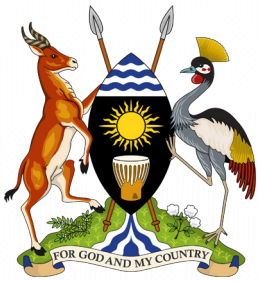
REPUBLIC OF UGANDA

MINISTRY OF HEALTH

KEY PERFORMANCE INDICATORS FOR ENVIRONMENTAL HEALTH WORKERS IN LOCAL GOVERNMENTS

DECEMBER 2024



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Contents

ACRONYMS AND ABBREVIATIONS

ACHO-EH	Assistant City Health Officer - Environmental Health
ADHO-EH	Assistant District Health Officer - Environmental Health
AMHO-EH	Assistant Municipal Health Officer - Environmental Health
AEO	Assistant Entomological Officer
CHO	City Health Officer
EHD	Environmental Health Department
EHO	Environmental Health Officer
DHIS2	District Health Information System version 2.0
DHO	District Health Officer
HA	Health Assistant
HACCP	Hazard Analysis and Critical Control Points
HCFs	Health Care Facilities
HI	Health Inspector
KPIs	Key Performance Indicators
MDAs	Ministries, Departments and Agencies
MHO	Municipal Health Officer
NDP	National Development Plan
NHP	National Health Policy
NTD	Neglected Tropical Diseases
PHC-NWR	Primary Health Care Non-Wage Recurrent
PDM	Parish Development Model
PEHO	Principal Environmental Health Officer
SEHO	Senior Environmental Health Officer
SDGs	Sustainable Development Goals
WASH	Water Sanitation and Hygiene

FOREWORD

The Government of Uganda has prioritized improving the health status of the Ugandan population through various health service delivery interventions. This has greatly improved most health indicators over the past years. However, certain indicators such as those for environmental health service delivery remain unsatisfactory, resulting in a big burden of disease in the country.

Recent outbreaks have demonstrated the direct link between the health of populations, the environment, animals, and socio-economic systems. These have necessitated the critical need to focus on preventive healthcare services as highlighted in the Second National Health Policy which emphasizes health promotion, disease prevention, early diagnosis, and treatment of diseases. Preventable ailments still account for over 75% of Uganda's disease burden with the main drivers being limited access to safe water, sanitation and hygiene, poor housing and indoor air quality, poor waste management, and poor food hygiene and safety, among others. The high preventable disease burden is also partially attributed to the low performance of Environmental Health professionals due to a lack of clear and measurable performance targets and indicators.

These Key Performance Indicators (KPIs) therefore aim at enhancing the performance of environmental health cadres who play a critical role in disease prevention and health promotion. They are intended to reinforce the existing job descriptions and enhance continuous performance improvement among the Environmental Health professionals.

The Ministry of Health shall continuously support, monitor, and evaluate the performance of Environmental Health cadres using these KPIs to ensure that the strategic intervention of disease prevention and control is achieved.

I implore all Accounting Officers and Health Managers to adopt and functionalize these KPIs to ensure improved environmental health service delivery .

For God and My Country.

Dr. Diana Atwine

PERMANENT SECRETARY

PREFACE

It's with great pleasure that I present the Key Performance Indicators (KPIs) for Environmental Health professionals in the country. This document will offer strategic guidance for harmonized implementation and continuous monitoring of key environmental health interventions.

Performance measurement is one of the critical roles of the Ministry of Health aimed at accelerating universal health coverage through tracking the impact of health interventions and increasing mutual accountability. This resonates with the Ministry of Health's Strategic Plan, 2020–2025, and the Second National Health Policy goals and objectives. These prioritize increased productivity of human resources for health through effective and efficient utilization of health personnel, and the provision of an enabling environment for effective health service delivery.

These KPIs have been specifically developed to support the improvement of health service delivery with a focus on preventive healthcare interventions, which is a golden opportunity for enhancing population health outcomes.

The implementation of the Key Performance Indicators for Environmental Health cadres will ultimately support the country's aspiration to strengthen preventive healthcare services to reduce the disease burden through improved performance of Environmental Health professionals.

For God and My Country.

Dr. Charles Olaro

AG. DIRECTOR GENERAL HEALTH SERVICES

ACKNOWLEDGMENT

The Department of Environmental Health in the Ministry of Health is mandated to oversee and ensure quality implementation of sanitation, hygiene, health inspection, and vector control services to contribute to the reduction in the disease burden. These key performance indicators will guide 5,132 Environmental health professionals at sub-national levels to deliver quality preventive healthcare services.

The Ministry of Health immensely applauds the Government of Uganda and the Development partners for the financial and technical support that enabled the development of these key performance indicators.

We are grateful to the Ministry of Health's Top leadership and technical staff in the various departments, line Ministries, Departments, and Agencies (MDAs) for the support rendered during the process. Our sincere gratitude also goes to the technical staff from the selected Districts, Cities, and Municipalities who actively contributed to the development of these KPIs including Health inspection Tools and Checklists.

Your insightful comments and contributions were significant to the development of these KPIs.

I call upon all responsible officers, health managers, and Implementers to refer to these KPIs in their routine practice to guide their performance..

Dr. Herbert Nabaasa

COMMISSIONER, HEALTH SERVICES (ENVIRONMENTAL HEALTH)

INTRODUCTION AND BACKGROUND

Introduction to the Key Performance Indicators

The Government of Uganda has prioritized the improvement of the health status for Ugandans as evidenced by various existing legal and institutional frameworks. For instance, the 1995 Constitution of the Republic of Uganda stipulates that every Ugandan has the right to a clean and healthy environment and that people should be involved in the formulation and implementation of development programs that affect them. Additionally, the Second National Health Policy focuses on health promotion, disease prevention, early diagnosis, and treatment of diseases. These frameworks are aligned with the Global Strategy on Health, Environment and Climate Change which aims to provide a framework to respond to environmental health risks and challenges by 2030. This aims to ensure safe, enabling, and equitable environments for health by transforming our way of living and working. It's also important to note that the improvement of environmental health services contributes to the attainment of 7 SDGs, specifically, 19 targets and 30 indicators.

Rationale for the Development of the Key Performance Indicators

In Uganda, preventable ailments still account for over 75% of Uganda's disease burden. Notably, ten conditions that largely contribute to the country's disease burden, including malaria, cough or cold, Urinary Tract Infections (UTIs), intestinal worms, gastro-intestinal worms, skin diseases, acute diarrhea, and pneumonia are directly linked to poor environmental health. Furthermore, recent epidemics have proven the direct link between the health of populations, the environment, animals, and socio-economic systems. Environmental health interventions and the development of the KPIs for the EH professionals are therefore key vessels to the success of the Second National Health Policy and Ministry of Health's Strategic Plan, 2020–2025.

The move to strengthen environmental health service delivery through, alongside other interventions, the development and operationalization of the KPIs is therefore critical in tracking impact of health interventions and increasing mutual accountability thus accelerating universal health coverage.

Background of the Key Performance Indicators

The Environmental Health discipline entails the prevention of disease through the control of biological, chemical, physical, social, and psychosocial factors in the environment (water, soil, housing, air, and food) which may have an impact on the well-being of people.

Environmental health interventions are often cost-effective, reduce healthcare costs, and improve productivity, thereby reducing the significant economic burden of disease in addition to improving the length and quality of people's lives.

In Uganda, Environmental Health (EH) is one of the oldest professions practiced even before the country gained its independence, with practitioners playing several roles regarding health promotion and disease prevention. Environmental health practice has evolved over the years in many aspects including delivery models mainly attributed to the changing environment and introduction of new technology.

The Environmental Health Department of the Ministry of Health is mandated to oversee and ensure quality implementation of sanitation, hygiene, health inspection, and vector control services to contribute to the reduction in morbidity and mortality rates in the country. The main strategic interventions implemented by the EH professionals at lower local governments include but are not limited to:

- Promotion of safe water, sanitation, and hygiene interventions in communities and institutions (health care facilities, schools, markets, etc.).
- Promotion of food hygiene and safety.
- Ensuring proper solid and liquid waste management.
- Supporting disease outbreak response, community disease surveillance, and other public health emergencies.
- Conducting routine inspections of premises to ensure compliance with the Public Health Act.
- Supporting vector-borne and NTDs control.
- Climate change and health interventions for a resilient health systemt.

With all these capabilities, there has been growing concern over time regarding the low performance of EH professionals across local governments, with the main hindrance being the lack of clear measurable key performance indicators. As such, the health of people in many communities continues to be negatively impacted in various ways. This is reflected in the current poor morbidity indicators where the environmental health-related diseases account for the top 10 conditions in the country.

Bearing in mind the fact that Environmental Health is the engine and springboard for enhancing preventive care, it's of paramount importance that EH professionals are supported to lower this disease burden.

Current Status of Key Environmental Health Indicators in Uganda

Over time, there has not been a deliberate move to track critical environmental health indicators, as such only a few have been tracked nationally as highlighted below.

Regarding WASH in healthcare facilities, 4.1% have access to advanced levels of sanitation, while 4.7%, 81.5%, and 9.7% have access to basic, limited, and no service, respectively. Hygiene coverage stands at 20.7% with advanced levels, 46.7% with basic, 20.6% with limited, and 11.9% with no service. Environmental cleanliness stands at 20.6%, 7.7% 39.8%, and 31.9% for advanced, basic, limited, and no service levels. Waste disposal is at 23.4%, 55.7%, 17.8%, and 3.1% for advanced, basic, limited, and no service levels.

Similarly, at the community level, open defecation stands at 23% and 9.4% in rural and urban areas, respectively. Additionally, whereas access to any form of sanitation in rural is at 77% and 90.6 % for urban areas, only 36% of the community have basic sanitation services, 24% of which are in rural and 47.9% are in urban. Furthermore, safely managed sanitation in the country stands at 8.2% and 40.7% for rural and urban, respectively. Notably, hand washing in rural is at 35.8% and 53.8% for urban areas.

In primary schools, the pupil-to-stance ratio for girls is 68:1 while for boys it is 72:1. Similarly, in secondary schools, the pupil-to-stance ratio for girls is 48:1 and 51:1 for boys. Hand washing in primary schools is at 56% while in secondary schools it's at 67%. Access to water in primary schools is at 58% whereas in secondary school stands at 73%.

In regard to solid waste management, in Kampala alone, out of 1,200-1,500 tons of garbage generated daily, only 40% of these wastes is collected, leaving 60% of these wastes unaccounted for and hence indiscriminately disposed of.

With these statistics, the country is still constrained from achieving its goal of attaining health for all. Efforts geared towards enhancing environmental health service delivery through performance monitoring will go a long way in accelerating the key health indicators..

