

LLG Assessment 2026

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Baitambogwe Subcounty

(Vote Code: 236740)

Score 62/100 *(62%)*

No.	Performance Measure	Scoring Guide	Score	Justification
Assessment area: A. Functionality of Parish Administrative Structures				
1	The LLG has ensured that there are functional PDCs/WDCs in all their respective Parishes/Wards Maximum score is 2	• Evidence that the LLG has duly constituted PDCs/WDCs with composition in accordance with the PDM Guidelines, and that PDCs are fully functional as evidenced by: (i) appraisal of all proposals submitted for the revolving funds; and (ii) monitoring and supervision of PDM investments; to ensure effective utilization of PDM funds by beneficiaries; during the previous FY for all parishes; score 2, else score 0.	0	The LLG did not satisfy the performance requirement regarding the constitution and full functionality of Parish Development Committees (PDCs) across all parishes during the previous financial year. A review of administrative and PDM governance records across the sub-county's seven (7) constituent parishes (Igeyero, Lugolole, lukono, Wainah, Katonte, Bute, and Bugodi) revealed critical documentation gaps and non-compliance against the assessment criteria: 1. PDC Constitution Lists: While PDC composition records were presented for five parishes, no official PDC lists were provided for lukone and Bute parishes. 2. Appraisal of Revolving Fund Proposals: No PDC meeting minutes or appraisal records evaluating revolving fund proposals were provided for any of the seven parishes. 3. Beneficiary Rosters: Enterprise beneficiary lists were missing for lukone and Bute parishes. 4. Monitoring & Supervision Reports: Field monitoring and supervision reports were absent for Igeyero parish. Because the assessment guidelines require complete compliance across all parishes within the LLG, the absence of PDC lists for lukone and Bute, the omission of monitoring reports for Igeyero, and the lack of proposal appraisal minutes across the board resulted in a result of Non-Compliant t.
2	LLG has ensured that all Parish Chiefs/Town Agents have collected, compiled, and analyzed data on Parish/community profiling as stipulated in the PDM Guidelines. Maximum score is 2	Evidence that all the Parishes/Wards in a LLG have compiled, updated, and analyzed data on community profiling disaggregated by village, gender, age, economic activity among others as stipulated in the PDM Guidelines, score 2 else score 0.	2	The Lower Local Government (LLG) successfully satisfied the national Parish Development Model (PDM) guidelines for compiling, updating, and analyzing village-level community profiling data. Assessment verification across all seven constituent parishes—Igeyero, Lugolole, lukone, Waina, Katonte, Bute, and Bugodi—confirmed that Parish Chiefs collected and maintained complete backup copies of baseline field data. Furthermore, cross-checks within the digital PDM Information System (PDMIS) verified that household profiling datasets were fully uploaded and integrated into the PDMIS platform.,

3	The LLG provided guidance and information to the Village Executive Committees and PDCs on strategies for the development of the parish Maximum score is 6	Evidence that the LLG: i. Has mapped NGOs, CBOs & CSO operating in the LLG and involved them in raising awareness about the PDM and planning cycle: score 2, or else 0	2	The LLG fully satisfied the performance requirement regarding the mapping and engagement of non-state actors in local planning and Parish Development Model (PDM) implementation. Verification of administrative documentation confirmed that the sub-county compiled formal mapping lists detailing Non-Governmental Organizations (NGOs), Community-Based Organizations (CBOs), and Civil Society Organizations (CSOs) operating within its jurisdiction. Furthermore, the provided records confirmed that these mapped organizations were actively involved in raising community awareness regarding the PDM framework and participating in the local government planning cycle.
		Evidence that the LLG provided guidance and information to the Village Executive Committees and to PDCs on: ii. Approved Programmes/activities to be implemented within the Parish for the current FY score 2, else score 0	0	The LLG failed to satisfy the performance requirement regarding the provision of guidance and information to Village Executive Committees and Parish Development Committees (PDCs) on approved parish-level programmes and activities for the current financial year. During the assessment exercise, no documentary evidence such as meeting minutes, attendance rosters, orientation reports, or official circulars was provided to verify that guidance was disseminated to village or parish administrative structures.
		Priority enterprises that can be implemented in the parish score 2 or else 0	2	The LLG fully satisfied the performance requirement regarding the provision of guidance and information on approved priority enterprises eligible for implementation at the parish level, Verification of field monitoring records and community enterprise groups, the assessment verified the existence and enterprise implementation of the Bukabambwe coffee Group located in Bukabambwe Village under Mulingilire Parish, alongside the Baitambogwe Farmer Group located in Baitambogwe Village under Bugodi Parish.
Assessment area: B. Planning and Budgeting				
4	The LLG conducted Annual Planning and Budgeting exercise for the current FY as per the Planning and Budgeting Guidelines Maximum score is 6	Evidence that prioritized investments in the LLG council approved Annual Work plan and Budget (AWPB) for the current FY: i. Is consistent with the LLG approved development plan IV; score 1 or else 0	0	The LLG demonstrated partial consistency in its capital planning, but ultimately failed to meet the statutory requirement for this performance indicator. Physical inspection of the current FY 2026/27 Annual Workplan and Budget (AWPB) confirmed the inclusion of opening and shaping the 2km Nakibizi–Bunwankyo Road, which aligns with the key road maintenance results outlined on page 81 of the draft LLG Development Plan IV. However, because Development Plan IV was never formally approved by the Council, the strategic baseline itself lacks legal effect. Under assessment criteria, budget alignment cannot be validated against an unapproved plan, resulting in an evaluation of Non-Compliant.

