structure (Approved establishment of the district, as per the performance contract dated 30/5/18 for 2018/19, it is 2 slots of inspectors of schools and they are filled as per the payroll from the HRM.</p>	6
<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> • Primary Teachers: score 2 	<p>The DEO has submitted a recruitment plan to HRM for the FY 2018/2019 on 9/5/18 Education Department of Primary Teachers positions to be filled to the tune of 1,238 of them.</p>	2

<p>The LG Education department has submitted a recruitment plan covering primary teachers and school inspectors to HRM for the current FY.</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the LG Education department has submitted a recruitment plan to HRM for the current FY to fill positions of</p> <ul style="list-style-type: none"> • School Inspectors: score 2 	<p>The DEO has submitted a recruitment plan to HRM for the FY 2018/2019 on 9/5/18 Education Department proposed Positions of school inspectors to be filled are 2 and they are filled.</p>	<p>2</p>
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Monitoring and Inspection

<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> • 100% school inspectors: score 3 	<p>The District has a District Inspector of schools and two inspectors; all of them were appraised as indicated below:</p> <p>Olupot Samuel: Appraised by the DEO on 29th June 2018 for the period 2017/18. File No. CR/D/10269</p> <p>Omoding Francis: Appraised by the DEO on 29th June 2018 for the period 2017/18. File No. CR/D/10480</p> <p>Icumar Annet: Appraised by the DEO on 29th June 2018 for the period 2017/18. File No. CR/D/10559</p>	<p>3</p>
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<p>The LG Education department has conducted performance appraisal for school inspectors and ensured that performance appraisal for all primary school head teachers is conducted during the previous FY.</p> <p>Maximum 6 for this performance measure</p>	<p>Evidence that the LG Education department has ensured that all head teachers are appraised and has appraised all school inspectors during the previous FY</p> <ul style="list-style-type: none"> • Primary school head teachers o 90 - 100%: score 3 o 70% and 89%: score 2 o Below 70%: score 0 	<p>Review of randomly sampled 10 files from among the 107 head teacher’s appraisal files in the district revealed that all the sampled head teachers had been appraised in the calendar year 2017. Details of 5 of ten sampled head teacher’s files are indicated below:</p> <p>Ayupo Florence: Oburin PS; performance report of 2017 signed on 15/12/2017.</p> <p>Eitu A Belinda: Bugondo PS; performance report of 2017 signed on 16/11/2017.</p> <p>Emeju John Michael: Alos PS; performance report of 2017 signed on 21/11/2017.</p> <p>Odongo Gideon: Sapir PS; performance report of 2017 signed on 01/12/2017.</p> <p>Oryema Joseph: Kamusala PS; performance report of 2017 signed on 21/11/2017.</p>	<p>3</p>
<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • 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 	<p>All guidelines, policies, circulars issued by the national level in the FY 2017/2018 were communicated to schools. For example on 4/01/18 there was general meeting with head teachers and communication was given regarding policies issued, ref; min 3B/1/2018 and Min; 5/1/2018 for way forward improvement of education for the learners. Also 19/9/2017 meeting discussed guidelines and circulars on inspection and inspection tools, Min; 4/2017.</p>	<p>1</p>

<p>The LG Education Department has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to schools</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Education department has held meetings with primary school head teachers and among others explained and sensitised on the guidelines, policies, circulars issued by the national level: score 2 	<p>A number of meetings were held with head teachers of primary schools on different dates ,refer to minutes below, ref; min 3B/1/2018 and min5/1/2018 for way forward improvement of education for the learners. Also 19/9/2017 meeting discussed guidelines and circulars on inspection and inspection tools, min; 4/2017.</p>	<p>2</p>
<p>The LG Education Department has effectively inspected all registered primary schools2</p> <p>Maximum 12 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that all licenced or registered schools have been inspected at least once per term and reports produced: <ul style="list-style-type: none"> 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. 	<p>In FY 2017/18, inspections were done and reports were produced.</p> <p>All the schools were inspected accordingly. Out of 97 primary schools at least each school was inspected once per term (100%) were visited as per E-inspection reports dated 15/12/17,4/8/18, and 31/7/18 for different terms and the sampled schools.</p> <p>-Adoku P/S was visited at least five times on 24/2/18, 20/4/18, 30/5/18, 30/7/18 and 23/11/18</p> <p>-Kateta Model Primary school was inspected at least once on the 24/7/18 as per inspection feedback.</p> <p>-Kidetok P/S was inspected at least three times 6/11/17,19/4/18, and 23/7/18 as per feedback reports filled by inspectors.</p> <p>-Ogangai Kidetok P/S was inspected at least four times as per feedback reports by inspectors on 27/10/17, 11/4/18, 25/4/18, and 23/7/18.</p> <p>-Serere Township P/S WAS INSPECTED at least five times as on 8/11/17, 16/4/18, 24/4/18, 11/6/18, and 30/7/18.</p>	<p>12</p>

<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • 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 	<p>The education department has discussed school inspection reports and used reports to make recommendations.</p> <p>For example Minutes of inspection reports 9/01/18 and 8/5/18 meetings on Inspection. Recommendations of sharing inspection reports with all stakeholders such as SMCs, teachers, CCTs, PTA and sub county chiefs. Also ensure quality planning by teachers, performance improvement among others.</p> <p>It was also recommended that H/Ts carry out in house supervision and file reports.</p> <p>H/Ts have filed reports such as Sambwa P/S on 24/8/18.</p> <p>Abuket P/S filled theirs on 4/5/18 and Kidetok Town Council filled on 23/8/18 as means of following up recommendations. committee</p>	<p>4</p>
<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • 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 	<p>Serere Education department submitted school inspection reports to the Directorate of Education Standards (DES) in the Ministry of Education and Sports through E- inspection as received by the DES on 10/4/18, 10/4/18, and 9/8/18.</p>	<p>2</p>

<p>LG Education department has discussed the results/ reports of school inspections, used them to make recommendations for corrective actions and followed recommendations</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the inspection recommendations are followed- up: score 4. 	<p>Inspection recommendations are followed-up. For example:</p> <p>-Meeting with head teachers dated 8/8/18 attendance of learners and teachers, school record keeping, D/HTs to be the ones responsible for supervision, up dated records for publicity.</p> <p>Meeting dated 9/9/17 where they were reminded of actions to be taken on use of inspection tool, and ensuring working with the stake holders, making sure circulars as issued by MOES are followed. Min; 5/1/2018, Min; 2/8/18 and Min; 4/9/2017.</p>	<p>4</p>
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data: <ul style="list-style-type: none"> o List of schools which are consistent with both EMIS reports and PBS: score 5 	<p>Data submitted was accurate and consistent</p> <p>For example performance contract FY 2018/2019 dated 23/7/18 provides a consistent number of schools as per the list of schools by the sector dated 30/5/18, 97 schools.</p> <p>Note EMIS reports not used this financial year considered in use is PBS.</p>	<p>5</p>
<p>The LG Education department has submitted accurate/consistent reports/date for school lists and enrolment as per formats provided by MoES</p> <p>Maximum 10 for this performance measure</p>	<p>Evidence that the LG has submitted accurate/consistent data:</p> <ul style="list-style-type: none"> • Enrolment data for all schools which is consistent with EMIS report and PBS: score 5 	<p>Enrolment data submitted for all schools in place with 85,198 pupils while the PBS has 83,225 pupils with a difference of 1,973 showing inconsistency between the two records</p>	<p>0</p>
<p>Governance, oversight, transparency and accountability</p>			