Legal Framework for Environmental Health Service Delivery

The existing legal framework in Uganda is well-developed and articulates the Government's aspirations for improvements that contribute to environmental health across the country.

For instance, the 1995 Constitution of the Republic of Uganda stipulates that every Ugandan has the right to a clean and healthy environment and that people should be involved in the formulation and implementation of development programs that affect them. This is further reinforced by the Public Health (Amended) Act, Cap 310 of 2024, which consolidates the law regarding the preservation of public health including food safety, water safety, management of nuisances, and safe housing to control infectious diseases, among others.

Furthermore, the Second National Health Policy that focuses on health promotion, disease prevention, early diagnosis, and treatment of diseases highlights environmental health interventions as a key vessel to improved health outcomes.

The National Environmental Health Policy, 2005 highlights the environmental health priorities of the Government of Uganda and provides a framework for the development of environmental health services and programs at national and local government levels.

Relatedly, the country has other legislations/regulations including the Occupational Safety and Health Act (2006), Food and Drugs Act (Cap.278), Local Governments (Amendment) Act (2005), Water Act (1997), Tobacco Control Act (2015), National Environment (Noise Standards and Control) Regulations (2003), Environmental Impact Assessment Regulations (1998), National Environment Act (2019) and the Kampala Capital City Authorities Act (2011) which establishes and makes provisions for the governance of the capital city with focus on safeguarding and promoting public health.

Lastly, the NDP III and Vision 2040 aim at ensuring **"a transformed Ugandan Society from a peasant to a modern and prosperous country within 30 years"** with an overall goal to ensure increased household incomes and improved quality of life for all Ugandan citizens. Environmental Health interventions are pivotal in contributing to this noble cause.

Institutional Framework for Environmental Health Service Delivery

The Ministry of Health oversees policy development, implementation, and coordination of environmental health interventions across the country. At the sub-national level, over

170 local governments including cities and municipalities are responsible for the implementation of environmental health interventions across the country. These Local Governments are mandated to support efforts geared towards reducing the burden of disease under the decentralization system of governance. At local governments, the District Health Officers, City Health Officers, and Principal Medical Officers are responsible for the overall planning, implementation, and monitoring of health services in Districts, Cities, and municipalities, respectively. The Assistant District Health Officers-Environmental Health (ADHO-EH), Principal Health Officer-Environmental Health (PHO-EH), and Senior Environmental Health Officers (SEHOs) are tasked with the mandate of ensuring effective environmental health services delivery for the well-being of the population of the districts, cities and municipalities.

At the National Referral Hospital, Health Inspectors (HIs) and Health Assistants (HAs) are charged with the responsibility of delivering quality EH services to the population.

At Regional Referral Hospital, Senior Environmental Health Officers (SEHO) are charged with the responsibility of delivering quality EH services to the population.

At General Hospital, Environmental Health Officers (EHO), and Health Inspectors (HI) are charged with the responsibility of delivery of quality EH services to the population. Similarly, the Assistant Entomological Officers (AEOs) are charged vector borne and neglected tropical disease control.

At Health Center IV, Senior Environmental Health Officers (SEHOs), Environmental Health Officers (EHOs), and Health Inspectors (HIs) are charged with the responsibility of delivering quality EH services to the population. Similarly, the Vector Control Officers (VCOs) are charged with vector-borne and neglected tropical disease control.

At Health Center III, Health Inspectors (HIs) and Health Assistants (HAs) are charged with the responsibility of delivering quality EH services to the population. Similarly, the Assistant Entomological Officers (AEOs) are charged with vector-borne and neglected tropical disease control.

At the municipality level, Health Inspectors (HIs) and Health Assistants (HAs) are charged with the responsibility of delivering quality EH services to the population.

In Town Councils, Senior Health Inspectors (SHIs), Health Inspectors (HIs), and Health Assistants (HAs) are charged with the responsibility of delivering quality EH services to the population.

At the city division level, Senior Environmental Health Officers (SEHOs), Environmental Health Officers (EHOs), Health Inspectors (HIs), and Health Assistants (HAs) are charged with the responsibility of delivering quality EH services.

Purpose and Scope of the Key Performance Indicators

Purpose of the Key Performance Indicators

The KPIs are designed to track the impact of environmental health interventions and increase mutual accountability; thus, accelerating universal health coverage and strengthening preventive healthcare services for reduced disease burden in the country.

Scope of the Key Performance Indicators

i. Thematic Areas

1. Water, Sanitation, and Hygiene (Households, health care facilities, learning institutions, and other public places, water quality monitoring and waste management).
2. Health inspection and compliance.
3. Food hygiene and safety.
4. Vector-borne and Neglected Tropical Diseases (NTDs) control.
5. Climate change and health.

ii. Timeframe for the Implementation of the Key Performance Indicators

The KPIs will guide performance monitoring for 5 years, from FY 2024/25 to 2028/2029.

iii. Users of the Key Performance Indicators

These performance indicators have been developed for use by the different Environmental Health and Vector Control cadres as reflected in the approved Schemes of Service under the Uganda Public Service, including;

a) Environmental Health Cadres

- Assistant District Health Officer-Environmental Health (ADHO-EH) / Principal Environmental Health Officer (PEHO)/Assistant City Health Officer -Environmental Health (ACHO-EH),
- Senior Environmental Health Officer (SEHO)
- Environmental Health Officer (EHO)/ Senior Health Inspector (SHI)
- Health Inspector (HI)
- Health Assistant (HA)

b) Vector Control Cadres

- Principal Vector Control Officer (PVCO)
- Senior Vector Control Officer (SVCO)
- Vector Control Officer (VCO)
- Senior Assistant Vector Control Officer (SAVCO)
- Assistant Vector Control Officer (AVCO)

Objectives of the Key Performance Indicators

Broad Objective

To contribute to the reduction of the disease burden in Uganda by strengthening preventive healthcare service delivery at local government level.

Specific Objectives

- To improve the performance of the Environmental Health cadres.
- To strengthen the Environmental Health data reporting system.

Expected Outcomes

- Improved Environmental Health service delivery at local government level.
- Improved access to and quality of eh data to support evidence-based decision making

SECTION ONE: KEY PERFORMANCE INDICATORS FOR ENVIRONMENTAL HEALTH WORKERS IN LOCAL GOVERNMENTS

1.0 Key Performance Indicators for Environmental Health Workers

Key Performance Indicators for Assistant District Health Officer-Environmental Health and Principal Environmental Health Officers/Assistant City Health Officer-Environmental Health

Cadre: ASSISTANT DISTRICT HEALTH OFFICER-ENVIRONMENTAL HEALTH/ PRINCIPAL ENVIRONMENTAL HEALTH OFFICER/ASSISTANT CITY HEALTH OFFICER-ENVIRONMENTAL HEALTH					
Performance Indicator	Frequency	Means of verification	Indicator Definition		Target
			Numerator	Denominator	
Financial and Human Resource Management Function					
Percentage of EH staff with performance management plans	Annually	Performance management plans in place.	Number of EH staff with performance management plans	Total number of lower-level EH staff	100%
Number of EH work plans and budgets developed	Annually	• Activity reports • Costed EH activities reflected in the LG Health work plan and Budget. • Planning meeting minutes.	-	-	01
Percentage of EH staff in-post appraised	Annually	Completed appraisal forms	Number of EH staff in-post appraised	Total number of EH staff	100%
Number of EH performance review meetings conducted	Quarterly	Reports and minutes	-	-	01
Proportion of HCFs integrating EH activities in their work plans and budgets using PHC non-wage funds and other funds	Annually	HCF work plans and budgets	Number of HCFs integrating EH activities in their work plans and budgets using PHC non-wage funds and other funds	Total number of HCFs	100%

Cadre: ASSISTANT DISTRICT HEALTH OFFICER-ENVIRONMENTAL HEALTH/ PRINCIPAL ENVIRONMENTAL HEALTH OFFICER/ASSISTANT CITY HEALTH OFFICER-ENVIRONMENTAL HEALTH					
Performance Indicator	Frequency	Means of verification	Indicator Definition		Target
			Numerator	Denominator	
The sum of additional resources mobilized for EH activities through concepts, proposals and Innovations	Annually	Resources mobilized	-	-	5 million UGX
The proportion of EH staff forwarded to the Chief Accounting Officer for rewards and sanctions	Annually	Letters, minutes	Number of EH staff forwarded to the Chief Accounting Officer for rewards and sanctions	The total number of EH staff identified for rewards and sanctions.	100%
The proportion of partners in the LG aligning their plans and budgets to the service priorities	Annually	Partners inventory, MOUs, work plans, progress reports	Number of partners in the LG aligning their plans and budgets to the service priorities	Total number of partners in the LG	25%
Technical Support Function					
Number of Quarterly WASH-MIS reports submitted timely to MoH	Annually	Reports on WASH - Management Information System	-	-	4
Percentage of outbreak investigations and response activities supported	Annually	Reports	The number of outbreak investigations and response activities supported.	Number of outbreak investigations and response activities conducted/ reported.	75%
The proportion of building plans scrutinized and recommended for approval	Annually	Building plans register	Number of building plans scrutinized and recommended for approval	Total number of building plans submitted	25%
Number of EH-related innovations and best practices documented	Annually	Reports, publications, feedback meeting minutes	-	-	01

Cadre: ASSISTANT DISTRICT HEALTH OFFICER-ENVIRONMENTAL HEALTH/ PRINCIPAL ENVIRONMENTAL HEALTH OFFICER/ASSISTANT CITY HEALTH OFFICER-ENVIRONMENTAL HEALTH					
Performance Indicator	Frequency	Means of verification	Indicator Definition		Target
			Numerator	Denominator	
Number of mentorships/ coaching sessions conducted for Environmental health staff	Quarterly	Mentorship Reports	-	-	03
The proportion of planned health inspections conducted for compliance with Public Health standards.	Annually	• Inventory of all licensed premises • Health inspection checklists • Inspection reports • Nuisances notice registers. • Certificates of occupancy register	Number of actual health inspections conducted	Number of planned health inspections	80%
The number of statutory nuisances abated	Quarterly	Nuisance notice register	-	-	03
Number of statutory nuisance express penalties issued	Quarterly	Amount of revenue generated from express penalties	-	-	12
The proportion of HCFs assessed for WASH/IPC status	Quarterly	Assessment tools (WASH FIT) Assessment reports	Number of HCFs assessed	Total number of HCFs	100%
Number of National cleaning days conducted	Annually	Reports	-	-	12
Number of EH-related ordinances formulated	Annually	Ordinances in place	-	-	01