ii. Incorporates ranked priorities from all its respective parish submissions which are duly signed by the Parish Chief and PDC Chairperson; score 1 or else 0.	1	The LLG fully satisfied the performance requirement regarding the integration of ranked parish priorities into its Annual Workplan and Budget (AWPB), Documentary verification confirmed that all constituent parishes submitted ranked priority lists that were duly endorsed by both the respective Parish Chief and the PDC Chairperson. Specifically, for Lukone parish, community priorities submitted on 14th April 2026—officially signed by PDC Chairperson Mr. Odonga Joseph and Parish Chief Balaze Faizo explicitly identified the rehabilitation of the Nakibizi Road. Cross-examination of the FY 2026/27 AWPB verified that this priority was directly integrated into the sub-county budget under the Discretionary Development Equalization Grant (DDEG) allocation on page 59, demonstrating transparent, participatory bottom-up planning.
iii. Is based on the outcomes of the budget conference; score 1 or else 0	1	The LLG fully satisfied the performance requirement for aligning its Annual Workplan and Budget (AWPB) with the outcomes of its statutory Budget Conference, Verification of official Budget Conference documentation revealed that the conference convened on 13th /11/ 2025 (with formal minutes compiled and finalized in the report dated 30th November 2025). Cross-examination confirmed that key stakeholder recommendations specifically the prioritized shaping and grading of the 2km Nakibizi–Bunyankyiko Road—were directly adopted and budgeted for under the Discretionary Development Equalization Grant (DDEG) allocation in the approved FY 2026/27 AWPB.
iv. That the LLG budget includes investments to be financed by the LLG including projects funded using OSR; score 1, or else score 0.	1	The LLG fully satisfied the performance requirement to include capital investments directly financed through locally generated Own Source Revenue (OSR) within its operational budget, earning a score of Compliant / Fully Met. Cross-examination of the approved Annual Workplan and Budget (AWPB) for Financial Year 2026/2027 confirmed that the local government allocated UGX 1,500,000 from local revenue collections to fund planned capital investments of signposts on Nabalongops, Baitambogwe HC III (Nalongo kafuko martinty ward), wainah A- Bugodi A road.
v. Evidence that the LLG developed project profiles for all capital investments in the AWP and Budget as per format in NDP IV; score 1, or else score 0.	0	The LLG failed to meet the performance requirement regarding the development of project profiles for capital investments in accordance with the National Development Plan IV (NDP IV) format. During the assessment exercise, no project profiles whether for locally revenue-funded projects or grant-funded capital investments—were presented or provided to the assessors for physical verification.

		vi. That the LLG budget was submitted to the District/Municipality/City before 15th May; score 1 or else 0	1	The LLG presented documentation detailing the council approval and transmittal of its Annual Workplan and Budget (AWPB) for the 2026/2027 Financial Year. Council minutes confirm that the annual component budget was formally approved under Minute 9/BSC/05/2026 on Friday, 15th May 2026. Records from the Higher Local Government confirm that the budget was subsequently delivered to and received by the District Central Registry on 15th May 2026.
5	Procurement planning for the current FY: submission of request for procurement Maximum score is 2	Evidence that the LLG prepared and submitted inputs into the procurement plan for all the procurements to be done in a LLG for the current FY) to the CAO/TC by the 30th April of the previous FY, Score 2 or else score 0	0	The LLG failed to meet the performance requirement for the timely submission of procurement plan inputs, While procurement plan inputs for the current financial year were prepared by the Accountant, Nekesa Grace, on 15th May 2026, official submission and receipt by the District occurred on 13th July 2026. Because the statutory assessment guidelines mandate that procurement inputs must be submitted to the Chief Administrative Officer by 30th April of the preceding financial year, the submission was delayed by over two months past the mandatory statutory deadline.
6	Compliance of the LLG budget to DDEG investment menu for the current FY Maximum score is 2	Evidence that the investments in the approved LLG Budget for the current FY comply with the investment menu in the DDEG Grant, Budget and Implementation Guidelines, score 2 or else score 0	2	The LLG fully complied with the investment menu guidelines under the Discretionary Development Equalization Grant (DDEG) for the current financial year. Verification of the approved Annual Workplan and Budget confirmed a total DDEG allocation of UGX 48,670,281, out of which UGX 38,500,000 was budgeted directly for capital infrastructure investments. This represents an infrastructure allocation of approximately 80.0%, thereby satisfying and exceeding the mandatory national DDEG implementation guideline requiring a minimum of 80% of the grant to be invested in physical infrastructure projects.