<p>The LG committee responsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • 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 	<p>Evidence was presented to confirm that the council committee responsible for Education met and discussed service delivery issues including supervision reports etc...</p> <p>The evidence included minutes of the council committee for Education meetings as follows:</p> <p>Meeting of 15th September 2017 discussed among other issues the administration of exams, inadequate office space at the education office need to intensify support supervision activities to schools, need to observe official dates for closure and opening of schools, need to take disciplinary action against head teachers of poorly performing schools. (Ref. Minute No. 05/1/SSCM/12/2017</p> <p>Note however, that although there was evidence of PAC reports that were presented to council for discussion, there was no evidence in the minutes of meetings of the council committee for education to confirm that issues arising out of PAC reports were discussed by the committee. Issues arising of PAC reports are discussed by DEC that directs the responsible officers to take action.</p>	
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The LG committee responsible for education met, discussed service delivery issues and pre- sented issues that require approval to Council

Maximum 4 for this performance measure

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

The Council Committee for Education presented issues requiring Council's approval during different sittings of the Council as indicated below:

Meeting of 26/09/ 2017, resolved issues related to regulating the number of staff that goe for upgrading, need to critically assess the calibre and quality of pupils that join primary schools in order to ensure that they are of the right age and understanding (Ref. Minute Extract 07/1 DC/09/2017)

Council meeting of 21/12/2017 resolved among other issues the issue of the need to register all privately owned primary schools within the district (Ref. Minute Extract No. 15/2DC/12/2017

Council meeting of the 28/03/2018. Council resolved among other issues, the issue of the need for the RDC to lead a team to support supervise schools in the district and ensure that they are properly registered, need to ensure that salaries of teachers are paid in time. Need for the district to streamline the purpose and mode of support supervision to schools to make it more effective (Ref. Min. Ext. No. 22/3DC/03/2018)

Council meeting of the 30/05/2018, resolved issues pertaining to the need to re-visit the reasons for closure of some primary schools and verify whether they have satisfied the reasons for which they were closed.

<p>Primary schools in a LG have functional SMCs</p> <p>Maximum 5 for this performance measure</p>	<p>Evidence that all primary schools have functional SMCs (established, meetings held, discussions of budget and resource issues and submission of reports to DEO/ MEO)</p> <ul style="list-style-type: none"> • 100% schools: score 5 • 80 to 99% schools: score 3 • Below 80 % schools: score 0 	<p>All the 97 primary schools in Serere District have functional SMCs; the office of the DEO has a record of submitted minutes of SMC meetings as submitted by the schools and the DEO has written letters to the H/Ts for the appointed SMC members, to all sampled schools all dated 4/3/17. These SMCs meet regularly and keep minutes. For example as sampled ,</p> <p>-Adoku P/S SMC meetings on 1/5/17, 25/6/18 and 3/8/18 where concept paper to Japanese Embassy was discussed among other issues.</p> <p>-Kateta Model P/S SMC meetings were held on 6/10/17, 9/1/18 and PTA finance report and the Mini boarding facilitation discussed.</p> <p>-Kidetok P/S SMC meetings held on 10/7/17, 9/4/18, 4/9/18 and issues like the renovations in the school, academic performance and work plan were discussed.</p> <p>-Ogangai Kidetok P/S SMC meetings were held on 2/12/17, 24/3/18 and 17/5/18 where the work plan, school land survey, academic performance discussed.</p> <p>-Serere Town Ship P/S SMC meetings held on 6/10/17, 20/10/17, 5/3/18, and 23/8/18 where School Action Plan, latrines facilities, performance improvement and SMC composition discussed</p>	<p>5</p>
<p>The LG has publicised all schools receiving non- wage recurrent grants</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has publicised all schools receiving non-wage recurrent grants <p>e.g. through posting on public notice boards: score 3</p>	<p>All schools receiving non-wage recurrent grants were posted on public notice boards at the main education notice board the District Education Office publicity is on the walls at the verandah.</p>	<p>3</p>
<p>Procurement and contract management</p>			

<p>The LG Education department has submitted input into the LG procurement plan, complete with all technical requirements,</p> <p>to the Procurement Unit that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the sector has submitted procurement input to Procurement Unit that covers all investment items in the approved Sector annual work plan and budget on time by April 30: score 4 	<p>Education Department Submissions of the procurement in put were done and they covered all investment items in the approved Sector annual work plan and budget. However, the submissions were done late on 16/8/18 beyond the required submission time of April 30th.</p>	<p>0</p>
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Financial management and reporting

<p>The LG Education department has certified and initiated payment for supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education departments timely (as per contract) certified and recommended suppliers for payment: score 3. 	<p>Reviewed a number of payment vouchers together with the attendant requests for payment made by supplies and ascertained that the District Education Officer timely certified and recommended suppliers' requests for payment. Those looked at are given below:</p> <p>VR 3/2 dated 02/02/2018 for payment of certificate 2 for construction of 2 classroom blocks in Kelim PS. The request was prepared on 30/01/2018 by Great North Contractors Ltd. and recommended and certified by the DEO on 30/01/2018, District engineer certified it on 01/02/2018, entered into vote book on 02/02/2018, verified on the same date and paid on 02/02/2018</p> <p>Vr 1/2 for WHT for construction of 2 classroom block in Pingire PS by Amunonut Contractors & Suppliers. Request was done on 29/01/2018. Recommended for payment by DEO on 31/01/2018 and payment was sanctioned on the same date.</p> <p>Vr 10/3 dared 26/03/2018 for the construction of 2 classroom block in Kamod PS. Request was submitted on 13/03/2018 and recommended for payment by DEO on 23/03/2018. Entered in vote book 26/03/2018 and payment was done 26/03/2018</p> <p>Vr 8/4 payment to Imas Engineering and Co. Ltd for 2 classroom block at Kamod PS. Request for payment was submitted on 26/03/2018 and passed for payment by the DEO on 09/04/2018. Entered in the vote book on 10/04/2018 and payment was done on 10/04/2018</p> <p>The review indicates that the DEO timely recommends and certifies suppliers' request for payment.</p>	<p>3</p>
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<p>The LG Education department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the department submitted the annual performance report for the previous FY (with availability of all four quarterly reports) to the Planner by 15th of July for consolidation: score 4 	<p>The Education department did not submit in time, the annual quarterly Performance reports to the Planning Department for consolidation. Evidence adduced by the Planner (in form of submission dates online to the Planner) indicated that the Quarter 4 Report from the education department was submitted on the 17/08/2018 which was past the submission date deadline of 15th July.</p>	<p>0</p>
<p>LG Education has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • 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 <ul style="list-style-type: none"> o If sector has no audit query score 4 o If the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year: score 2 o If all queries are not responded to score 0 	<p>The sector had 3 issues raised regarding, unbanked revenue, uncollected revenue and unaccounted for funds in Q4 and all these issues remained unresolved.</p> <p>For the 3rd quarter 4 items were identified under: Unbanked revenue/PTA contributions, unaccounted for funds, non-deduction and remittance of statutory deductions and uncollected revenue. No evidence that these were rectified.</p> <p>One item was observed regarding unaccounted for funds and there is no evidence on how this was resolved.</p>	<p>0</p>
<p>Social and environmental safeguards</p>			

<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG Education department in consultation with the gender focal person has disseminated guidelines on how senior women/men teachers should provide guidance to girls and boys to handle hygiene, reproductive health, life skills, etc.: Score 2 	<p>At the time of assessment, the DEO confessed they have not been in consultation with the gender focal person to disseminate gender guidelines as far as senior women and senior men to handle hygiene and reproductive health.</p>	<p>0</p>
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that LG Education department in collaboration with gender department have issued and explained guidelines on how to manage sanitation for girls and PWDs in primary schools: score 2 	<p>The education department and gender focal person have not been in collaboration to issue guidelines on how to manage sanitation for girls and PWDs in primary schools.</p>	<p>0</p>
<p>LG Education Department has disseminated and promoted adherence to gender guidelines</p> <p>Maximum 5 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the School Management Committee meets the guideline on gender composition: score 1 	<p>The School Management Committees meet the guidelines on gender composition. All schools sampled have two or more female members on their SMC.</p> <p>-Adoku P/S has 11 SMC members with five female members.</p> <p>-Kateta Model P/S has 13 SMC members, five of them female.</p> <p>-Kidetok P/S has 13 SMC members with three female.</p> <p>-Ogangai Kidetok P/S has 13 members five of them female.</p> <p>Serere Town ship P/S has 13 members with five female.</p> <p>The guidelines are that at least two members should be part of the SMC composition.</p>	<p>1</p>