Cadre: ASSISTANT DISTRICT HEALTH OFFICER-ENVIRONMENTAL HEALTH/ PRINCIPAL ENVIRONMENTAL HEALTH OFFICER/ASSISTANT CITY HEALTH OFFICER-ENVIRONMENTAL HEALTH					
Performance Indicator	Frequency	Means of verification	Indicator Definition		Target
			Numerator	Denominator	
Percentage of planned technical support supervision visits conducted for lower-level Environmental Health staff.	Quarterly	Support supervision book Reports	Number of technical support visits conducted.	Number of planned technical support visits.	75%

Key Performance Indicators for Senior Environmental Health Officers

Cadre: SENIOR ENVIRONMENTAL HEALTH OFFICER					
Performance Indicator	Frequency	Means of verification	Indicator Definition		Target
			Numerator	Denominator	
The proportion of HCFs assessed for WASH/IPC status	Quarterly	• Assessment tools (WASH FIT) • Assessment Reports • Inventory of HCFs in the area of jurisdiction	Number of HCFs assessed	Total number of HCFs	100%
The proportion of EH staff supervised	Quarterly	• Supervision reports	Number of EH staff supervised	Total number of lower-level EH staff	100%
Percentage of outbreak investigations and response activities supported	Annually	Reports	The number of outbreak investigations and response activities supported.	Total number of outbreak investigations and response activities conducted/ reported.	75%
Number of National cleaning days conducted	Annually	Reports			12

Cadre: SENIOR ENVIRONMENTAL HEALTH OFFICER					
Performance Indicator	Frequency	Means of verification	Indicator Definition		Target
			Numerator	Denominator	
Proportion of learning institutions inspected and met minimum standards for EH	Termly	• Assessment Forms • Inspection Reports	Number of learning institutions inspected	Total number of recorded learning institutions	50%
Proportion of learning institutions with functional WASH committees	Termly	• School WASH improvement plans • Minutes • Inventory for learning institutions in the area of jurisdiction	Number of learning institutions with functional WASH committees	Total number of recorded learning institutions	50%
The proportion of learning institutions with functional Operation & Maintenance plans for WASH	Termly	• Inventory for learning institutions in the area of jurisdiction • Operation & Maintenance plans for WASH	Number of learning institutions with functional Operation & Maintenance plans for WASH	Total number of recorded learning institutions	50%
Percentage of planned health inspections conducted for compliance with Public Health standards	Annually	• Inventory of all licensed premises in the area of jurisdiction • Inspection reports • Nuisances notice registers. • Health Inspection checklists • Certificates of occupancy register	Number of actual health inspections conducted	Total number of planned health inspections	80%
The number of statutory nuisances abated	Quarterly	Nuisance notice register	-	-	03

Cadre: SENIOR ENVIRONMENTAL HEALTH OFFICER					
Performance Indicator	Frequency	Means of verification	Indicator Definition		Target
			Numerator	Denominator	
The proportion of authors of nuisances (cases) submitted for prosecution	Quarterly	• Court case files • Nuisances notice registers	Number of nuisance authors (cases) submitted for prosecution	Total number of recorded nuisance authors	100%
Number of statutory nuisance express penalties issued	Quarterly	Amount of revenue generated from express penalties	-	-	12
Number of building plans scrutinized and recommended for approval	Annually	Building plans register	-	-	25%

Key Performance Indicators for Environmental Health Officers/ Senior Health Inspectors

Cadre: ENVIRONMENTAL HEALTH OFFICER/ SENIOR HEALTH INSPECTOR					
Performance Indicator	Frequency	Means of verification	Indicator Definition		Target
			Numerator	Denominator	
Number of planned model clean communities created.	Annually	Supervision reports	-	-	02
Proportion of HCFs assessed for WASH/ IPC status	Quarterly	• Assessment tools (WASH FIT) • Assessment Reports • IPC assessment reports • Inventory of HCFs in area of jurisdiction	Number of HCFs assessed	Total number of HCFs	100%

Cadre: ENVIRONMENTAL HEALTH OFFICER/ SENIOR HEALTH INSPECTOR					
Performance Indicator	Frequency	Means of verification	Indicator Definition		Target
			Numerator	Denominator	
Proportion of VHTs/ CHEWs supervised and supported for sanitation promotion	Quarterly	Supervision reports	Number of VHTs/CHEWs supervised and supported for sanitation promotion	Total number of VHTs/CHEWs	20%
Number of National cleaning days conducted.	Annual	Reports			12
Percentage of outbreak investigations and response activities supported	Annually	Reports	Number of outbreak investigations and response activities supported.	Total number of outbreaks reported.	75%
Proportion of learning institutions inspected and meet minimum standards for sanitation and hygiene	Termly	• Health Inspection checklists • Inspection reports • Inventory of learning institutions in area of jurisdiction	Number of learning institutions inspected	Total number of recorded learning institutions	50%
Proportion of learning institutions with functional WASH Committees	Termly	• School WASH improvement plans • Minutes	Number of learning institutions with functional WASH	Total number of recorded learning institutions in areas	50%
Proportion of learning institutions with functional Operation &Maintenance plans for WASH in areas of jurisdiction	Termly	Operation & Maintenance plans for WASH Inventory of learning institutions in jurisdiction	Number of learning institutions with functional Operation &Maintenance plans for WASH	Total number of recorded learning institutions	50%

Cadre: ENVIRONMENTAL HEALTH OFFICER/ SENIOR HEALTH INSPECTOR					
Performance Indicator	Frequency	Means of verification	Indicator Definition		Target
			Numerator	Denominator	
Proportion of planned health inspections for compliance with Public Health standards	Annually	• Inventory of all licensed premises • Inspection reports • Nuisances notice registers. • Certificates of occupancy register	Number of actual health inspections conducted	Total number of planned health inspections	80%
Number of statutory nuisances abated	Quarterly	Nuisance notice register	-	-	03
Proportion of nuisance authors (cases) submitted for prosecution	Quarterly	• Court case files • Nuisances notice registers	Number of nuisance authors submitted for prosecution	Total number of recorded nuisance authors	100%
Percentage of statutory nuisance express penalties issued to nuisance authors	Quarterly	Amount of revenue generated from express penalties	Number of express penalties issued	Number of statutory nuisances recorded	80%
Number of bye laws formulated or enforced on health inspection, sanitation, and hygiene	Annually	Bye laws inventory	-	-	01
Number of sanitary surveys conducted on water points	Quarterly	• Risk assessment forms • Inventory for all water sources • Inspection/ survey reports	-	-	10%
Proportion of water points tested	Quarterly	• Water quality surveillance reports	Number of water points tested	Total number of recorded water points	5%
Number of Sanitation safety plans developed	Annually	Water safety plan in place	-	-	01

Cadre: ENVIRONMENTAL HEALTH OFFICER/ SENIOR HEALTH INSPECTOR					
Performance Indicator	Frequency	Means of verification	Indicator Definition		Target
			Numerator	Denominator	
Proportion of food premises inspected for compliance with food hygiene and safety standards	Quarterly	• Monthly reports • Updated inventory for food premises in area of jurisdiction • Register of suitability of premises certificates	Number of food premises inspected	Total number of recorded food premises	80%
Proportion of food handlers mentored on food hygiene and safety	Quarterly	• Mentorship reports • Register for food handlers	Number of food handlers mentored	Total number of recorded food handlers	80%
Proportion of food handlers certified for handling food	Biannually	Food handlers register. Medical records (medical form) inventory	Number of food handlers certified for handling food	Total number of recorded food handlers	80%
Number of community sensitization sessions conducted on Environmental Health	Quarterly	Activity Reports	-	-	03
Number of CME sessions conducted in HCFs on Environmental Health	Quarterly	CME activity Reports	-	-	01

Key Performance Indicators for Health Inspectors

Cadre: HEALTH INSPECTOR					
Performance Indicators	Frequency	Indicator Definition	Indicator Definition		Target
			Numerator	Denominator	
The number of planned model clean communities created.	Annually	Supervision reports	-	-	03
Proportion of food handlers mentored on food hygiene and safety	Quarterly	▪ Mentorship reports ▪ Register for food handlers	Number of food handlers mentored on food hygiene and safety	Total number of recorded food handlers	80%
The proportion of food handlers certified for handling food	Biannually	▪ Food handlers register. ▪ Medical records inventory	Number of food handlers certified for handling food	Total number of recorded food handlers	
The proportion of HCFs assessed for WASH/IPC status	Quarterly	▪ Assessment tools (WASH FIT) ▪ Assessment Reports	Number of HCFs assessed for WASH/IPC status	Total number of HCFs	100%
The proportion of learning institutions inspected and meet minimum health standards	Termly	▪ Assessment forms ▪ Inspection reports ▪ Inventory of learning institutions in the area of jurisdiction	Number of learning institutions inspected and meet minimum health standards	Total number of recorded learning institutions	50%
Proportion of learning institutions with functional WASH committees	Termly	▪ School WASH improvement plans ▪ Minutes	Number of learning institutions with functional WASH committees	Total number of recorded learning institutions	50%
The proportion of learning institutions with functional Operation &Maintenance plans for WASH	Termly	Operation & Maintenance plans for WASH	Number of learning institutions with functional O&M plans for WASH	Total number of recorded learning institutions	50%
Proportion of planned health inspections for compliance with Public Health standards	Annually	▪ Inventory of all licensed premises ▪ Inspection reports ▪ Nuisances notice registers. ▪ Certificates of occupancy register	Proportion of actual health inspections conducted	Total number of planned health inspection	80%

Cadre: HEALTH INSPECTOR					
Performance Indicators	Frequency	Indicator Definition	Indicator Definition		Target
			Numerator	Denominator	
The proportion of statutory nuisances abated	Quarterly	▪ Nuisance notice register	The number of nuisances abated	Number of nuisances recorded	75%
Proportion of nuisance authors (cases) submitted for prosecution	Quarterly	▪ Court case files ▪ Nuisances notice registers	Number of nuisance authors submitted for prosecution	Total number of recorded nuisance authors	100%
Percentage of statutory nuisance express penalties issued to nuisance authors	Quarterly	Amount of revenue generated from express penalties	Number of express penalties issued	Number of statutory nuisances recorded	80%
Number of bye-laws formulated on environmental health	Annually	▪ Bye-laws inventory	-	-	01
Number of sanitary surveys conducted on water points	Quarterly	▪ Risk assessment forms ▪ Inventory for all water sources ▪ Inspection reports	-		10%
Proportion of water points tested	Quarterly	Water quality surveillance reports	Number of water points tested	Total number of water points registered	5%
Proportion of water facilities with functional water and sanitation committees	Quarterly	▪ Activity reports ▪ Minutes of the meeting ▪ Operation and maintenance plans in place	Number of water facilities with functional water and sanitation committees	Total number of recorded facilities	5%
Water safety plans developed	Annually	Water safety plan in place			01
The proportion of outbreak investigations and response activities supported	Annually	Reports	Number of outbreak investigations and response activities supported	Total number of outbreak investigations and response activities conducted/ reported	75%