Assessment area: C. Own Source Revenue Mobilization and Administration

7	LLG collected local revenue as per budget (Budget realization) Maximum score is 1	Evidence that the LLG collected OSR for the previous FY within +/- 10% of the budget; score 1 or else score 0.	1	The LLG successfully met the compliance criteria for Own Source Revenue (OSR) collection variance, Verification of the Annual Financial Statements for the previous financial year confirmed an approved local revenue budget target of UGX 102,440,000 against an actual realized revenue collection of UGX 109,035,579. This performance represents a 106.44% realization rate, reflecting a positive variance of +6.44%.

8	Increase in LLG own source revenues from last financial year but one to last financial year. Maximum score 1	Evidence that the OSR collected increased from previous FY but one to previous FY by more than 5 %, score 1 or else score 0	1	The LLG fully complied with the performance criterion requiring a greater than 5% annual growth in Own Source Revenue (OSR) collections, Annual financial Statement of 2026 confirmed that local revenue collections grew from UGX 27,509,574 in FY 2024/2025 to UGX 109,035,579 in FY 2025/2026. This represents an absolute increase of UGX 81,526,005, reflecting an exceptional year-on-year revenue expansion of 296.36%. Because this growth rate substantially surpasses the statutory threshold of >5%, the LLG earned full marks for this indicator.
9	The LLG has properly managed and used OSR collected in the previous FY Maximum score 4	Evidence that the LLG: i. Has remitted OSR to the administrative units, score 1 or else score 0.	1	Inspection of the Annual Financial Statements (AFS, Page 50) confirmed that the LLG remitted UGX 19,520,000 of collected local revenue to its lower administrative units under the Finance Department trial balance. The assessment team verified payment execution through supporting documentation, including Voucher No. 10/10/25 valued at UGX 17,520,000, confirming that revenue transfer obligations to lower administrative structures were fulfilled during the financial year.
		ii. Did not use more than 20% of the OSR (that was remitted to the LLG by the HLG) on councilors allowances in the previous FY (unless authority was granted by the Minister), score 1, else score 0	1	Review of financial records confirmed that the LLG strictly adhered to the statutory ceiling governing councilors' allowances. Against a total collected Own Source Revenue (OSR) base of UGX 109,035,579, the allowable 20% threshold for statutory allowances stood at UGX 21,807,116. Page 50 of the trial balance under Statutory Bodies recorded an actual expenditure of UGX 7,970,000, representing only 7.31% of total local revenue. Because expenditure remained well below the legal cap, the performance criterion was satisfied.
		iii. Have budgeted and used OSR funds on operational and maintenance in previous FY, score 1, else score 0	1	Verification of the FY 2025/2026 Annual Work Plan and Budget confirmed that the LLG budgeted for and utilized Own Source Revenue (OSR) on Operation and Maintenance (O&M) activities. The LLG allocated UGX 4,500,000 for the repair and maintenance of a public borehole in Nalwesambula at Kayima`s home, and that of lugolole A. Expenditure verification confirmed that UGX 4,500,000 was spent on borehole maintenance under Payment Voucher No. 20/10/2025. Additionally, the LLG spent UGX 800,000 from local revenue on repair and servicing of the Chairperson's motorcycle.
		iv. Publicised the OSR and how it was used for the previous FY, score 1, else score 0.	1	Physical inspection of the LLG public notice board confirmed adherence to financial transparency guidelines. The administration publicly displayed a detailed account of local revenue performance, reflecting total collections of UGX 109,035,379 for the previous financial year. The publication explicitly outlined key revenue deployments, including borehole repairs at 4.5m. The display of both revenue realization and expenditure allocation satisfies the public disclosure requirements in full