<p>LG Education department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Education department in collaboration with Environment department has issued guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education etc.): score 1: 	<p>The Education department have been in collaboration with Environment department to issue guidelines on environmental management (tree planting, waste management, formation of environmental clubs and environment education), Departmental meeting between DEO and EO on 3/9/18 Min; 9/2018. H/Ts meeting with DEO greening guidelines as guided by the EO, Min: 2/8/18</p>	<p>1</p>
<p>LG Education department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that all school infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: Score 1 	<p>Screening forms signed by Environmental Officer and the CDO were available for all school infrastructure projects, example;</p> <p>The construction of a two classroom block at Kamod P/S.</p> <p>The construction of a two classroom block at Pingire P/S.</p> <p>The completion of a two classroom block at Toror P/S.</p>	<p>1</p>
<p>LG Education department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> The environmental officer and community development officer have visited the sites to checked whether the mitigation plans are complied with: Score 1 	<p>The Environmental Officer and Community Development Officer visited the sites to check whether the mitigation plans are complied with as in and duly signed the reports for these projects.</p> <p>The construction of a two classroom block at Kamod P/S.</p> <p>The construction of a two classroom block at Pingire P/S.</p> <p>The completion of a two classroom block at Toror P/S.</p>	<p>1</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Human resource planning and management			

<p>LG has substantively recruited primary health care workers with a wage bill provision from PHC wage</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that LG has filled the structure for primary health care with a wage bill provision from PHC wage for the current FY</p> <ul style="list-style-type: none"> • More than 80% filled: score 8 • 60 – 80% - score 4 • Less than 60% filled: score 0 	<p>The Serere DLG HD had substantively recruited PHC workers to the tune of 61.3% only based on the staffing needs stated in the approved staffing structure (i.e. according to PS/MoPS Transmittal Letter to CAO dated 14th/9/2017 Ref: ARC/135/306/01 on the approved and adopted staff structure for Serere DLD):</p> <ol style="list-style-type: none"> 1. The Serere DLG HD's Staffing Norm for the HWs was 282 but only 173 of the PHC workers had been filled at the time of the assessment. The HD did not offer evidence of attempts made to fill 109 vacancies through conducting of interviews. This means that the attempts made overall suggest that 173 HWs give us the 61.3% (numerator is 173 divided by the denominator of 282 multiply by 100). 2. While the DLG had IPFs with a PHC wage bill provision amounting to UGX 2,396,655,000 for the FY 2018/19, by the time the assessment was completed in Serere DLG. The PBS records (on monthly wage performance details) provided for 190 items with regard to the HD's deployment levels (a figure that encapsulates the 187 staff list, excluding those transferred to other districts due to promotion). It also catered for the 173 PHC HWs (hence in line with the HD's staffing lists in use together with the budget for FY 2018/19). 3. There were some mismatches in the information on staffing, especially inconsistencies between the HD and HF level records. For example, the Serere HC IV reported having 49 staff while some HD's records pointed to 48 and others thought it was 46 filled positions for the HC IV. It was clear that the HD's records were not up to date and this included the ones offered to the assessment team in a few other areas (see table). <p>ID Type of HF No. of HFs Norm Filled Vacant</p> <p>1 HC IV 2 96 84 12</p> <p>2 HC III 6 114 64 50</p> <p>3 HC II 8 72 25 47</p> <p>Total 16 282 173 109</p>	
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<p>The LG Health department has submitted a comprehensive recruitment plan for primary health care workers to the HRM department</p> <p>Maximum 6 points for this performance measure</p>	<p>Evidence that Health department has submitted a comprehensive recruitment plan/request to HRM for the current FY, covering the vacant positions of primary health care workers: score 6</p>	<p>From a review of the PBS records, there was no evidence that Serere DLG's HD submitted a comprehensive staff recruitment plan/request to HRM that covered PHC workers in all HFs in the DLG in line with the vacant positions (see table). The omission is contrary to evidence seen related to communications such as:</p> <ol style="list-style-type: none"> 1. The official (signed and stamped) DHO's submission letter (dated 4th/4/2017) to CAO and HR on Gaps to be filled under HR for thye HD for 3 successive financial years (2017/18, 2018/19 and 2019/20 all outlining need to fill the remaining vacancies of PHC HWs. 2. The HD's Biostatistician's Email dated 29th/8/2018 to PHRO with a subject "Staffing Gaps" and accompanied by an Excel Sheet on "Serere HD Staffing Gaps". 	<p>0</p>
<p>The LG Health department has conducted performance appraisal for Health Centre IVs and Hospital In-charge and ensured performance appraisals for HC III and II in-charges are conducted</p> <p>Maximum 8 points for this performance measure</p>	<p>Evidence that the all health facilities in-charges have been appraised during the previous FY:</p> <ul style="list-style-type: none"> o 100%: score 8 o 70 – 99%: score 4 o Below 70%: score 0 	<p>The District has 16 government aided health centers, from the review of 13 appraisal files of health in-charges provided, it was found out that only 9 (less than 70%) health in-charges had been appraised for the period 2017/18 while 4 were not appraised.</p> <p>Egadu John Moses Kyere HC III: Appraisal report seen was for 2016/17 (signed on 31st July 2017)</p> <p>Oluka Enyamu James Bugondo HC III: Appraisal report seen was for 2011/12 (signed on 19th July 2012)</p> <p>Opolot David Kagwara HC II: Appraisal report seen was for 2016/17 (signed on 31st July 2017)</p> <p>Agwang Stella Omagoro HC II: Appraisal report seen was for 2013/14 (signed on 16th Dec 2014)</p>	<p>0</p>

<p>The Local Government Health department has deployed health workers across health facilities and in accordance with the staff lists submitted together with the budget in the current FY.</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the LG Health department has deployed health workers in line with the lists submitted with the budget for the current FY, and if not provided justification for deviations: score 4 	<p>On the whole, the records in the staffing list were marginally comparable with deployment levels, for the latter refer to CAO's letter (Ref: CR/161/4) dated 17th/1/2018 to all HWs (subject: Transfer Instructions), which confirms the official records with respect to deployment of PHC HWs. Even so, there were some discrepancies when it came to what the HD documented as the filled positions and what the HFs reported as the deployed HWs (also see table):</p> <ol style="list-style-type: none"> For some HFs the staff deployment was not in accordance with the positions as seen in HD's official records. As seen in the HD's staffing lists, Serere HC IV had 46 staff according to assorted HD records yet the HF's records showed 49 fully-filled portfolios. For PBS records on monthly wage performance details, the system provide for 190 items with regard to the HD's deployment levels (a figure that encapsulates the 187 staff list 9excluding those transferred to other districts due to promotion) as well as catering for the 173 PHC HWs (hence in line with the HD's staffing lists in use together with the budget for FY 2018/19). <p>ID</p> <p>HF's Deployed HWs FY 2017/18</p> <table border="1"> <thead> <tr> <th>HF Records</th> <th>HD Records</th> <th>Norm</th> </tr> </thead> <tbody> <tr> <td>1 Kateta HC III</td> <td>12</td> <td>13</td> </tr> <tr> <td>2 Kyere Mission HC III/PNFP</td> <td>9</td> <td>19</td> </tr> <tr> <td>3 Oburin HC II</td> <td>2</td> <td>2</td> </tr> <tr> <td>4 Serere HC IV</td> <td>49</td> <td>46</td> </tr> <tr> <td>Total</td> <td>72</td> <td>61</td> </tr> <tr> <td></td> <td></td> <td>95</td> </tr> </tbody> </table>	HF Records	HD Records	Norm	1 Kateta HC III	12	13	2 Kyere Mission HC III/PNFP	9	19	3 Oburin HC II	2	2	4 Serere HC IV	49	46	Total	72	61			95	<p>0</p>
HF Records	HD Records	Norm																						
1 Kateta HC III	12	13																						
2 Kyere Mission HC III/PNFP	9	19																						
3 Oburin HC II	2	2																						
4 Serere HC IV	49	46																						
Total	72	61																						
		95																						
<p>Monitoring and Supervision</p>																								
<p>The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p>	<ul style="list-style-type: none"> Evidence that the DHO/ MHO has communicated all guidelines, policies, circulars issued by the national level in the previous FY to health facilities: score 3 	<p>There was mixed evidence from the sampled HFs that the DHO/HD was effective when it came to communicating all the circulars, guidelines and policies issued by the national level for the FY 2017/18 (see table). There was only evidence that the sampled HFs had access to some assorted circulars, guidelines and policies from the national level (i.e. did not receive all or 100% of those issued). Indeed, there were both apparent and reported challenges in the mode of communication and documentation between and within the HD and</p>	<p>0</p>																					