Cadre: HEALTH INSPECTOR					
Performance Indicators	Frequency	Indicator Definition	Indicator Definition		Target
			Numerator	Denominator	
Number of community sensitizations conducted on Environmental Health	Quarterly	Activity Reports	-	-	03
Proportion of communities sensitized on indoor air pollution and use of clean energy sources	Annually	Reports	Number of communities sensitized	Total number of targeted communities	50%
Number of community engagement meetings conducted	Quarterly	Reports	-	-	03
Proportion of villages with action plans for WASH improvement	Annually	Action plans	Number of villages with action plans	Total number of targeted villages	80%
Number of CME sessions conducted in HCFs on Environmental Health	Quarterly	CME Activity Reports	-	-	01
Number of performance review meetings conducted with VHTs	Quarterly	Reports	-	-	01
The proportion of villages reporting timely using the eCHIS/WASH- MIS	Quarterly	WASH-MIS data reports	Number of villages reporting timely using the eCHIS/ WASH-MIS	Total number of villages enrolled on the eCHIS/WASH-MIS	80%

Key Performance Indicators for Health Assistants

Cadre: HEALTH ASSISTANTS					
Performance Indicator	**Frequency**	**Means of verification**	**Numerator**	**Denominator**	**Target**
The number of planned model clean communities created.	Annually	Supervision reports	-	-	03
Proportion of food handlers mentored on food hygiene and safety	Quarterly	▪ Mentorship reports ▪ Register for food handlers	Number of food handlers mentored	Total number of recorded food handlers	80%
The proportion of food handlers certified for handling food	Biannually	▪ Food handlers register. ▪ Medical records inventory	Number of food handlers certified	Total number of recorded food handlers	80%
The proportion of HCFs assessed for WASH/IPC status	Quarterly	▪ Assessment tools(WASH FIT) ▪ Assessment Reports	Number of HCFs assessed	Total number of HCFs	100%
The proportion of learning institutions inspected and meet minimum standards for EH	Termly	▪ Assessment forms ▪ Inspection reports ▪ Inventory of learning institutions	Number of learning institutions inspected	Total number of learning institutions	50%
Proportion of learning institutions with functional WASH committees	Termly	▪ School WASH improvement plans ▪ Minutes	Number of learning institutions with functional WASH committees	Total number of recorded learning institutions	50%
The proportion of learning institutions with functional Operation &Maintenance plans for WASH	Termly	Operation & Maintenance plans for WASH	Number of learning institutions with functional O&M plans	Total number of recorded learning institutions	50%
Proportion of learning institutions supported to improve WASH status	Annually	▪ Improvement plans ▪ Reports			25%

Cadre: HEALTH ASSISTANTS					
Performance Indicator	**Frequency**	**Means of verification**	**Numerator**	**Denominator**	**Target**
The proportion of planned health inspections for compliance with Public Health standards	Annually	▪ Inventory of all licensed premises ▪ Inspection reports ▪ Nuisance notice registers. ▪ Certificates of occupancy register	Number of actual health inspections conducted	Total number of planned health inspections	80%
The number of statutory nuisances abated	Quarterly	Nuisance notice register	-	-	12
The proportion of authors of nuisances (cases) submitted for prosecution	Quarterly	▪ Court case files ▪ Nuisances notice registers	Number of authors of nuisances submitted for prosecution	Total number of recorded authors of nuisances	100%
Number of statutory nuisance express penalties issued	Quarterly	Amount of revenue generated from express penalties	-	-	12
Number of bye-laws formulated on environmental health	Annually	Bye-laws inventory	-	-	01
Number of sanitary surveys conducted on water points	Quarterly	▪ Risk assessment forms ▪ Inventory for all water sources ▪ Inspection reports	-	-	10%
Number of water points tested	Quarterly	▪ Water quality surveillance reports	-	-	5%
Proportion of water facilities with functional water and sanitation committees	Quarterly	▪ Activity reports ▪ Minutes of the meeting ▪ Operation and maintenance plans in place	Number of water sources with functional water and sanitation committees	Total number of recorded water sources	5%

Cadre: HEALTH ASSISTANTS					
Performance Indicator	**Frequency**	**Means of verification**	**Numerator**	**Denominator**	**Target**
The proportion of Sanitation safety plans developed	Annually	Water safety plans in place			50%
Number of outbreak investigations and response activities supported	Annually	Reports	-	-	04
Number of community sensitizations conducted on Environmental Health	Quarterly	Activity Reports	-	-	03
Proportion of households sensitized on indoor air pollution and use of clean energy sources	Annually	Reports	Number of households sensitized	Total number of targeted households	50%
Number of community engagement meetings conducted	Quarterly	Reports	-	-	03
Proportion of villages with action plans for WASH improvement	Annually	Action plans	Number of villages with action plans for WASH	Total number of targeted villages	80%
Number of CME sessions conducted in HCFs on Environmental Health	Quarterly	CME Activity Reports	-	-	01
Number of performance review meetings conducted with VHTs/CHEWS	Quarterly	Reports	-	-	01
The proportion of villages reporting timely on the WASH-MIS	Quarterly	WASH-MIS data reports	Number of villages reporting timely with the eCHIS/WASH MIS	Total number of villages enrolled on the eCHIS/ WASH-MIS	80%

1.1 Key Performance Indicators for Vector Control Cadres

Key Performance Indicators for Principal Vector Control Officers

Cadre: PRINCIPAL VECTOR CONTROL OFFICER					
Performance Indicator	**Frequency**	**Means of verification**	**Numerator**	**Denominator**	**Target**
Finance and Human Resource Function					
Percentage of vector control staff with performance management plans.	Annually	Performance management plans in place	Number of vector control staff with performance management plans	Total number of vector control officers	75%
Number of planning meetings for vector control interventions held	Quarterly	Meeting minutes	-	-	01
Number vector control work plans and budgets developed.	Annually	▪ Activity reports, ▪ Costed vector control activities reflected in the LG Health Work plan and Budget. ▪ Planning meeting minutes.	-	-	01
Percentage of vector control staff in-post appraised.	Annually	Completed appraisal forms	Number of vector control staff in-post appraised	Total number of vector control staff	100%
Number of vector control performance review meetings conducted.	Quarterly	Reports and minutes	-	-	01
Amount of additional resources mobilized for vector control activities through concepts, proposal, innovations	Annually	Resources mobilized	-	-	5 million UGX
Proportion of vector control staff forwarded to Chief Administrative Officer for rewards and Sanctions	Annually	Letters, Minutes	Number of vector control staff forwarded to CAO	Total number of vector control staff	100%
Proportion of partners in the LG aligning their plans and budgets to the vector control service priorities	Annually	Partners inventory, MOUs, work plans, progress reports	Number of partners with aligned work plans and budgets to that of LG	Total number of recorded partners supporting vector control interventions in LG	25%

Cadre: PRINCIPAL VECTOR CONTROL OFFICER					
Performance Indicator	**Frequency**	**Means of verification**	**Numerator**	**Denominator**	**Target**
Technical Support Function					
Percentage of timely entomological surveillance reports submitted	Quarterly, Annually	Reports on DHIS2	Number of reports submitted timely following entomological surveillance activities	Total number of entomological activities conducted	80%
Percentage of complete entomological surveillance reports submitted	Quarterly, Annually	Reports on DHIS2	Number of complete entomological surveillance reports submitted	Total Number of entomological surveillance reports submitted	80%
Number of innovations and best practices documented	Annually	Reports, publications, feedback meeting minutes			01
Number of mentorships/ coaching sessions conducted for entomological staff	Quarterly	Mentorship Reports			03
Proportion of planned NTD case management activities conducted.	Biannually	Activity reports	Number of NTD case management activities conducted	Number of planned NTD case management activities	80%
Proportion of planned mass drug administration (MDA) activities conducted.	Biannually	Activity reports	Number of mass drug administration (MDA) activities conducted.	Number of planned mass drug administration (MDA) activities .	80%
Number of vector control related ordinances formulated	Annually	Ordinances in place	-	-	01
Number of support supervisions visits conducted for lower-level staff.	Quarterly	Support supervision book Reports	-	-	01
Number of community engagements conducted	Quarterly	Minutes, reports	-	-	03
Number of vector-borne diseases and control initiatives related research activities conducted	Annually	Study reports	-	-	01

Key Performance Indicators for Senior Vector Control Officers

Cadre: PRINCIPAL VECTOR CONTROL OFFICER					
Performance Indicator	**Frequency**	**Means of verification**	**Numerator**	**Denominator**	**Target**
Proportion of planned entomological surveillances of malaria vector conducted.	Quarterly	Number of entomological surveillances of malaria vector conducted.	Total number of planned entomological surveillances of malaria vector.	Activity reports DHIS2	80%
Proportion of planned vector control interventions conducted.	Quarterly	Number of planned vector control interventions conducted.	Total number of planned vector control interventions.	Activity reports DHIS2	80%
Percentage of timely entomological surveillance reports submitted	Quarterly, Annually	Number of timely entomological surveillance reports submitted	Total number of entomological surveillance reports submitted	Reports on DHIS2	80%
Number of mentorships/ coaching sessions conducted for entomological staff.	Quarterly	-	-	Mentorship Reports	03
Number of support supervisions visits conducted for lower-level staff.	Quarterly	-	-	Support supervision book Reports	01
Number of vector-borne diseases and control initiatives related research activities conducted.	Annually	-	-	Study reports	01
Proportion of targeted communities that have been sensitized on NTDs and vector control.	Quarterly	Number of targeted communities that have been sensitized on NTDs and vector control.	Number of targeted communities for sensitization on NTDs and vector control.	Activity reports	80%

Cadre: PRINCIPAL VECTOR CONTROL OFFICER					
Performance Indicator	**Frequency**	**Means of verification**	**Numerator**	**Denominator**	**Target**
Proportion of planned mass drug administration for NTDs conducted.	Biannually	Number of mass drug administration for NTDs conducted.	Total number of planned mass drug administration for NTDs.	DHIS2	80%
Percentage of in-post vector control staff appraised	Annually	Number of in-post vector control staff appraised	Total number of in-post vector control staff	Completed appraisal forms	100%
Proportion of planned case management activities for NTDs conducted.	Biannually	Number of planned case management activities for NTDs conducted.	Total number of planned case management activities for NTDs.	DHIS2	80%
Proportion of planned Lymphatic filariasis transmission survey, morbidity management and disability prevention activities conducted.	Annually	Number of planned Lymphatic filariasis transmission survey, morbidity management and disability prevention activities conducted.	Total number of planned Lymphatic filariasis transmission survey, morbidity management and disability prevention activities.	DHIS2	80%