Assessment area: D. Financial Management

10	The LLG submitted annual financial statements for the previous FY on time Maximum score is 4	Evidence that the LLG submitted its Annual Financial Statement to the Auditor General (AG) on time (i.e. by August 31), score 4 or else score 0	4	Verification of submission receipts and acknowledgment documentation confirmed that the LLG fulfilled its statutory obligation regarding financial reporting. The LLG formally submitted its Annual Financial Statement for the financial year under review to the Office of the Auditor General on 31st August 2026. Because submission was executed on or before the statutory deadline of 31st August, the performance requirement was fully met.
11	The LLG has submitted all 4 quarterly financial and physical progress reports for the previous FY on time and in the prescribed format Maximum score is 6	Evidence that the LLG submitted all four quarterly financial and physical progress reports, for the previous FY to the LG Accounting Officer on time: i. Q1 by 15th October score 1 or else 0	1	Review of submission records and acknowledgment logs confirmed that the LLG complied with statutory reporting timelines for the first quarter of the financial year. The Quarter 1 financial and physical progress report was officially submitted to the Higher Local Government Accounting Officer on 13th October 2025, two days ahead of the statutory deadline of 15th October 2025.
		ii. Q2 by 15th January score 1 or else 0	1	Verification of dispatch records confirmed that the LLG submitted its second quarter financial and physical progress report within the prescribed timeframe. The Quarter 2 report was officially delivered to the Higher Local Government Accounting Officer on 13th January 2026, satisfying the requirement prior to the 15th January 2026 deadline.
		iii. Q3 by 15th April score 1 or else 0	1	Documentary evidence verified that the LLG satisfied the reporting requirements for the third quarter. The Quarter 3 financial and physical progress report was formally transmitted to the Higher Local Government Accounting Officer on 15th April 2026, fully meeting the statutory deadline date of 15th April 2026.
		iv. Q4 by 15th July score 3 or else 0	3	Submission reports and official acknowledgment receipts confirmed that the LLG met the end-of-year reporting requirement on time. The Quarter 4 financial and physical progress report was submitted to the Higher Local Government Accounting Officer on 13th July 2026, two days prior to the regulatory deadline of 15th July 2026

Assessment area: E. Human Resources Management for Improved Service Delivery

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	Appraisal of all staff in the LLG in the previous FY Maximum score is 6	Evidence that the SAS/Town Clerk appraised staff in the LLG: • All staff in the LLG including extension workers (where applicable) in the previous FY (by 30th June): score 2 or else 0	2	Personnel records submitted by the LLG confirm that the Senior Assistant Secretary (SAS) / Town Clerk completed performance evaluations for all 14 staff members including extension personnel (magoma agriculture officer was appriased by SAS Kiyanja Ismail on 30th/6/2026) prior to the 30th June deadline. With every officer on the establishment list duly evaluated for the previous financial year, the LLG fully satisfied statutory public service management requirements.
		• Primary School Head teachers in public primary schools in the previous school calendar year (by 31st December) – score 2 or else 0	0	Examination of HR records revealed a timeline deviation regarding the evaluation of public primary school headteachers. While assessment guidelines mandate that headteachers be appraised on a school calendar year basis (by 31st December), the LLG processed and finalized their appraisal reports on 30th June 2026 under a Financial Year schedule. Because the appraisals were not aligned with the required school calendar year timeline, the LLG failed to satisfy the specific timing benchmark for this indicator.
		• HC III & II In-charges in the previous FY (by June 30th) – score 2 or else 0.	0	Review of health sector personnel files identified a partial compliance gap in the annual evaluation of health facility in-charges for the preceding financial year. Although health facility heads are required to be duly appraised by 30th June, records show that the in-charge of Baitambogwe HCIII Mr. Gamban John was appraised by 30th june 2026 how ever, for both Namusenwa Health Centre II and Butte Health Centre II were not appraised by the SAS. Consequently, due to the missing evaluations for these two facilities, the LLG did not meet the mandatory deadline requirement for this performance area.
13				
	Staff duty attendance Maximum score is 6	Evidence that the LLG has • Publicized the list of LLG staff: score 2 or else 0	2	The LLG fully met the compliance criteria regarding the transparency and publication of its staff establishment, Physical verification confirmed that an official roster detailing all fourteen (14) LLG staff members was publicly displayed on the main notice board. Having satisfied the statutory public display requirement in full, the LLG secured the maximum mark.
		• Produced monthly analysis of staff attendance with recommendations to CAO/TC score 2 or else 0	2	The LLG fully satisfied the compliance requirements for monitoring staff attendance and submitting regular administrative feedback. Verification of personnel records confirmed that monthly staff attendance analyses along with corresponding actionable recommendations were systematically generated and submitted to the Chief Administrative Officer / Town Clerk (CAO/TC) for administrative review and management follow-up.