Maximum 6 for this performance measure

HF's:

1. As signals for commitment towards “effective communication” and investment into efforts towards supporting CME, more systematic records of those received and those distributed would be necessary. Even going by their own records alone, there was no documented evidence that the DHO had communicated all the circulars, guidelines and policies received from the center (i.e. in the spirit of ensuring “effective communication” and promoting CME).
2. At a HD level, it was difficult to retrieve information or records with respect to what circulars, guidelines and policies the HD had been received in FY 2017/18 or even those that they were able to dispatch or distribute to HF's. Incoming and outgoing communication logbooks would be the most systematic way by which to fill this gap. However, the DHO office had a visitors book that indicated selected HF visits for the sole purpose of picking the circulars, guidelines and policies. For example, on the 30th/8/2017 Bugondo HC III picked ART and TB Guidelines and on the 28th/8/2017 Kateta HC III picked Maternal Child Health, ART and TB Guidelines
3. At a HF level, while it was often difficult for HF's to establish when exactly they had received what circular, guideline or policy, on the whole the sampled HF's possessed an average of (only) 10 circulars, guidelines or policies issued in the FY 2017/18 (see table). Also, HF's records indicated that the list of those received excluded “Guidelines for LG Planning for the Health Sector, 2017; Sector Grant and Budget Guidelines FY2018/19; and Policy Strategies for Improving Health Service Delivery 2016-2021”.
4. Again, it was even harder at this level to retrieve information or records with respect to what circulars, guidelines and policies the HD were received in FY 2017/18 or even a complete record of what they were. Incoming communication and usage logbooks would be the most systematic way by which to achieve effective record keeping but one that requires intervention.

ID No. Issued to HF's (FY 2017/18) DHO Visits

1 Kateta HC III 9 2

2 Kyere Mission HC III/PNFP 7 1

3 Oburin HC II 7 1

		4 Serere HC IV 15 0 Average 10 1	
<p>The DHO/MHO has effectively communicated and explained guidelines, policies, circulars issued by the national level in the previous FY to health facilities</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the DHO/ MHO has held meetings with health facility in- charges and among others explained the guidelines, policies, circulars issued by the national level: score 3 	<p>In line with the quest to support effective communication and promote CME, it was even harder to secure evidence that the HD (directly and specifically) supported activities aimed at explaining the distributed circulars, guidelines and policies (indeed those issued by the national level in FY 2017/18):</p> <ol style="list-style-type: none"> The Visitors Book in the DHO;'s Office is only an indirect record, if anything one that confirms the fact that the HFs picked the circulars, guidelines and policies. The HFs' Visitors Book also only offer indirect records but suggesting that the DHO visited not explained the circulars, guidelines and policies. 	0

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

Maximum 6 points for this performance measure

Evidence that DHT/MHT has supervised 100% of HC IVs and district hospitals (including PNFPs receiving PHC grant) at least once in a quarter: score 3

According to HD records, the DHT supervised 100% the HC IVs (i.e. Apapai and Serere HC IVs), hence with evidence full support to higher level HFs, at least once in a quarter. However, when it came to the 2 PNFPs receiving PHC funding (i.e. Kyere and Kidetok), the DHT did not supervise them fully, hence with evidence of incomplete coverage of the PNFPs as was the case of quarters 1 and 4 (see table).

Quarters Date HC IV Supervised PNFP Supervised

Q1 26th/9/2017 2 out of 2 0 out of 2

Q2 23rd/10/2017 2 out of 2 2 out of 2

Q3 12th/3/2018 2 out of 2 2 out of 2

Q4 17th/7/2018 2 out of 2 0 out of 2

Going by the MoH Supervision Logbooks in the sampled HFs DHT visits are evident (see table). For the sampled HFs support supervision is covered as follows:

1. Serere HC IV support supervision is documented between series 537401 and 537405 (i.e. from 2nd/5/2018 to 20th/6/2018) for the FY 2017/18. However, on close scrutiny, this appears inadequate considering that the HF is close to the HD. It is possible there is a documentation gap.
2. Kyere Mission HC III/PNFP support supervision is documented between series 376416 and 376422 (i.e. from 13th/7/2017 to 20th/6/2018) for the FY 2017/18. Again, on close scrutiny, this appears adequate considering that the HF is a PNFP far away from the HD.

ID HFs OFFICIALVISITS (FY 2017/18) TOTAL

DHO DHT HSD

1 Kyere Mission HC III/PNFP 1 22 10 33

2 Serere HC IV 0 10 2 12

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

Maximum 6 points for this performance measure

Evidence that DHT/MHT has ensured that HSD has supervised lower level health facilities within the previous FY:

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

Support supervision for FY 2017/18 covered 78.6% of the sampled lower level HFs i.e. for the 14 lower-level HFs that are supposed to be visited per quarter (6 HC IIIs and 8 HC IIs).

Quarters Date HC IIIs Supervised HC IIs Supervised

Q1 26th/9/2017 4 out of 6 0 out of 8

Q2 23rd/10/2017 6 out of 6 8 out of 8

Q3 12th/3/2018 6 out of 6 8 out of 8

Q4 17th/7/2018 6 out of 6 6 out of 8

Therefore, based on the said numerical details seen above, the following is worth noting with respect to what happened in FY 2017/18:

1. The total of 56 is the denominator (number of HFs to be visited in the 4 quarters).
2. Only 44 visits were made altogether (i.e. out of the required 56 in the previous FY).
3. The proportion covered for lower-level HFs by the DHT, therefore, was 78.6% only.

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ID HFs OFFICIAL VISITS (FY 2017/18) TOTAL

DHO DHT HSD

1 Kateta HC III 2 26 20 48

2 Kyere Mission HC III/PNFP 1 22 10 33

3 Oburin HC II 1 21 17 39

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 all the 4 quarterly reports have been discussed and used to make recommendations (in each quarter) for corrective actions during the previous FY: score 4

While the HD provided evidence of the existence of 4 quarterly reports for FY 2017/18 (see table), there was no evidence in the DHT minutes that any such reports were discussed and used fully to make recommendations in each quarter for all quarters:

1. The DHT only met 7 out of 12 mandatory times (i.e. to discuss support supervision and monitoring reports), hence was unable to discuss all reports fully and pave the way for follow up corrective actions.
2. According to HD records that were accessible at the time of the assessment (19th/9/2018) indicated that the DHT was not fully functional for the greater part of the FY 2017/18 (i.e. there only 7 out of the 12 minutes of the DHT monthly meetings (i.e. for 12th/7/2017, 8th/8/2017, 7th/9/2017, 21st/10/2017, 9th/11/2017, 11th/12/2017, none for January 2018, 7th/2/2018, none for March, April, May and June 2018).
3. On self-reported claims were made by the DHO that addressing staffing shortages emerged from the quarterly reports and deliberated upon in a specific DHT monthly meeting.