Key Performance Indicators for Vector Control Officers

Cadre: PRINCIPAL VECTOR CONTROL OFFICER					
Performance Indicator	**Frequency**	**Means of verification**	**Numerator**	**Denominator**	**Target**
Work plans and budgets for vector and vermin control developed	Annually	-	-	Work plans and budgets in place	01
Proportion of public institutions supported for vector and vermin control	Quarterly	Number of public institutions supported for vector and vermin control	Total number of public institutions in the district/city/ municipality	▪ Inventory of all public institutions ▪ Activity reports	80%
Number of entomological studies conducted for mosquito breeding areas	Quarterly	-	-	Reports	02

Cadre: PRINCIPAL VECTOR CONTROL OFFICER					
Performance Indicator	**Frequency**	**Means of verification**	**Numerator**	**Denominator**	**Target**
Number of supervisions conducted for NTDs control	Quarterly	-	-	Activity reports	02
Number of mentorships conducted for vector and vermin control	Quarterly	-	-	Reports	01
Proportion of targeted households that received Indoor Residual Spray interventions (IRS districts)	Annually	Number of targeted households that received Indoor Residual Spray interventions (IRS districts)	Total number of households targeted for Indoor Residual Spray interventions (IRS districts)	Reports	75%
Proportion of targeted households that received Mass-Drug Administration for NTDs control	Annually	Number of targeted households that received Mass-Drug Administration for NTDs control	Total number of households targeted for Mass-Drug Administration for NTDs control	Reports	75%
Proportion of targeted households that received screening for Human African Trypanosomiasis (HAT)	Annually	Number of targeted households that received screening for Human African Trypanosomiasis (HAT)	Total number of households targeted for screening for Human African Trypanosomia-sis (HAT)	Reports	80%
Number of surveillance activities conducted for NTDs control	Quarterly	-	-	Reports	02
Number of transmission assessment surveys conducted for trachoma and Schistosomiasis	Annually	-	-	Reports	02
Number of Transmission assessment surveys (TAS) conducted for Lymphatic filariasis	Annually	-	-	Reports	01

Key Performance Indicators for Senior Assistant Vector Control Officers

Cadre: SENIOR ASSISTANT VECTOR CONTROL OFFICER					
Performance Indicator	**Frequency**	**Numerator**	**Denominator**	**Means of verification**	**Target**
Proportion of targeted households that received Indoor Residual Spray interventions	Annually	Number of targeted households that received Indoor Residual Spray interventions	Total number of households targeted for Indoor Residual Spray interventions	Reports	02
Number of mentorships/ coaching sessions conducted for entomological staff.	Quarterly	-	-	Mentorship Reports	03
Number of support supervisions visits conducted for lower-level staff.	Quarterly	-	-	Support supervision book Reports	01
Percentage of in-post vector control staff appraised	Annually	Number of in-post vector control staff appraised	Total number of in-post vector control staff	Completed appraisal forms	100%
Proportion of targeted households that received Mass-Drug Administration for NTDs control	Annually	Number of targeted households that received Mass- Drug Administration for NTDs control	Total number of households targeted for Mass- Drug Administration for NTDs control	Reports	80%
Number of premises which have received vector control interventions	Quarterly	-	-	Reports	02
Proportion of planned surveillance activities conducted for NTDs control	Quarterly	Number of planned surveillance activities conducted for NTDs control	Total number of planned surveillance activities conducted for NTDs control	Reports	80%
Number of transmission assessment surveys conducted for trachoma and schistosomiasis	Annually	-	-	Reports	02
Number of sensitization meetings conducted for NTDs and vector control	Quarterly	-	-	Reports	03

Key Performance Indicators for Assistant Vector Control Officers

Cadre: ASSISTANT VECTOR CONTROL OFFICER					
Performance Indicator	**Frequency**	**Means of verification**	**Numerator**	**Means of verification**	**Target**
Proportion of targeted households that received Indoor Residual Spray interventions (IRS districts)	Annually	Number of targeted households that received Indoor Residual Spray interventions (IRS districts)	Total number of households for Indoor Residual Spray interventions (IRS districts)	Reports	80%
Proportion of targeted households that received Mass- Drug Administration for NTDs control	Annually	Number of targeted households that received Mass- Drug Administration for NTDs control	Total number of households that were targeted Mass- Drug Administration for NTDs control	Reports	80%
Number of premises which have received vector control interventions	Quarterly	-	-	Reports	02
Number of surveillance activities conducted for NTDs control	Quarterly	-	-	Reports	02
Number of transmission assessment surveys conducted for trachoma and schistosomiasis	Annually	-	-	Reports	02
Number of sensitization meetings conducted for NTDs and vector control	Quarterly	-	-	Reports	03

MONITORING AND EVALUATION OF THE KPIs

Monitoring and Evaluation (M&E) will constitute a key pillar for implementation of these Key Performance Indicators as it will guide periodic tracking of performance from 2024/2025 to 2028/2029.

Periodic reviews on functionalization of these KPIs will be done quarterly at sub- national and national level by the responsible officers through line health managers. Additionally, annual reviews will be undertaken to assess the progress of implementation of these during the annual performance reviews at national and regional levels.

A mid-term review will be conducted after three years to identify concerns relating to the KPIs and impact of the same to the national health database. This will enable the re-enforcement of initiatives that demonstrated the potential for improvement. Additionally, the mid-term review of the KPIs will be used to align the performance measurement with the updated strategic documents.

During the annual and quarterly reviews, a detailed stakeholders matrix including policy makers, responsible officers, health managers and implementers, among others will be developed for engagement. These will be engaged through structured interviews and consultative workshops among others.

The evidence gathered through monitoring and evaluation will be used to:

- Guide decision making in the health sector by characterizing the priority areas of focus at various levels of implementation.
- Guide the information dissemination and use by the sector stakeholders and the public.
- Ensure well-functioning unified data system (data collection, management, reporting and dissemination) for evidence-based decision making. This will guide the stepwise adoption of these KPIs into the DHIS-2.

SECTION TWO: HEALTH INSPECTION TOOLS

HEALTH INSPECTION CHECKLIST FOR SCHOOLS

Reference is made to the Public Health (School Buildings) rules and other relevant laws.
(Attach pictorial evidence and supporting documents where necessary)

SCHOOL PROFILE

Date of Inspection:		
Name of school:		
Level of the institution (Early Childhood Development center, primary, secondary, or tertiary):		
Type of School (day, boarding, or mixed):		
Ownership Status: (government or private)		
Sub county/ Division:		
Parish/ Ward:		
Village/ Cell:		
Purpose of Inspection:		
Name and Contact of Owner:		
Name and Contact of Head Teacher:		
Name of Respondent:		
No of Teaching Staffs:	Male:	Female:
No of non-Teaching Staffs:	Male:	Female:
Name and Contact of Sanitation Teacher:		
Boys' enrollment:		
Girls' enrollment:		

A) INTERNAL INSPECTION

SN	QUESTION	RESPONSE	
1.	**CLASSROOMS**		
	Floor space is adequate (200 sq. ft: 121/2 sq. ft per learner, 50 sq. ft per teacher)	Yes ☐	No ☐
	Floors are slip-resistant	Yes ☐	No ☐
	State of repair	Sound ☐	Unsound ☐
	Walls and ceilings are kept clean and in good repair	Yes ☐	No ☐
	Adequate lighting	Yes ☐	No ☐
	Adequate ventilation	Yes ☐	No ☐
2.	**DORMITORIES/ACCOMMODATION AREA** (Only applicable to Boarding Schools)		
	Floor space is adequate for the number of learners available (30sq ft per learner)	Yes ☐	No ☐
	Are clean and in good state of repair	Yes ☐	No ☐
	Floors are slip-resistant	Yes ☐	No ☐
	Free of vermin and vector infestation	Yes ☐	No ☐
	Ventilation is adequate and appropriate	Yes ☐	No ☐
	Lighting is adequate and appropriate	Yes ☐	No ☐
	Appropriate separate sanitary facilities available for the dormitory area	Yes ☐	No ☐
	Unobstructed passages between bed-lanes	Yes ☐	No ☐
	Availability of accessible and unobstructed emergency exits	Yes ☐	No ☐
	All windows are free of burglar-proofing	Yes ☐	No ☐
	Availability of functional fire-fighting equipment	Yes ☐	No ☐
	Presence of signage (e.g. exit doors, washrooms, etc)	Yes ☐	No ☐
	Presence of insecticide-treated mosquito bed nets for all learners	Yes ☐	No ☐
	Appropriate types of beds available in dormitories (maximum should be a double-decker)	Yes ☐	No ☐
	Appropriate non-flammable paint used for dormitory areas	Yes ☐	No ☐
	No sign of foodstuffs being stored in the dormitory	Yes ☐	No ☐
3.	**Evidence for Provisions for People Living with Disabilities (PLWDs):**		
	Hand railings are in place and secure	Yes ☐	No ☐
	Ramps are available and in good state of repair	Yes ☐	No ☐
	Sanitary facilities provided with rails and ramps available for PLWD	Yes ☐	No ☐
	A pedestal toilet is provided for PLWDs	Yes ☐	No ☐

SN	QUESTION	RESPONSE	
4.	**KITCHEN**		
	Availability of a kitchen	Yes ☐	No ☐
	State of repair	Yes ☐	No ☐
	Availability of appropriate means of smoke escape	Yes ☐	No ☐
	Appropriate storage of cooking equipment and utensils	Yes ☐	No ☐
	Availability of adequate clean water at the utensil washing area	Yes ☐	No ☐
	All kitchen areas are kept clean	Yes ☐	No ☐
	Free of vermin and vector infestation	Yes ☐	No ☐
	Availability of a drying area/ rack for utensils	Yes ☐	No ☐
	Availability of a hand-washing facility with **both** soap and water	Yes ☐	No ☐
5.	**FOOD HYGIENE AND SAFETY**		
	Presence of a food store	Yes ☐	No ☐
	Food stored off the ground	Yes ☐	No ☐
	Raw and cooked food are properly separated	Yes ☐	No ☐
	All food handlers are medically examined and certified every 6 months *(verify with the presence of certificates of medical fitness)*	Yes ☐	No ☐
	Availability of record of food supply and source	Yes ☐	No ☐
	Evidence of learners eating a balanced diet *(request for the school menu)*	Yes ☐	No ☐
	Appropriate storage of cooked food carried from home *(Where applicable)*	Yes ☐	No ☐
6.	**DINING HALL**		
	Availability of a dining hall	Yes ☐	No ☐
	State of repair	Yes ☐	No ☐
	Adequate floor space (8sq ft per learner)	Yes ☐	No ☐
	General cleanliness	Sufficient ☐	Insufficient ☐
	Adequate and appropriate lighting	Yes ☐	No ☐
	Adequate and appropriate ventilation	Yes ☐	No ☐
	Availability of adequate and appropriate furniture	Yes ☐	No ☐