		• CAO/Tc took action on recommendations; score 2 or else 0	2	The LLG fully satisfied the compliance criteria regarding executive follow-up on staff attendance monitoring. Verification of administrative records confirmed that the Chief Administrative Officer systematically acted upon the recommendations generated from monthly attendance reports. Specifically, documentary evidence demonstrated that disciplinary follow-up was executed, including the formal submission and recommendation of one non-compliant officer to the District Service Commission (DSC) for appropriate disciplinary proceedings.

Assessment area: F. Implementation and Execution

14	The LLG has spent all the DDEG funds for the previous FY on eligible projects and activities Maximum score is 2	Evidence that the LLG budgeted and spent all the DDEG for the previous FY on eligible projects and activities as per the DDEG grant, budget, and implementation guidelines: Score 2, or else score 0	2	The LLG fully complied with the performance requirement regarding the utilization of Discretionary Development Equalization Grant (DDEG) funds on eligible projects during the previous Financial Year. Verification of financial records confirmed that DDEG funds totaling UGX 46,000,000 were fully absorbed across approved administrative and infrastructure investments: Administrative Facility Improvement: Renovation and painting of the administrative block, executed via Voucher No.6/5/ 2025) for UGX 16,000,000. Road Infrastructure Rehabilitation: Rehabilitation of local access roads, funded via Voucher No.1/10/2025) for UGX 16,000,000 and a subsequent voucher for UGX 15,000,000. A comparative review against the national DDEG Implementation Guidelines confirmed that administrative block maintenance/painting and rural road rehabilitation fall squarely within the eligible investment menu.

15	The LLG spent the funds as per budget Maximum score is 2	Evidence that the execution of budget in the previous FY does not deviate for any of the sectors/main programs by more than +/-10%: Score 2 or else 0	0	The LLG failed to satisfy the performance requirement that budget execution across all sectors/main programs remain within the allowable variance threshold of +/_10%. A sectoral review of approved budgets versus actual expenditures for the previous Financial Year in the AFS trail balance revealed significant budget execution deviations across multiple departments as follows; Management: Budgeted UGX 43,448,500 vs. Spent UGX 48,965,000 (+12.70% — Non-Compliant), Council & Statutory Bodies: Budgeted UGX 5,980,000 vs. Spent UGX 2,683,000 (-55.13% — Non-Compliant), Production: Budgeted UGX 13,500,000 vs. Spent UGX 5,500,000 (-59.26% — Non-Compliant), Education: Budgeted UGX 2,200,000 vs. Spent UGX 1,850,000 (-15.91% — Non-Compliant) Finance: Budgeted UGX 71,849,947 vs. Spent UGX 67,816,122 (-5.61% — Compliant)Health: Budgeted UGX 6,900,000 vs. Spent UGX 6,745,000 (-2.25% — Compliant)Works and Engineering: Budgeted UGX 63,748,543 vs. Spent UGX 59,322,485 (-6.94% — Compliant) Because four out of the seven sector budgets sampled deviated by more than the allowable +/_10% margin (ranging from severe under-absorption in Production, Council, and Education to over-spending in Management), the LLG failed the compliance standard.
16	Completion of investments as per annual work plan and budget Maximum score is 3	Evidence that the investment projects planned in the previous FY were completed as per work plan by end of FY (quarter four) : Note 3: Refer to the completion rate computation table at the end of the Manual If more than 90 % was completed: Score 3 If 70% -90%: Score 2 If less than 70 %: Score 0.	0	The LLG failed to satisfy the performance requirement regarding the timely completion of planned investment projects for the previous Financial Year. According to the assessment guidelines, project completion rates are evaluated against the approved annual work plan at the end of Quarter 4, the LLG failed to present any documentary or physical evidence such as certificates of completion, final monitoring reports, or project hand-over reports to demonstrate the status or completion rates of its planned capital investments. In the absence of verifiable proof, the completion rate could not be substantiated and defaults to below the minimum threshold.