Quarters Date

Q1 26th/9/2017

Q2 23rd/10/2017

Q3 12th/3/2018

Q4 17th/7/2018

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 recommendations are followed

– up and specific activities undertaken for correction: score 6

There was some evidence that the support supervision recommendations were followed both by the HD and the HFs in the FY 2017/18(see table).

ID HF Recommendation Follow up

1 Kateta HC III Improve prescription and dispensing (20th/4/2018) Follow test and treat according to diagnosis

2 Kyere Mission HC III/PNFP Improve nutrition assessment to 100%

(18th/7/2017) Integrated antenatal register (HMIS Form 071 captures weight and MUAC details (29th/3/2018)

3 Oburin HC II Don't give anti-malarial tabs to RDT negative patients (22nd/9/2017) No coartem given to negative patients as seen in HMIS Form 031

4 Serere HC IV Develop a health talk schedule (9th/5/2018) Schedule posted on OPD notice board

However, in part because of weak documentation methods, both the HD and the sampled HFs struggled to wade through their records to pick out what recommendations were followed through:

1. While all sampled HFs (100%) benefited from DHT and HSD support supervision and all had pieces of evidence (e.g. in the supervision logbooks) to confirm that the DHT made recommendations and with further evidence of follow up on the advice on corrective actions to be implemented in the FY 2017/18), picking evidence of actual follow ups often proven difficult.
2. Again, while the DHT ensured that the HSD supervised lower level HFs, the discussion of Support Supervision Reports only focused on few quarterly reports the fact that the DHT did not sit on a monthly basis.
3. The most commonly reported operational gap had to do with the limited funding to the HD to support total and integrated support supervision for all HFs for all quarters, weak documentation (low capacity to retrieve evidence regularly).

<p>The LG Health department has submitted accurate/consistent reports/data for health facility lists receiving PHC funding as per formats provided by MoH</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has submitted accurate/consistent data regarding: <ul style="list-style-type: none"> o List of health facilities receiving PHC funding, which are consistent with both HMIS reports and PBS: score 10 	<p>There was accurate and consistent data and reports on the 20 HFs receiving PHC funding (as per MoH formats). The following was evident in the records:</p> <ol style="list-style-type: none"> 1. The 20 HFs posted in the HD's Accountants Office as the list of HFs receiving PHC funding for the FY 2017/18. 2. The 20 HFs posted in the HD's Accountants Office were all reflected in the MoH HMIS Excel spreadsheet that was covered among the broader listing of all HFs. Their reporting rate was 100%. Their HMIS reporting rate was fairly adequate or consistent (nearly meeting the required 100%). 3. The 20 HFs are seen between pages 99-117 in the PBS (APR/Quarter 4 Consolidated Report) Vote 596, Section C – Details of Transfers to Lower-Level Services and Capital Investments by LC III. 	<p>10</p>
<p>Governance, oversight, transparency and accountability</p>			
<p>The LG committee responsible for health met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG committee responsible for health met and discussed service delivery issues including supervision reports, performance assessment results, LG PAC reports etc. during the previous FY: score 2 	<p>Evidence was presented to confirm that the council committee responsible for health met and discussed service delivery issues including supervision reports.</p> <p>The evidence included minutes of the council committee for health meetings as follows:</p> <p>Meeting of 15th September 2017 discussed among other issues the "Status of Hepatitis B in the district", increasing funding for health facilities, shortage of health workers at the health centres hence affecting service delivery, shortage of accommodation for health workers (Ref. Minute No. 05/1/SSCM/12/2017</p> <p>Note however, that although there was evidence of PAC reports that were presented to council for discussion, there was no evidence in the minutes of meetings of the council committee for health to confirm that issues arising out of PAC reports were discussed by the committee. Normally DEC directs the responsible officers to take action on the issues raised in the PAC reports.</p>	<p>2</p>

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

Evidence was adduced by the Planner to confirm that the health sector committee presented issues to council for approval as indicated below:

Council meeting of 26/09/17 recommended that CAO should formally write to MoH requesting for the accreditation of Serere HC IV and Apapai HC IV to offer hepatitis B treatment (Ref. Minute Extract No. 07/1 DC/09/2017).

Council meeting of 21/12/2017 resolved among other issues the issue of banning of the sale of food supplements in the district and that people selling food supplements and herbal medicine should be registered (Ref. Minute Extract No. 15/2DC/12/2017).

Council meeting of the 28/03/2018. Council resolved among other issues, the issue of the need to transfer some of the health workers at Apapai HC IV who had become complacent having worked at the facility for a number of years and were undermining efforts of the medical officer.

Council meeting of the 28/03/2018. Council resolved among other issues, the issue of the need to transfer some of the health workers at Apapai HC IV who had become complacent having worked at the facility for a number of years and were undermining efforts of the medical officer.

<p>The Health Unit Management Committees and Hospital Board are operational/functioning</p> <p>Maximum 6 points</p>	<p>Evidence that health facilities and Hospitals have functional HUMCs/Boards (established, meetings held and discussions of budget and resource issues):</p> <ul style="list-style-type: none"> • If 100% of randomly sampled facilities: score 6 • If 80-99 %: score 4 • If 70-79: %: score 2 • If less than 70%: score 0 	<p>According to all the sampled HFs only 50% had functional HUMCs and the average level of functionality at 87.5% (i.e. with minutes covering the 4 quarters of the FY 2017/18 – see table. A division of the sum of the said 2 figures by 2 is above 60% (i.e. $50+87.5= 137.5\div 2= 68.8\%$). Therefore, the HD met the gender composition requirement because the average of the sample hovers above the 60% composite rate. This was corroborated by HD records of a different sample of HFs but one that also indicated 50% functionality of HUMCs. The assessor saw 4 assessed HFs and only 2 of the 4 had functional HUMCs:</p> <p>HFs' HUMCs Meetings in FY 2017/18 Functionality</p> <p>Kateta HC III 4 100%</p> <p>Kyere Mission HC III/PNFP 3 75%</p> <p>Oburin HC II 4 100%</p> <p>Serere HC IV 3 75%</p> <p>% of HFs with 100% Functionality (50%) 87.5%</p>	<p>2</p>
<p>The LG has publicised all health facilities receiving PHC non-wage recurrent grants</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the LG has publicised all health facilities receiving PHC non-wage recurrent grants e.g. through posting on public notice boards: score 4 	<p>There was only very scanty evidence that the DLG/HD undertook to publicize the list of all the HFs receiving PHC non-wage recurrent grant:</p> <ol style="list-style-type: none"> 1. At the HF level, only Oburin HC II (1 out of 4 HFs) possessed and posted the 20-HF list of HFs receiving PHC funding in the medical consultation room. 2. At the HD level, only the Accountant Office in the HD had on the wall the 20-HF list of HFs receiving PHC funding (hence in no way can this be deemed as publicizing). The HD had not conceived of more pragmatic and systematic ways of publishing the 20 HFs receiving PHC funding. 3. At the DLG level, the Serere DLG budget website was yet to publicize the 20-HF list of HFs receiving PHC funding. The DLG had not conceived of more pragmatic and systematic ways of publishing vital info (e.g. the 20-HFs list receiving PHC funding) for transparency and accountability. 	<p>0</p>
<p>Procurement and contract management</p>			

The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget

- Evidence that the sector has submitted input to procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time by April 30 for the current FY: score 2

At the time of the assessment, the HD was only carrying forward an on-going project. The on-going phase was not going to go through a fresh procurement process. Therefore, scoring it would not be inapplicable (N/A). On the finer details about the project, the following is worth noting:

1. First, the specific project under consideration was Construction of the 1 surgical ward for Serere HC IV (i.e. as seen on pg 58 of the PBS). Therefore, the HD only had 1 Health infrastructure investment project, whose construction was phased (procured in the FY 2016/17, submitted way back in FY 2016/17 i.e. before 30th April 2018 but with no availed letters of extension for the contractor). For FY 2017/18, the submission deadline was not applicable but for FY 2016/17, it was difficult to confirm if the submission was in time because the HD/DHO retained no such records (i.e. submission letters to PDU).
2. Secondly, with the above-mentioned aspects in view, the project's documentation appears on page 17 as seen from the Approved Budget and Annual Work plans for FY 2017/18 (Vote 596, output no: 088183 stated as – OPD and Other Ward Construction and Rehabilitation. For FY 2018/19 (approved on 30th/5/2018, Minute: 32/4DC/05/2018 Motion 1 (health covered on pages 24-30 and the project seen on page 29).
3. Last but not least, the HD did not retain copies of submissions to confirm that they were both timely and complete at the time when the procurement input was submitted (FY 2016/17) – i.e. List in submission covered all investment items seen in the approved health sector AWP for the FY 2016/17 but with other details covered too (e.g. BOQs, Drawings, Scope of Works, Technical Specifications and ToRs, et cetera).

Maximum 4 for this performance measure

<p>The LG Health department has submitted input to procurement plan and requests, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that LG Health department submitted procurement request form (Form PP5) to the PDU by 1st Quarter of the current FY: score 2. 	<p>The DHO submitted Procurement Form PP1 on the 7th/9/2017, hence submitted it in time (i.e. by the end of the Q1 for FY 2017/18). A reviewed sample of Form PP1 covered fuel, was signed, stamped and approval by DHO as seen above.</p>	<p>2</p>
<p>The LG Health department has certified and initiated payment for supplies on time</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the DHO/ MHO (as per contract) certified and recommended suppliers timely for payment: score 4. 	<p>Reviewed voucher 01/04 for construction of general surgical ward at Serere HC IV by Kakise Holdings Ltd. The request was prepared on 12/04/2018 and recommended for payment by DHO on 30/04/2018 and payment was done on 30/04/2018</p> <p>VR 5/8 to follow up of certified old villages was paid on 10/08/2017 DHO approved on 04/09/2018</p> <p>Requests for payments from suppliers were timely certified and recommended by the District Health Officer.</p>	<p>4</p>
<p>Financial management and reporting</p>			
<p>The LG Health department has submitted annual reports (including all quarterly reports) in time to the Planning Unit</p> <p>Maximum 4 for this performance measure</p>	<ul style="list-style-type: none"> 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 	<p>The Annual performance reports (including Quarterly reports for the 4 quarters) were submitted late to the Planning Unit for consolidation. For instance, Quarter 4 Report for the health sector was submitted to the Planning department on the 15th of August 2018 (as per the PBS online report generation and submission date to the Planning Unit (extracted by the district planner at the time of submission) which was so late after the deadline of the submission date of mid July.</p>	<p>0</p>

<p>LG Health department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has provided information to the internal audit on the status of implementation of all audit findings for the previous financial year</p> <ul style="list-style-type: none"> • 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 	<p>The sector had one issue pointed out in the 4th Quarter regarding unaccounted for funds and the issue is yet to be received.</p> <p>One item was identified in Q3 regarding unaccounted for funds and there's no evidence this was rectified.</p> <p>One item was observed regarding unaccounted for funds and there is no evidence on how this was resolved.</p>	<p>0</p>
<p>Social and environmental safeguards</p>			

<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> Evidence that Health Unit Management Committee (HUMC) meet the gender composition as per guidelines (i.e. minimum 30 % women: score 2 	<p>Based on a sample of 4 HFs (see table), only 50% of the HUMCs met the gender composition requirement, hence the HD did not meet this requirement. The average based on the assessments sample was a mere 25% as the overall average for Serere DLG (see table).). A division of the sum of the said 2 figures by 2 is way below 50% (i.e. $50+25=75 \div 2=37.5\%$). Therefore, the HD did not meet the gender composition requirement because the average of the sample hovers below the 50% composite rate. The HD had not commission assessments to find out the composition of committees.</p> <p>Name of HF HUMC Members Female Members %/Female</p> <p>Kateta HC III 7 1 14.3</p> <p>Kyere Mission HC III/PNFP 8 1 12.5</p> <p>Oburin HC II 5 2 40.0</p> <p>Serere HC IV 9 3 33.3</p> <p>Average Gender Composition 25.0</p> <p>The assessments findings corroborate the HD's assessment that was based on a sample of 4 (Kateta HC III, Kyera HC III, Atiira HC III and Akoboi HC II – see table below). Here, 50% of the HFs were functional and the average level of composition was 26.4%.</p> <p>Name of HF HUMC Members Female Members %/Female</p> <p>Akoboi HC II 5 1 20.0</p> <p>Atiira HC III 7 3 42.9</p> <p>Kateta HC III 7 1 14.3</p> <p>Kyere HC III 7 2 28.6</p> <p>Average Gender Composition 26.4</p>	
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<p>Compliance with gender composition of HUMC and promotion of gender sensitive sanitation in health facilities.</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> Evidence that the LG has issued guidelines on how to manage sanitation in health facilities including separating facilities for men and women: score 2. 	<p>The HD possessed sanitation-related circulars that were reportedly issued to HFs as seen below. Even so, none of the sampled and visited HF had labeled toilet facilities in ways that separate men and women facilities. Indeed, at the time of this assessment, none of the visited toilet facilities for the DLG, HD and HFs toilet facilities had separate facilities for men and women as required by the guidelines. in outline, the assessment noted the following :</p> <ol style="list-style-type: none"> One circular that the HD issued was dated 3rd/7/2017) on MoH Sanitation Public health Protocols and Tools. The other circular was titled “Uganda Public Health Services Protocols (UPASP), MoH Revised 1st Edition May 2016). The distribution list had 11 HFs. No sampled HF offered demonstrable evidence that had access to the circulars that were purportedly issued through the HD. No sampled HFs (0%) offered proof that they had received the HD communications from the HD on promoting gender-sensitive sanitation (including having access to the issued guidelines on the separation of facilities for female and male), 	<p>0</p>
<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that all health facility infrastructure projects are screened before approval for construction using the checklist for screening of projects in the budget guidelines and where risks are identified, the forms include mitigation actions: Score 2 	<p>Only 1 phased health infrastructure investment project was being supported:</p> <ol style="list-style-type: none"> The specific project under consideration was Construction of the 1 surgical ward for Serere HC IV (i.e. as seen on pg 58 of the PBS). The EO had 1 signed and stamped Environment Screening Forms (ESSF) covering the said health infrastructure project for FY 2017/18. The forms outlined risks and mitigation plans. 	<p>2</p>

<p>LG Health department has ensured that guidelines on environmental management are disseminated and complied with</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> The environmental officer and community development officer have visited the sites to check whether the mitigation plans are complied with: Score 2 	<p>At the time of the assessment (19h/9/2018), the HD, the EO and CDO did not provide signed and stamped Site-Visit Reports to help confirm that the identified mitigation plans to address the risks were complied with.</p>	<p>0</p>
<p>The LG Health department has issued guidelines on medical waste management</p> <p>Maximum 4 points</p>	<ul style="list-style-type: none"> Evidence that the LG has issued guidelines on medical waste management, including guidelines (e.g. sanitation charts, posters, etc.) for construction of facilities for medical waste disposal: score 4. 	<p>On access to guidelines on segregation of medical waste (either in form of a chart or otherwise):</p> <ol style="list-style-type: none"> The assessor saw a DHO letter dated 18th/5/2017 (RE: Distribution of Medical Waste Management Documents). Few of the sampled HFs in Serere DLG had access to the DHO circular. Even for those that had the charts, there was always limited evidence offered on the source of the guidelines in use by the HFs. 	<p>4</p>