B) WATER ACCESS

1. MAIN SOURCE OF WATER FOR THE SCHOOL

	The main source of water *(check one most frequently used)*	Currently available *(at time of inspection)*		The main source of drinking water *(check one most frequently used)*	Currently available *(at time of inspection)*	
		YES	NO		YES	NO
a) Piped-water supply						
b) Protected well/ spring/ borehole						
c) Unprotected well/spring						
d) Rainwater						
e) Packaged bottled water						
f) Tanker-truck or cart (wheelbarrow)						
g) Surface water (lake, river, stream						
h) No water source						

Is the available water sufficient for the school population? Yes ☐ No ☐

If there is no source of drinking water in the school, do children bring drinking water from home? Yes ☐ No ☐

Is the drinking water treated? Yes ☐ No ☐

If yes, what treatment method is used? Yes ☐ No ☐

☐ Chlorination ☐ Filtration ☐ Ultraviolet Disinfection

☐ Boiling ☐ SODIS

Is the drinking water adequate for all learners and staff? Yes ☐ No ☐

Does every learner have a personal drinking water vessel? Yes ☐ No ☐

Is the storage for drinking water safe and accessible? Yes ☐ No ☐

Is the water source tested periodically? *(at least once every 6 months, verify with records)* Yes ☐ No ☐

C) SANITATION

1. **What type of toilets/latrines are at the school?** (Check one most common)

- ☐ Flush / Pour-flush toilets to pipe / sewer
- ☐ Flush / Pour-flush toilets to septic tank
- ☐ Pit latrines with slabs with lined pits
- ☐ Pit latrines with slab with unlined pit
- ☐ Traditional pit latrines with slab
- ☐ Composting toilets (e.g. Ecosan toilet)
- ☐ Traditional pit latrines without slab
- ☐ No toilets or latrines

2. **How many toilets/latrine stances are at the school?**

	Girls' only toilets	Boys' only toilets	Gender shared toilets	Staff only toilets
Total number				
a) usable Number (accessible, functional, private)				
Adequate and functional urinals				

Count only Usable toilets that are accessible; not locked from the outside, functional; hole is not blocked, private; cubicle can be locked from inside and door and superstructure does not have major gaps

3. Are the toilets clean? ☐ Clean ☐ Dirty
4. Toilet state of repair ☐ Good ☐ Bad
5. Appropriate anal cleansing materials provided for all stances? ☐ Yes ☐ No
6. Availability of a functional stance for persons/learners with disabilities ☐ Yes ☐ No
7. Signs of open defecation present ☐ Yes ☐ No

D) HYGIENE

1. HAND HYGIENE

a. Availability of hand-washing facilities at the sanitary facilities. ☐ Yes ☐ No
If yes, please specify below:

- ☐ Water and soap
- ☐ Water only
- ☐ Soap only
- ☐ Neither water nor soap

b. Do you conduct group hand activities for learners? ☐ Yes ☐ No

c. How many functional handwashing points are available on the school grounds?
(write a figure in the space provided) ———

d. A WASH/ Sanitation school committee in place ☐ Yes ☐ No

e. Is there a functional operation and maintenance plan for WASH? ☐ Yes ☐ No

2. MENSTRUAL HYGIENE MANAGEMENT

a. Availability of emergency sanitary pads and spare uniforms ☐ Yes ☐ No

b. Availability of changing rooms with water for MHM ☐ Yes ☐ No

c. Availability of lined and covered waste bins for used sanitary pads ☐ Yes ☐ No

d. Availability of a functional incinerator for the disposal of sanitary pads ☐ Yes ☐ No

E) WASTE MANAGEMENT AND DRAINAGE

a. Is the waste segregated appropriately? ☐ Yes ☐ No

b. Proper waste disposal methods applied ☐ Yes ☐ No

c. Appropriate storm-water drainage system in place ☐ Yes ☐ No

d. Appropriate wastewater drainage system in place ☐ Yes ☐ No

F) FIRE AND SAFETY PRACTICES

a. Fire-detecting equipment available and functional ☐ Yes ☐ No

b. Availability of fire-fighting mechanisms *(buckets of sand, functional fire hydrants, and fully serviced fire extinguishers)* ☐ Yes ☐ No

a. Unobstructed emergency escape routes are available ☐ Yes ☐ No

b. Emergency assembly points available ☐ Yes ☐ No

c. Regular training of learners on fire safety practices ☐ Yes ☐ No

d. Availability of functional lightning conductors ☐ Yes ☐ No

e. Availability of an adequate playground/ area ☐ Yes ☐ No

f. If in place, is the playground equipment safe and secure ☐ Yes ☐ No

H) MEDICAL SERVICES

a. Availability of a sanatorium/ sick bay

☐ Yes & licensed ☐ Yes & not licensed ☐ No

b. Availability of qualified health worker

☐ Yes (Specify cadre) ..... ☐ No

c. Availability of basic medical supplies ☐ Yes ☐ No

d. In the past term, have the learners suffered from any diarrhea diseases *(review medical records of the sanatorium/ sick bay)* ☐ Yes ☐ No

e. Staff trained in first aid management ☐ Yes ☐ No

Key observations (positives and negatives/ include best practices/ Innovations)

.....

.....

.....

Recommendations/follow-up actions

.....

.....

.....

Name and signature of Inspecting Officer: .....

Title and contact: .....

Name and signature of approving Officer: .....

Title and contact: .....

HEALTH INSPECTION CHECKLIST FOR PUBLIC PLACES

(MARKETS, BUS/TAXI PARKS, PLACES OF WORSHIP, SHOPPING ARCADES)

Reference is made to the Public Health rules and other relevant laws.
(Attach pictorial evidence and supporting documents where necessary)

Part A

Date of Inspection: .....

Name of Facility: .....

Facility Category (Market, Park, shopping arcade etc.): .....

District/City: ..... Sub-County/ Division: .....

Parish/Ward ..... Cell/Village: .....

Proprietor/ Manager/Administrator's Name: .....

Proprietor/ Manager/Administrator's contact: .....

Estimated number of occupants/ Vendors: Male ..... Female: .....

Premises description (i.e. permanent, semi-permanent etc.)

.....

.....

Availability of a functional WASH committee ☐ Yes ☐ No

Valid trading license displayed in a conspicuous place ☐ Yes ☐ No ☐ N/A

Part B

	Yes	No	Remarks
General physical status of premises			
a) State of repair			
b) Clean and in good state of repair			
c) Walls and ceilings kept clean and in good state of repair			
d) Floors are impervious			
e) Floors are not slippery			
f) No evidence of vermin and vector infestation			
g) Adequate ventilation			
h) Adequate lighting at times			
i) Availability of adequate waiting areas/ rooms			
j) Appropriate sitting furniture in the waiting area/ rooms			

	Yes	No	Remarks
Parking Lot			
a) Parking slots demarcated			
b) Parking slots demarcated for PWDs			
c) Availability of appropriate signs displayed (e.g., no parking in fire routes, etc.)			
d) Entry and exit routes clearly labeled			
e) Parking areas free from trip hazards (e.g., no pot holes, deep cracks, falling branches etc.)			
f) Adequate lighting at all times			
g) Adequate ventilation			

1. WASH Facilities

	Yes	No	Remarks
a) Availability of at least one litter bins with covers placed at various points			
b) Evidence of waste segregation at least two litter bins with covers for biodegradable and non-biodegradable waste)			
c) Availability of an appropriate temporary waste storage area in the markets			
d) Displayed cleaning schedule			
e) Availability of reliable and safe water supply/source			
f) Availability of adequate toilet facilities specifying male and female (1:100; toilet stance to user ratio)			
g) Availability of lined and covered waste bins for used sanitary pads in female toilets			
h) Availability of a functional stance for persons with disabilities			
i) Where applicable, is the septic tank of adequate size in comparison to the number of users			
j) Where applicable, is the septic tank well-drained/ timely emptied?			
k) Availability of at least one functional Hand washing facility with soap and water at all various points (entry, exit, sanitary facilities)			
l) Proper wastewater management system (wastewater drains to soak pit, sewer lines, storm water drains)			

2. Market /Food stalls

	Yes	No	Remarks
a) Food stored/ placed off the floor/ ground			
b) Food storage spaces/ stalls clean			
c) Dry foods storage spaces/stalls free from moisture			
d) Food storage spaces free from vermin and vector infestation			
e) Availability of adequate walkways (at least 2m between stalls)			
f) Proper handling of raw food (e.g. separation of perishable from non-perishables, refrigeration of perishables)			
g) Food handlers are medically examined and certified every six (6) months (verify with presence of certificates of medical fitness)			
h) Food handlers wearing appropriate gear (head covers and uniform/apron, covered shoes)			

3. Fire and Safety Practices

	Yes	No	Remarks
a) Premises site layout displayed in a conspicuous place			
b) At least one first aid box station available			
c) Firefighting equipment/material available and functional			
d) Fire-detecting equipment available and functional			
e) Availability of unobstructed emergency escape routes			
f) Availability of emergency assembly points			
g) Availability of a trained fire and safety committee in place			

Key observations (positives and negatives/ include best practices/ Innovations)

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Recommendations/follow-up actions

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Name and signature of Inspecting Officer: .....

Title and contact: .....

Name and signature of approving Officer: .....

Title and contact: .....

HEALTH INSPECTION CHECKLIST FOR EATING HOUSES

Reference is made to the Public Health (Eating Houses) rules and other relevant laws.
(Attach pictorial evidence and supporting documents where necessary)

General Information

Date of Inspection: .....

Name of Premises: .....

District/ City..... Sub county/ Division: .....

Parish/Ward:..... Village/Cell .....

Block Number:..... Plot No.:..... Street: .....

Proprietor's Name :.....

Premises/Proprietor's Contact Number: .....

Manager's Name and Contact:.....

Number of Staff : Male ..... Female: .....

Description of premises description:

.....

.....

.....