Assessment area: G. Environmental and Social Safeguards

17	The LLG has implemented Environmental and Social Safeguards during the previous FY Maximum score is 2	Evidence that the LLG carried out Environmental, Social and Climate Change Screening where required, prior to implementation of all planned investments/ projects, score 2 or else score 0	0	The LLG failed to satisfy the performance requirement regarding environmental, social, and climate change risk management prior to project implementation. Under standard local government assessment guidelines, all planned capital investments must undergo formal Environmental, Social, and Climate Change Screening (ESCS) prior to commencement to identify potential impacts and outline mitigation measures. During the verification exercise, the LLG provided no documentary evidence such as completed screening forms, environmental management plans, or screening clearance certificates for any of its planned capital projects.
18	The LLG has an Operational Grievance Handling Mechanism Maximum score is 2	If the LLG has specified a mechanism for i) recording, ii) investigating and iii) responding to grievances which includes a designated person to coordinate response to feed-back, complaints logbook with clear information and reference for onward action, a defined complaints referral path, and public display of information at LLG offices Score 1 or else 0	1	The LLG met the performance requirement for establishing a functional Grievance Redress Mechanism (GRM) capable of recording, investigating, and responding to feedback. Documentary and physical verification confirmed that the LLG has designated committee personnel (formal appointment letters on file naming Mr. Kiyanja Ismeal as Chairperson), complete grievance logbooks with actionable tracking details, a clear complaints referral path (including dedicated pathways for child protection), publicly displayed information on office notice boards, and active quarterly meeting minutes documenting grievance investigations.
		If the LLG has publicized the grievance redress mechanisms so that aggrieved parties know where to report and get redress score 1 or else 0	1	The LLG fully satisfied the performance requirement regarding the publicization of its Grievance Redress Mechanism (GRM) to ensure aggrieved community members know where to submit complaints and seek redress. Physical inspection of the LLG premises confirmed that clear, public-facing information detailing the grievance reporting procedures was displayed on the official notice board. This public display specifically included the direct contact phone numbers of the appointed Grievance Redress Committee members, enabling accessible reporting, transparent referral, and prompt community follow-up.
19	The LLG has a functional land management system Maximum score 1	If the LLG has a functional Area Land committee in place to assist the LG Land board in an advisory capacity on matters relating to land, including ascertaining rights on the land score 1 or else 0	0	The LLG received did not provide any evidence for the Area Land Committee functionality indicator, as it failed to present any documentary evidence to the assessment team. Statutory regulations under the Land Act mandate that every Lower Local Government maintain a functional Area Land Committee to assist the Land Board in an advisory capacity and ascertain land rights; without council approval minutes, appointment records, or land inspection reports, compliance could not be established.

Assessment area: H. Basic (Pre & Primary) Education services Management (in public and private schools)

20	Awareness campaigns and mobilization on education services conducted in last FY Maximum score is 3	Evidence that the LLG has conducted awareness campaigns and parent's mobilization for improvement of education service delivery score 3, else score 0	0	The LLG failed to satisfy the performance requirement regarding community awareness campaigns and parental mobilization aimed at improving education service delivery across the sub-county. Under the assessment criteria, the LLG is required to present verifiable documentary evidence such as community sensitization reports, School Management Committee (SMC) mobilization meeting minutes, attendance lists, or official awareness activity reports demonstrating active engagement with parents on school enrollment, attendance, and educational support. Because no documentary evidence was made available to the assessment team during the verification exercise, the indicator was evaluated as Non-Compliant
21	Monitoring of service delivery in basic schools Maximum score is 4	Evidence that the LLG has monitored schools (both public and private) at least once per term in the previous 3 terms and produced a list of issues requiring attention of the committee responsible for education of the LLG council in the previous FY: If all schools (100%) - score 4 If 80 – 99% – score 2 If 60 to 79% score 1 Below 60% score 0	0	The LLG failed to meet the performance requirement regarding the routine quarterly monitoring of primary and secondary schools within its jurisdiction and the submission of identified education issues to the responsible council committee. Institutional inventory confirms that the LLG comprises (17 primary schools and 2 secondary schools) government schools. However, No school was monitored at least once per term across the three terms of the previous financial year, backed by field monitoring reports and official committee meeting minutes showing that issue lists were presented for council action.
22	Existence and functionality of School Management Committees Maximum score is 3	Evidence that the LLG have functional school management committees in all schools; score 3, else score 0	3	The LLG fully satisfied the performance requirement regarding the functionality of School Management Committees (SMCs) across all educational institutions within its jurisdiction. Verification of governance records confirmed that functional SMCs are established across all 17 primary schools in the LLG. The assessment team inspected official records and verified that meeting minutes were available for all 17 schools, confirming that regular committee sittings were held during the financial year to perform statutory oversight, monitor school administration, and manage educational service delivery.