Summary of requirements	Definition of compliance	Compliance justification	Score
Planning, budgeting and execution			
<p>The DWO has targeted allocations to sub-counties with safe water coverage below the district average.</p> <p>Maximum score 10 for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the district Water department has targeted sub-counties with safe water coverage below the district average in the budget for the current FY: <ul style="list-style-type: none"> o If 100 % of the budget allocation for the current FY is allocated to S/Cs below average coverage: score 10 o If 80-99%: Score 7 o If 60-79: Score 4 o If below 60 %: Score 0 	<p>Serere district safe water coverage as of June 2018 was 74.59% with the sub-counties of Bugondo (74.42%), Kadungulu (58.26%), Kyere (70.4%) and Labori (65.44%) below the district average. In the current AWP, the district has approved the construction of 9 deep boreholes funded by the Water and Environmental grant with a backup from District Discretionary Environmental grant. The targeted sub-counties are; Atiira, Olio, Kadungulu, Pingire, Buyondo, Labori, Kateta and Kyere. From the current year work plan, it is evident that the district has targeted all the sub-counties with safe water coverage below district average which translated into 62.5% of budget allocations.</p>	4

<p>The district Water department has implemented budgeted water projects in the targeted sub-counties (i.e. sub-counties with safe water coverage below the district average)</p> <p>Maximum 15 points for this performance measure</p>	<ul style="list-style-type: none"> • Evidence that the district Water department has implemented budgeted water projects in the targeted sub-counties with safe water coverage below the district average in the previous FY. o If 100 % of the water projects are implemented in the targeted S/Cs: <ul style="list-style-type: none"> Score 15 o If 80-99%: Score 10 o If 60-79: Score 5 o If below 60 %: Score 0 	<p>Serere district has an average safe water coverage of 74.68% with the sub-counties of Kadungulu (60.37%), Kateta (72.04%), Kyere (65.02%) and Labori (70.05%) below the district average. In the previous FY progress report, it was reported that the district had approved the construction of 7 deep boreholes(hamd pump), design of 1 piped water system and 1 deep borehole (motorised) which were constructed. The targeted sub-counties were; Olio (2), Atiira (1), Kateta (1), Kyere (1), Kadungulu (1), Pingire (1) and Buyondo (1). It is evident that the department did target most of the sub-counties below the district average except for Labori sub-county. This translated into 100% of implemented projects in the targeted sub-counties.</p>	<p>15</p>
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Monitoring and Supervision

<p>The district Water department carries out monthly monitoring of project investments in the sector</p> <p>Maximum 15 points for this performance measure</p>	<p>Evidence that the district Water department has monitored each of WSS facilities at least annually.</p> <ul style="list-style-type: none"> • If more than 95% of the WSS facilities monitored: score 15 • 80% - 95% of the WSS facilities - monitored: score 10 • 70 - 79%: score 7 • 60% - 69% monitored: score 5 • 50% - 59%: score 3 • Less than 50% of WSS facilities monitored: score 0 	<p>From the files, it was evident that the LG did monitor and supervise WSS facilities at least annually for example;</p> <ul style="list-style-type: none"> - Supervision report for design of Atiira water supply and sanitation system; Dated: 13th March, 2018. - Post construction supervision report for the mini solar water pumping system; Dated: 2nd February, 2018. - Deep borehole construction supervision report under DWSCG 2017/18 FY; Dated: 5th January, 2018. The supervision was done on development projects in the eight approved villages and it accounted for 84%. 	<p>10</p>
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<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the district has submitted accurate/consistent data for the current FY: Score 5 List of water facility which are consistent in both sector MIS reports and PBS: score 5 	<p>Serere District Local Government submitted accurate/consistent data for FY 2018/19. In the Management Information System (MIS) reports at the Ministry of Water and Environment (MoWE) 6 Deep Boreholes were reported to be rehabilitated and 9 drilled in the Financial Year. This is consistent with the 6 to be rehabilitated and 9 drilled as reported in PBS under Output : Borehole Drilling and Rehabilitation</p>	<p>5</p>
<p>The district Water department has submitted accurate/consistent reports/ data lists of water facilities as per formats provided by MoWE</p> <p>Maximum 10 for this performance measure</p>	<ul style="list-style-type: none"> List of water facility which are consistent in both sector MIS reports and PBS: score 5 	<p>Drilling of boreholes will be in; Obirekek, Acomia-Atapar, Aminit- Otoba, Akisim, Olupe – Moru, Jelal – Ogwokai, Ajuba, Akumoi 1 and Oburiekori villages to be drilled.</p> <p>Rehabilitation of deep boreholes will be in; Omiirio, Madaka, Ongogei, Kangoto P/S, Acodait and Kikota villages</p>	<p>5</p>
<p>Procurement and contract management</p>			

<p>The district Water department has submitted input for district's procurement plan, complete with all technical requirements, to PDU that cover all items in the approved Sector annual work plan and budget</p> <p>Maximum 4 for this performance measure</p>	<p>Evidence that the sector has submitted input for the district procurement plan to PDU that cover all investment items in the approved Sector annual work plan and budget on time (by April 30): score 4</p>	<p>The department did submit procurement requests to the PDU for the procurement of the following;</p> <ul style="list-style-type: none"> -Drilling, pump testing, casting of aprons and installation of deep boreholes (9) -Construction of one spring well in Kamusala (1) -Shallow well construction (2) -Rehabilitation of deep boreholes (6) -Construction of urinal at DWO (1) -Geophysical site investigation and supervision of deep boreholes (9) <p>However, the plan was submitted on 30th July, 2018 which was past the deadline of 30 April.</p>	<p>0</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> • If the contract manager prepared a contract management plan and conducted monthly site visits for the different WSS infrastructure projects as per the contract management plan: score 2 	<p>From the Project files, there was no evidence in form of contract management plan, no evidence in form of minutes for site meetings between contract manager and the contractor. This was mainly because the projects take a very short time period of days.</p>	<p>0</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> • If water and sanitation facilities constructed as per design(s): score 2 	<p>From the sampled facilities, the water and sanitation facilities were constructed as per designs for example; Village: Alengo, sub-county: Atiira, DWD NO: 69240, Date: 06/01/2018; Village: Koromojo, Sub-county: Olio, DWD NO: 69241, Date: 5/01/2018</p>	<p>2</p>

<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> If contractor handed over all completed WSS facilities: score 2 	<p>At the time of the assessment, there was no evidence of hand over of completed facilities.</p>	<p>0</p>
<p>The district has appointed Contract Manager and has effectively managed the WSS contracts</p> <p>Maximum 8 points for this performance measure</p>	<ul style="list-style-type: none"> If DWO appropriately certified all WSS projects and prepared and filed completion reports: score 2 	<p>The DWO appropriately certified all WSS projects and prepared and filed completion reports; For example:</p> <p>Project ; Drilling and installation of two (2) deep wells during the FY 2017/18; Project No: PfCW/SRT/Wrks/2017-18/00001; Contractor: M/s Multec Consult Limited; Contract sum: UGX: 50,042,164; Dated: 22nd June 2018.</p> <p>Project: Siting, design and drilling supervision of eight deep boreholes DWSCG 2017/18; Contractor : Water Resources and Environmental Consults Ltd; Contract sum: UGX: 16,130,000; Dated: 3/4/2018.</p>	<p>2</p>
<p>The district Water department has certified and initiated payment for works and supplies on time</p> <p>Maximum 3 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the DWOs timely (as per contract) certified and recommended suppliers for payment: score 3 points 	<p>Reviewed the VR 12/04 dated 17/04/2018 paying NECO Enterprises Limited for protection of a spring well at Okunguro Abuket. The request for payment was prepared on 19/03/2018 and recommended for payment by the district water officer on 09/04/2018. Payment was done on 17/04/2018</p> <p>Reviewed a request for payment from WRECO dated 14/03/2018 and passed by the District water officer on 3/04/2018 payment was done on 17/04/2018</p> <p>VR 07/04 dated 17/04/2018 for service of vehicle. Invoice was received on 12/04/2018 and request was submitted by the District Water Office on 12/04/2018 and was passed by the vote controller on 7/04/2018 and paid on 17/04/2018</p> <p>There is evidence that the District Water Officer timely certifies and recommends suppliers requests for payment.</p>	<p>3</p>
<p>Financial management and reporting</p>			