General Inspection

Certificate for Suitability of Premises displayed in conspicuous place	☐ Yes	☐ No
Valid license displayed in a conspicuous place	☐ Yes	☐ No

Physical Status of Premises

General Inspection

a)	State of repair	☐ Sound	☐ Unsound
b)	Cleanliness of the premises	☐ Clean	☐ Dirty/Filthy
c)	Floors are impervious	☐ Yes	☐ No
d)	Floors are not slippery	☐ Yes	☐ No
e)	No evidence of vermin and vector infestation	☐ Yes	☐ No
f)	Ventilation is adequate and appropriate	☐ Yes	☐ No
g)	Adequate lighting	☐ Yes	☐ No
h)	Screens are fitted on open windows and doors	☐ Yes	☐ No

Food Supply and Storage

a) Availability of record for food supply and source ☐ Yes ☐ No
b) Food labeled and stored off the floor ☐ Yes ☐ No
c) Food storage spaces are clean and organized ☐ Yes ☐ No
d) Food store vector and vermin proof ☐ Yes ☐ No
e) Appropriate handling and storage of cooked food ☐ Yes ☐ No
f) Appropriate separation of raw and cooked food (separation of food) ☐ Yes ☐ No

Food Preparation Practices

a) Fruits and vegetables washed before preparation ☐ Yes ☐ No
b) Cross-contamination of raw and cooked food avoided ☐ Yes ☐ No
c) Hand contact with ready-to-eat food minimized ☐ Yes ☐ No
d) Evidence of food adulteration avoided (e.g., use of drugs for cooking, use of chemicals for preservation, food preparation in harmful materials like polythene bags/Kaveera) ☐ Yes ☐ No

Food hygiene Practices

a) Food handlers are medically examined and certified every six (6) months (verify with presence of certificates of medical fitness) ☐ Yes ☐ No
b) Food handlers are clean (body and clothing, i.e., fingernails, hair, and general body cleanliness) ☐ Yes ☐ No
c) Food handlers wearing appropriate gears (head covers and uniform/apron, covered shoes) ☐ Yes ☐ No
d) Availability of functional hand washing facilities with soap and water ☐ Yes ☐ No
e) Food handlers free of obvious signs of infections and illness (flu, cough, open sores and wounds, ringworms, etc.) ☐ Yes ☐ No
f) Availability of cloak room and lockers ☐ Yes ☐ No
g) Availability of single-use disposal towels ☐ Yes ☐ No
h) Appropriate behavior of food handlers (avoids spitting, finger licking, unguarded sneezing and coughing, scratching genitalia and anus) ☐ Yes ☐ No

Kitchen and Equipment

a) Availability of a kitchen ☐ Yes ☐ No
b) State of repair ☐ Sound ☐ Unsound
c) The kitchen is kept clean in all areas (including surfaces) ☐ Yes ☐ No
d) Appropriate means of smoke escape ☐ Yes ☐ No
e) Appropriate washing area with both cold and hot running water ☐ Yes ☐ No
f) Appropriate drying area for equipment and utensils ☐ Yes ☐ No

g)	Appropriate storage of cooking equipment and utensils	☐ Yes	☐ No
h)	All food equipment washed, rinsed and dried after use	☐ Yes	☐ No
i)	Kitchen free of vermin and vector infestation	☐ Yes	☐ No
j)	Availability of drying area/ rack	☐ Yes	☐ No
k)	No evidence of live animal or human habitation	☐ Yes	☐ No
l)	Availability of functional hand-washing facility with both soap and water	☐ Yes	☐ No

Fire and Safety Practices

a.	Fire detecting equipment available and functional	☐ Yes	☐ No
b.	Availability of fully serviced fire extinguishers	☐ Yes	☐ No
c.	Fire extinguishers/firefighting plan available and functional	☐ Yes	☐ No
d.	Availability of unobstructed emergency escape routes and assembly points	☐ Yes	☐ No
e.	Regular training of employees on fire safety practices	☐ Yes	☐ No

Solid Waste Management

a)	Availability of clean, covered, waterproof and lined refuse bins	☐ Yes	☐ No
b)	Evidence of waste segregation for biodegradable and non-biodegradable waste	☐ Yes	☐ No
c)	Refuse bins emptied when necessary	☐ Yes	☐ No
d)	Area around the refuse bin is clean	☐ Yes	☐ No
e)	Evidence of utilization of a licensed service provider (i.e., receipts or contracts)	☐ Yes	☐ No

Waste Water Management

a.	Availability of a functional waste water drainage system (i.e., grease trap, soak pits)	☐ Yes	☐ No
b.	Appropriate waste water handling	☐ Yes	☐ No

Safe Water Supply

a)	Availability of a reliable water source	☐ Yes	☐ No
b)	Availability of a safe water source	☐ Yes	☐ No
c)	Availability of clean water containers (collection, reservoir and storage)	☐ Yes	☐ No
d)	Provision of safe drinking water	☐ Yes	☐ No

Sanitation Facilities

a.	Availability of adequate toilet facilities separated by sex	☐ Yes	☐ No
b.	Availability of cleaning services	☐ Yes	☐ No
c.	Functional hand washing facilities available	☐ Yes	☐ No
d.	Availability of adequate and functional shower rooms separated by sex	☐ Yes	☐ No
e.	Provision of adequate lock rooms	☐ Yes	☐ No
f.	Availability of a functional handwashing facility with both soap and water	☐ Yes	☐ No
g.	Provision of appropriate anal cleansing material in all stalls	☐ Yes	☐ No

Key observations (positives and negatives/ include best practices/ Innovations)

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Recommendations/follow-up actions

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Name and signature of Inspecting Officer: .....

Title and contact: .....

Name and signature of approving Officer: .....

Title and contact: .....

HEALTH INSPECTION CHECKLIST FOR HEALTHCARE FACILITIES

Reference is made to the Public Health rules and other relevant laws.
(Attach pictorial evidence and supporting documents where necessary)

Part A

District/ City; ....., Sub County/Division; .....

Parish/Ward ..... Cell/Village:.....

Name of HCF; ..... Ownership (Govt, PNFP, PFP); .....

Level of Facility:..... Location (Urban/ rural); .....

Date of Inspection: .....

Name of owner:..... Contact: .....

Name of facility in charge:..... Contact: .....

IPC/WASH Focal person: ..... Contact:.....

Premises description (ie permanent, semi-permanent etc)

.....

.....

Valid operation license displayed in a conspicuous place where applicable Yes ☐ No ☐

Part B

Rooms

1. Physical status of premises

Number of rooms: .....

a)	General state of repair	☐ Sound	☐ Unsound
b)	Premises are Clean	☐ Clean	☐ Dirty
c)	Floors are impervious	☐ Yes	☐ No
d)	Floors slippery	☐ Yes	☐ No
e)	Premises free of vector and vermin infestations	☐ Yes	☐ No
f)	Ventilation is adequate	☐ Yes	☐ No
g)	Lighting is adequate	☐ Yes	☐ No
h)	Adequate spacing of at least 1.5 meter (4.5 feet) between patient beds	☐ Yes	☐ No
i)	One patient per bed policy ensured at the facility	☐ Yes	☐ No
j)	Floor Area per bed (40sqft)	☐ Adequate	☐ Inadequate

k) Walls Height (8-10ft) ☐ Yes ☐ No

l) Mosquito screens (wire mesh) screens are on open windows and doors ☐ Yes ☐ No

m) Appropriate ramps in place for PWDs ☐ Yes ☐ No

2. External space/ Compound

a. Is it paved or grass-covered? ☐ Yes ☐ No

b. Is compound kept/ well maintained ☐ Yes ☐ No

c. Area well maintained and drained if paved ☐ Yes ☐ No

d. Walkways demarcated ☐ Yes ☐ No

e. Parking yards adequate and well demarcated ☐ Yes ☐ No

3. Water Sanitation and Hygiene (WASH)

Domain	Subdomain		Score (1=Yes 0=No)
4. WASH-IPC programming	**WASH-IPC personnel and wards**	WASH-IPC focal point person in place	
		WASH-IPC focal point person trained	
		WASH-IPC committee in place	
		Does the committee consist of **ALL** the following Environmental Health Workers, Nurses, Hospital Administrators, Lab Staff, Clinical Officers, and cleaners?	
		WASH-IPC committee functional (Verify with previous quarterly meeting minutes)	
		IPC WASH committee supported by budget line (confirm with HCF approved budget)	
		WASH-IPC IEC materials displayed	
		WASH FIT training conducted in the facility in the last 6 months	
5. Water Supply	**Source & Access**	Main source of water improved[1]? (specify type of main source) ————————————————	
		Main source located within premises	
		Main source within 500m if located outside premises	
		Water accessible to both patients/caregivers and staff at all times	

1 **IMPROVED WATER SOURCE IS:** piped supply inside the building; piped supply outside the building; Tube well/ borehole; protected dug well; protected spring; Rain water

Domain	Subdomain		Score (1=Yes 0=No)
	Quantity	Water available at the main source during the time of the survey?	
		Health facility stores sufficient water that meets needs for at least 2 days	
		Healthcare facility has severe shortage or lack of water at least once within a year	
	Quality	Water from main source regularly tested for microbial quality *E.g. E-coli*	
		Improved latrines within the premises available	
6. Sanitation facilities	Access	Separate toilets for men and women (patients/ caregiver) available on the premises	
		Separate toilet for staff available on the premises	
		Toilet or improved latrine stance that meets the needs of people with reduced mobility[2] available	
		A wash room designated for women and girls, which provides facilities[3] to manage menstrual hygiene needs available	
	Quantity	On an average day, how many in-patients are at the healthcare facility?	
		On average, how many out-patients are seen per day?	
		How many usable[4] toilets or improved latrine stances are available to in-patients?	
		How many usable toilets or improved latrine stances are available to out-patients?	
		Latrine or toilets labelled for sex separation	

2 **A toilet or latrine can be considered accessible** for people with limited mobility if it meets the following conditions:
• can be accessed without stairs or steps; handrails for support are attached either to the floor or sidewalls; the door is at least 80 cm wide; and the door handle and seat are within reach of people using wheelchairs or crutches/sticks.

3 A toilet or latrine can be considered to **have menstrual hygiene facilities** if it: Has a bin with a lid on it for disposal of used menstrual hygiene products; and water and soap available in a private space for washing.