Assessment area: I. Primary Health Care Services Management

23	Awareness campaigns and mobilization on primary health care conducted in last FY Maximum score is 3	Evidence that the LLG has conducted awareness campaigns and mobilized communities for improved primary health care service delivery score 3, else score 0	3	The LLG achieved a Compliance for the Primary Health Care (PHC) awareness and mobilization indicator, Verification of health management records confirmed that community sensitization campaigns and health mobilization drives were consistently conducted across all four quarters of FY 2025/2026 (Q1: July–Sept 2025, Q2: Oct–Dec 2025, Q3: Jan–Mar 2026, and Q4: Apr–Jun 2026), backed by activity reports for each quarter.
24	The LLG monitored health service delivery at least twice during the previous FY Maximum score is 4	Evidence that LLG monitored aspects of health service delivery during the previous FY , score 4 or else score 0	0	The LLG failed to satisfy the performance requirement regarding the routine monitoring of health service delivery within its jurisdiction during the previous financial year. The LLG technical administration and relevant sector committees are required to conduct regular supervisory and monitoring visits to health facilities, documented through written monitoring reports, inspection checklists, and issue tracks submitted to the executive committee for corrective action. During the evaluation, the assessment team requested evidence of health sector monitoring conducted throughout the financial year. Because no documentary evidence, supervisory or health monitoring reports were presented by the LLG, the indicator was assessed as Non-Compliant / Not Met
25	Existence and functionality of Health Unit Management Committee Maximum score is 3	Evidence that the LLG have functional Health unit Management Committee for all Health Facilities in the LLG; score 3, else score 0	3	The LLG satisfied the performance requirement regarding the functionality of Health Unit Management Committees (HUMCs) across all government health facilities within its jurisdiction. Verification of health facility governance records confirmed that operational HUMCs are established and active across all three (3) government health centers in the LLG, with meeting minutes verified for each facility during the financial year: 1. Butiambogwe Health Center III: HUMC meeting minutes verified (sitting dated 29th September 2025). 2. Butte Health Center II: HUMC meeting minutes verified (sitting dated 25th March 2026). 3. Namusenwa Health Center II: HUMC meeting minutes verified (sitting dated 29th June 2026). Because every government health facility in the LLG demonstrated evidence of functional HUMC meetings during the financial year, the indicator achieves 100% facility coverage and is evaluated as Compliant / Met.

Assessment area: J. Water & Environment Services Management

26	Evidence that the LLGs submitted requests to the DWO for consideration in the current FY budgets Maximum score is 3	Evidence that the SAS submitted in writing requests to the DWO for consideration in the planning of the current FY score 3, else score 0	3	The LLG satisfied the performance requirement regarding the timely submission of written water requests to the Higher Local Government for incorporation into the District planning cycle for the current financial year. Verification of administrative correspondence and sector planning records confirmed that the Senior Assistant Secretary (SAS) submitted written water priority requests to the District Water Officer (DWO). The written communication, dated 15th March 2026, fell within the mandatory statutory deadline required for integrating Lower Local Government (LLG) priority water investments into the District Water Office Budget Framework Paper (BFP) and annual work plan for the current FY.
27	The LLG has monitored water and environment services delivery during the previous FY Maximum score is 3	Evidence that SAS monitored/supervised aspects of water and environment services during the previous FY including review of water points and facilities, score 3 or else score 0	0	The LLG did not meet the performance criteria, as no documentary evidence such as field inspection reports or review minutes—was presented to prove that the Senior Assistant Secretary (SAS) monitored or supervised water points and environmental facilities during the previous financial year.
28	Existence and functionality of Water and Sanitation Committees Maximum score is 2	Evidence that the LLG have functional Water and Sanitation Committees (including collection and proper use of community contributions) score 2, else score 0	0	The LLG did not meet the performance requirement, as no documentary evidence such as WSC meeting minutes or O&M financial records was provided to prove the presence of functional Water and Sanitation Committees managing community contributions and facility maintenance.
29	Functionality of investments in water and sanitation facilities Maximum score is 2	Evidence that the SAS has an updated list on all its water and sanitation facilities (public latrines) and functionality status. Score 2 else 0	0	The LLG did not meet the performance criteria, as no documentary evidence such as an updated facility inventory or functionality matrix was provided to prove that the Senior Assistant Secretary (SAS) maintains a current list of water points, public latrines, and their operational statuses.