<p>The district Water department has submitted annual reports (including all quarterly reports) in time to the Plan- ning Unit</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> 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 	<p>Evidence provided by the planner in form of submission dates of the Quarter 4 report by the Water Unit to the Planning Department for consolidation, indicated that the report was submitted on the 16th of August 2018 which was after the expiry of the deadline of mid-July.</p>	<p>0</p>
<p>The District Water Department has acted on Internal Audit recommendation (if any)</p> <p>Maximum 5 for this performance measure</p>	<ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> If sector has no audit query score 5 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 	<p>The sector had one issue pointed out in the 4th Quarter regarding unaccounted for funds and the issue is yet to be received.</p> <p>One item was identified in Q3 regarding unaccounted for funds and there's no evidence this was rectified.</p> <p>One item was observed regarding unaccounted for funds and there is no evidence on how this was resolved.</p>	<p>0</p>
<p>Governance, oversight, transparency and accountability</p>			

<p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> 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 	<p>Verified evidence to confirm 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 included a review of minutes of council as follows:</p> <p>Council meeting of 26/09/2017, discussed water issues including; fencing of local water sources, surveying and titling of land where water sources would be located (Ref. Min. Ext. 07/ 1DC/09/2017.</p>	<p>3</p>
<p>The district committee responsible for water met, discussed service delivery issues and presented issues that require approval to Council</p> <p>Maximum 6 for this performance measure</p>	<ul style="list-style-type: none"> Evidence that the water sector committee has presented issues that require approval to Council: score 3 	<p>Verifiable evidence was presented to the Assessor by the Clerk to council in form of meetings of the Council committee responsible for water and it was revealed that issues that required Council's approval were tabled during the Council meetings as indicated below:</p> <p>Meeting of the 26th September 2017. Resolved issues pertaining to the need to fence off all local water sources and the need to acquire land titles for land where the water sources are located.</p> <p>Meeting of the 21/12/2017, resolved issues pertaining to surveying sites for water sources, training of water user committees and the need to hold meetings in villages that will be affected by the piped water project.</p> <p>Meeting of the 28/03/ 2018 approved the Annual Work Plans and Budgets for 2018/19 including plans and budgets for the water sector (Ref. Min. Ext. No. 23/3DC/03/2018.</p>	<p>3</p>

<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> 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. 	<p>From the District Notice boards, there was display of AWP, Budget and Water Grant releases and expenditures as per the PPDA Act. There was no evidence in form of minutes for advocacy meetings.</p>	<p>0</p>
<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> All WSS projects are clearly labelled indicating the name of the project, date of construction, the contractor and source of funding: score 2 	<p>All WSS projects were labelled indicating the name of the project, date of construction, source of funding but didn't indicate the contractor name and source of funding; For example;</p> <p>Village: Alengo Sub-county: Atiira District: Serere DWD NO: 69240 Date of completion: 6/01/2018</p> <p>Village: Kamusaka B Sub-county: Kateta District: Serere DWD No: 69242 Date of completion: 10/01/2018</p>	<p>0</p>

<p>The district Water department has shared information widely to the public to enhance transparency</p> <p>Maximum 6 points for this performance measure</p>	<ul style="list-style-type: none"> Information on tenders and contract awards (indicating contractor name /contract and contract sum) displayed on the District notice boards: score 2 	<p>There was display of information on tenders and contract awards, for example;</p> <p>Drilling, pump testing, casting, installation of five boreholes and 1 solar powered borehole (Ref; Sere 596/Wrks/17-18/00002), Contractor: ICON PROJECTS LTD, Contract sum: UGX: 147,620,096</p>	<p>2</p>
<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> If communities apply for water/ public sanitation facilities as per the sector critical requirements (including community contributions) for the current FY: score 1 	<p>Communities did apply for water/public sanitation facilities for the current FY, for example;</p> <ul style="list-style-type: none"> - Kakus-Igola village did request for repairing of borehole No. WDD 0946 in a letter dated; 22nd/07/2018. - Ben's foundation nursery and primary school Kamurojo did apply requesting for water and sanitation facilities in a letter dated 22nd August, 2018. - Madaka village did apply requesting for a new borehole in a letter dated 14th June, 2018. <p>Kobwakol-Okweny-village did apply for a deep borehole in a letter dated; 25th January, 2018.</p> <p>Some of the community contribution were;</p> <ul style="list-style-type: none"> -Madaka community Kadungulu, contribution of two hundred and two thousand five hundred shillings for deep borehole; receipt No: A 17619; Dated : 17/10/2017 -Akonyakinei B community, contribution of two hundred two thousand five hundred shillings for deep borehole; receipt No: A 17341; Dated: 22/08/2017 -Karomojo community, contribution of Two hundred two thousand five hundred shillings for construction of deep borehole; receipt No: A 17422 ; Dated: 12/09/2017 	<p>1</p>

<p>Participation of communities in WSS programmes</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> Water and Sanitation Committees that are functioning evidenced by either: i) collection of O&M funds, ii) carrying out preventive maintenance and minor repairs, iii) facility fenced/protected, or iv) they have an M&E plan for the previous FY: score 2 <p>Note: One of parameters above is sufficient for the score.</p>	<p>From the sampled water supply facilities in the villages of Alengo, Koromojo, Kamusala and Osigira - Oburi all were well fenced/ protected using strong tree cuttings</p>	<p>2</p>
<p>Social and environmental safeguards</p>			
<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> 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 	<p>The LG does environmental screening for all projects and EIAs conducted for all WSS projects and reports are in place; for example; environmental form on Drilling and pump testing on power solar boreholes.</p>	<p>2</p>
<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that there has been follow up support provided in case of unacceptable environmental concerns in the past FY: score 1 	<p>There is no evidence of follow up support provided in case of unacceptable environmental concerns in the previous FY.</p>	<p>0</p>

<p>The LG Water department has devised strategies for environmental conservation and management</p> <p>Maximum 4 points for this performance measure</p>	<ul style="list-style-type: none"> Evidence that construction and supervision contracts have clause on environmental protection: score 1 	<p>From the 3 sampled contracts, it was evident that the contracts have a clause on environmental protection</p>	<p>1</p>
<p>The district Water department has promoted gender equity in WSC composition.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> If at least 50% WSCs are women and at least one occupying a key position (chairperson, secretary or Treasurer) as per the sector critical requirements: score 3 	<p>From the progress report dated 10th October, 2017, it was evident that at least 50% of WSCs are women as per sector critical requirements. Women do take up some key positions especially the position of treasurer which is occupied by women in all water committee's</p>	<p>3</p>
<p>Gender and special needs-sensitive sanitation facilities in public places/ RGCs provided by the Water Department.</p> <p>Maximum 3 points for this performance measure</p>	<ul style="list-style-type: none"> If public sanitation facilities have adequate access and separate stances for men, women and PWDs: score 3 	<p>Public sanitation facilities had adequate access and separate stances for men, women and rumps for PWDs. For example the 10 -stance Public latrine at Kyere RGC had separate stances for both women and men and a ramp for People with Disabilities</p>	<p>3</p>