Assessment area: L. Production Services Management

34	Up to date data on agriculture and irrigation collected, analyzed and reported Maximum score is 2	If the LLG extension staff have collected, analyzed and reported data on agriculture (i.e. crop, animal and fisheries) and irrigation activities including production statistics for key commodities, data on irrigated land, farmer applications, farm visits etc as per formats, the reports compiled and submitted to LG Production Office; score 2 or else 0.	2	The LLG fully satisfied the performance requirement for collecting, analyzing, and reporting comprehensive agricultural data (covering crop, animal, and fisheries sub-sectors) to the Higher Local Government. Review of sector submissions confirmed that LLG extension staff gathered key production statistics, field visit logs, and commodity data according to prescribed formats and submitted formal reports to the District Production Office as follows: 1. Crop Extension: Crop production and harvest statistics report submitted on 28th June 2026. 2. Veterinary Services: Animal husbandry and livestock activity report submitted on 17th June 2026. 3. Fisheries Sector: Fisheries and aquaculture performance report submitted on 2nd August 2026.
35	Farmer awareness and mobilization campaigns carried out through farmer field days and awareness meetings Maximum score is 2	If the LLG has carried out awareness and mobilization campaigns on all aspects of agriculture through farmer field days and awareness meetings, exchange visits, reports compiled and submitted to LG Production Office score 2 or else 0	2	The LLG fully satisfied the performance requirement regarding awareness and mobilization campaigns across agricultural sectors (including farmer field days, awareness meetings, and extension sensitization sessions). Physical verification of sub-county sector submissions to the District Production Office confirmed that extension officers conducted campaigns and submitted comprehensive activity reports as detailed below: Fisheries Sector Awareness Reports: Awareness and sensitization report dated 2nd May 2026 (Page 2). Crop Sector Awareness Reports: 1. Extension awareness report dated 11th February 2026 (Page 2). 2. Quarter 3 awareness report dated 30th June 2026. 3. Quarter 4 awareness report dated 15th August 2025. Veterinary (Livestock) Awareness Reports: 1. Livestock awareness report dated 31st February 2025 (as recorded) (Pages 1–2). 2. Animal health awareness report dated 31st March 2026 (Pages 3–5). 3. Quarter 4 livestock awareness report dated 30th June 2026 (Page 2). 4. Extension mobilization report dated 30th September 2026 (Page 2).

36	The LLG has carried out monitoring activities on production activities for crops, animals and fisheries Maximum score is 2	If the LLG extension staff has implemented monitoring activities on agricultural production for crops, animal and fisheries covering among others irrigation, environmental safeguards, agricultural mechanization, postharvest handling, pests and disease surveillance, equipment installations, farmers implementing knowledge from trainings, reports compiled and submitted to LG Production Office; score 2 or else 0	2	The LLG fully satisfied the performance requirement for implementing and reporting monitoring activities on agricultural production across crop, livestock, and fisheries sectors (including irrigation, environmental safeguards, postharvest handling, and pest/disease surveillance). Physical verification of compiled monitoring reports submitted to the Higher Local Government Production Office confirmed active field supervision and reporting across all sub-sectors as below: 1. Fisheries Sub-Sector: Field monitoring and environmental supervision report dated 24th July 2026 (Evidence verified on Page 1-5). 2. Crop and Livestock (Veterinary) Sub-Sectors: Integrated monitoring and environmental safeguards report dated 29th February 2026 (as recorded) (Evidence verified on Pages 1 and 7).
37	Farmer trainings through training farmer field schools and demonstrations organized and carried out Maximum score is 2	If the LLG extension staff has carried out farmer trainings on irrigated agriculture, agronomy, pests and diseases management, operation and maintenance of equipment, linkage to markets etc. through for example farmer field schools, demonstrations, and field training sessions, reports compiled and submitted to LG Production Office score 2 or else 0.	2	The LLG fully satisfied the performance requirement for conducting, compiling, and submitting reports on farmer capacity-building and field training sessions to the District Production Office. Verification of sub-county agricultural extension records confirmed that extension staff conducted practical training sessions for farmers covering agronomy, pest and disease control, equipment maintenance, and market linkage strategies and formally submitted the compiled activity reports to the Higher Local Government Production Office on 26th June 2026.

38	The LLG has provided hands-on extension support to farmers and farmer organizations / groups Maximum score is 2	If the LLG extension staff have provided extension support to farmers and farmer groups on crop management, aquaculture, animal husbandry, irrigation, Operation and Maintenance of equipment, postharvest handling, value addition, marketing etc. reports compiled and submitted to LG Production Office score 2 or else 0	2	The LLG fully satisfied the performance requirement for providing technical extension support to individual farmers and farmer groups across crop management, animal husbandry, aquaculture, and postharvest handling. Verification of field extension files submitted to the Higher Local Government Production Office confirmed active farm visits, supervisory sessions, and group advisory services across sub-sectors: Crop Farm Extension Support Reports: 1. Farm advisory visits report dated 12th May 2026. 2. Follow-up extension support report dated 24th July 2026. Crop Extension Support Reports: 1. Farmer support and field advisory report dated 11th February 2026. 2. Crop management and farm visits report dated 26th February 2026. Veterinary & Livestock Extension Reports: 1. Supervisory and livestock farm visits report dated 31st October 2025. 2. Extension field supervision report dated 30th November 2025. 3. Animal husbandry and farmer advisory report dated 31st March 2026.