4 **USABLE TOILET** should be **available, functional** and **private** at the time of the survey or questionnaire.
Toilets are **available** when within premises, doors are unlocked or with a key available at all times. To be **functional**, the hole or pit is not blocked, water is available for flush/pour flush toilets, and there are no cracks or leaks in the toilet structure. To be considered **private**, the toilet stall has doors that can be locked from the inside and there are no large gaps or holes in the structure. If any of these criteria are not met, the toilet/latrine is not counted as usable.
Points of care in the facility include; before touching a patient, before clean/aseptic procedure, after touching a patient, after touching patient's surroundings

Domain	Subdomain		Score (1=Yes 0=No)
7. Hand Hygiene Facilities	**Access**	A functional hand washing facility with soap within 5 meters of *existing toilet blocks available*	
		A functional hand washing facility with soap and water or hand sanitizer *at all points of care in the facility available*	
		Procedure of hand washing known by health care worker (please observe)	
8. Environmental Cleanliness	**Training, and Protocols**	Guideline or procedure (SOP) for cleaning in place	
		Staff with cleaning responsibilities received training on IPC	
	Equipment and Supplies	Adequate supplies for cleaning *(detergents, mops, buckets, wheelbarrow, squeezers etc)* in the wards and outpatients	
		Adequate supplies used for cleaning in the labor and delivery ward	
		PPE available at all times and in sufficient quantity for all health care workers and cleaners	
	Facility Hygiene	Ward visibly clean and free from dust and soil	
		Uncleaned spills from bodily fluids (blood, urine, faeces, vomit, etc.) on ward	
		Beds, mattresses, pillows and/or mats cleaned between patients' usage	
		Visible uncontained solid waste on facility premises	
9. Waste Management	**Segregation & storage**	Waste safely segregated[5] into at least three labelled bins/ containers, including sharps waste, infectious waste and non-infectious general waste	
		Recyclable non-hazardous waste is segregated and sent to municipal recycling plants	
		All infectious, non-infectious and sharps waste safely[6] stored in a protected, secure and sufficient area before treatment or disposal	

5 Safe segregation of waste: The bins should be colour-coded and/or clearly labelled, no more than three quarters (75%) full, and each bin should not contain waste other than that corresponding to its label. Bins should be appropriate to the type of waste they are to contain; sharps containers should be puncture-proof and others should be leak-proof (lined). Bins for sharps waste and infectious waste should have lids.

6 Safely stored in a protected area: Fenced area protected from flooding; lined and covered pit > 30 m from water source; and no unprotected health care waste is observed. If waste removed off site, both the site and the holding area (minus the pit) should comply with the above requirements.

Domain	Subdomain		Score (1=Yes 0=No)
		Infectious waste is stored for no longer than the safe limit (as determined by climate) before treatment/disposal	
		A well maintained, functional incinerator of sufficient capacity for the treatment of infectious wastes and sharps available	
		Placenta pit available where pathological waste is appropriately buried	
		Pharmaceutical waste treated and disposed of safely either at a centrally managed safe treatment and disposal facility (e.g off-site) by sending back to the manufacturer or by incineration by industries using high temperature kilns	
		Staff handling waste and health care workers are vaccinated against Hepatitis B (and any other recommended vaccinations, according to national guidelines)	

10. Fire and Safety Practices

a) Fire detecting equipment available and functional ☐ Yes ☐ No

b) Availability of fully serviced fire extinguishers ☐ Yes ☐ No

c) Fire extinguishers/firefighting plan available and functional ☐ Yes ☐ No

d) Availability of unobstructed emergency escape routes and assembly points ☐ Yes ☐ No

e) Regular training of employees on fire safety practices ☐ Yes ☐ No

f) Availability of functional lightning conductors ☐ Yes ☐ No

Key observations (positives and negatives/ include best practices/ Innovations)

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Recommendations/follow-up actions

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Name and signature of Inspecting Officer: .....

Title and contact: .....

Name and signature of approving Officer: .....

Title and contact: .....

HEALTH INSPECTION CHECKLIST FOR SALONS, BEAUTY SHOPS/ PARLOURS (INCLUDING SAUNAS & SPAS), BARBERSHOPS, DRY CLEANING AND LAUNDRY SERVICES

Reference is made to the Public Health rules and other relevant laws.
(Attach pictorial evidence and supporting documents where necessary)

Date of Inspection: .....

Name of Facility: .....

Facility category: .....

District/ City..... Sub-County/ Division: .....

Parish/Ward ..... Cell /Village.....

Landlord Contact Number and Name: .....

Proprietor/ Owner of the business Contact and Name.....

Staff No: Male ..... Female: .....

Premises description (i.e. permanent, semi-permanent, etc)

.....

Valid trading license displayed in a conspicuous place ☐ Yes ☐ No

1. Physical status of premises

a.	Number of rooms:	.....	
b.	State of repair	☐ Sound	☐ Unsound
c.	Premises are clean	☐ Clean	☐ Dirty
d.	Floors are impervious	☐ Yes	☐ No
e.	Floors slippery	☐ Yes	☐ No
f.	Premises free of vector and vermin infestations	☐ Yes	☐ No
g.	Ventilation is adequate	☐ Yes	☐ No
h.	Lighting is adequate	☐ Yes	☐ No
i.	Floor Area per bed (within massage rooms)	☐ Adequate	☐ Inadequate
j.	Walls Height (8 to 10ft)	☐ Adequate	☐ Inadequate

2. Infection control

a.	Attendants are medically examined and certified every six (6) months (verify with presence of certificates of medical fitness)	☐ Yes	☐ No
b.	Precautions to prevent infections in place (Hand washing, use of disinfection, sterilization of equipment, use of gloves)	☐ Yes	☐ No
c.	Appropriate decontamination and sterilization of equipment (e.g., shavers, clippers, scissors, dryers, combs, etc.)	☐ Yes	☐ No

d.	PPE available and used by workers (aprons, face masks, capes, gloves, closed shoes, etc.)	☐ Yes	☐ No	
e.	Availability of a reliable safe water supply	☐ Yes	☐ No	
f.	Availability of a functional Hand washing facility	☐ Yes	☐ No	
g.	Clean linen (barber capes, towels, etc.)	☐ Clean	☐ Dirty	
h.	State of linen (condition of linen)	☐ Sound	☐ Unsound	
i.	Clean and wash hand basins and sinks	☐ Yes	☐ No	
j.	Appropriate storage of clean linen/towels/capes	☐ Yes	☐ No	
k.	Separation of dirty or used linen from clean	☐ Yes	☐ No	

3. Waste management

a. Litter bins with covers provided	☐ Yes	☐ No
b. Waste safely segregated (sharps and other waste)	☐ Yes	☐ No
c. Appropriate drainage of storm water	☐ Yes	☐ No
d. Appropriate drainage of waste water	☐ Yes	☐ No
e. Evidence of utilization of a licensed waste management service provider for final disposal	☐ Yes	☐ No

4. Sanitation Facilities

a. Availability of toilet facilities	☐ Yes	☐ No
b. Availability of Janitorial/cleaning services	☐ Yes	☐ No
c. Availability of bathrooms	☐ Yes	☐ No
d. Availability of changing rooms (cloak rooms)	☐ Yes	☐ No
e. Availability of and well-maintained laundry rooms/areas	☐ Yes	☐ No

5. Fire and safety practices

a. First aid box stations available	☐ Yes	☐ No
b. Firefighting equipment/materials available and functional	☐ Yes	☐ No
c. Fire detecting equipment available and functional	☐ Yes	☐ No
d. Availability of unobstructed emergency escape routes	☐ Yes	☐ No
e. A well-equipped standard first aid kit available	☐ Yes	☐ No
f. Staff routinely medically examined (refer to reports)	☐ Yes	☐ No

Key observations (positives and negatives/ include best practices/ Innovations)

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Recommendations/follow-up actions

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Name and signature of Inspecting Officer: .....

Title and contact: .....

Name and signature of approving Officer: .....

Title and contact: .....

HEALTH INSPECTION CHECKLIST FOR LODGING HOUSES, HOTELS, AND RECREATION CENTERS

Reference is made to the Public Health (Lodging Houses, Hotels Act) rules and other relevant laws.
(Attach pictorial evidence and supporting documents where necessary)

Date of Inspection: .....

Name of Facility: .....

Facility category: .....

District/ City..... Sub-County/ Division: .....

Parish/Ward ..... Cell /Village.....

Landlord Contact Number and Name: .....

Proprietor/ Owner of the business Contact and Name.....

Staff No: Male ..... Female: .....

Premises description (i.e. permanent, semi-permanent, etc)

.....

Valid trading license displayed in a conspicuous place ☐ Yes ☐ No

Rooms

1. Physical status of premises

a. Number of rooms:	.....	
b. State of repair	☐ Clean	☐ Dirty
c. Premises are clean	☐ Sound	☐ Unsound
d. Floors are impervious	☐ Yes	☐ No
e. Floors slippery	☐ Yes	☐ No
f. Premises free of vector and vermin infestations	☐ Yes	☐ No
g. Ventilation is adequate	☐ Yes	☐ No
h. Lighting is adequate	☐ Yes	☐ No
i. Floor Area per bed (within massage rooms)	☐ Adequate	☐ Inadequate
j. Walls Height (8 to 10ft)	☐ Adequate	☐ Inadequate
k. Evidence of repair, resurface and decoration every month of November	☐ Yes	☐ No
l. Clean linen (bedsheets, towels, etc.)	☐ Clean	☐ Dirty
m. State of linen	☐ Sound	☐ Unsound
n. Leakproof mattress covers (mackintosh)	☐ Yes	☐ No
o. Screens on open windows and doors	☐ Yes	☐ No

p. Hand railings are in place and secure ☐ Yes ☐ No

q. Copy of rule 8 (Duties of lodger) of the Public Health lodging house rules displayed in every room ☐ Yes ☐ No

r. Copy of rule 7 second schedule of the Public Health lodging house rules displayed in every room ☐ Yes ☐ No

2. External space/ Compound

a) Is it paved or grass-covered? ☐ Yes ☐ No

b) Is compound well-managed ☐ Yes ☐ No

c) Area well maintained and drained if paved ☐ Yes ☐ No

d) Walkways demarcated ☐ Yes ☐ No

e) Parking Yards adequate and well demarcated ☐ Yes ☐ No

3. Solid waste management

a. Availability of clean, covered, waterproof, and lined refuse bins ☐ Yes ☐ No

b. Refuse bins emptied as necessary ☐ Yes ☐ No

c. Appropriate segregation of Solid waste ☐ Yes ☐ No

d. The area around the refuse bin is clean ☐ Yes ☐ No

e. Evidence of utilization of a licensed service provider (e.g., receipts or contracts) ☐ Yes ☐ No

f. Evidence of training of Solid waste handlers ☐ Yes ☐ No

g. Solid waste management plan available and followed ☐ Yes ☐ No

4. Waste water management

a) Availability of onsite wastewater treatment before final disposal ☐ Yes ☐ No

b) Availability of a functional wastewater drainage system ☐ Yes ☐ No

5. Safe water supply

a. Availability of a reliable water source ☐ Yes ☐ No

b. Availability of a safe water source ☐ Yes ☐ No

c. Availability of clean water containers (collection, reservoir, and storage) ☐ Yes ☐ No

d. Provision of safe drinking water ☐ Yes ☐ No

6. Sanitation Facilities

a. Availability of adequate toilet facilities separated by sex ☐ Yes ☐ No
b. Availability of cleaning services ☐ Yes ☐ No
c. Hand washing facilities available ☐ Yes ☐ No
d. Availability of adequate shower rooms separated by sex ☐ Yes ☐ No
e. Availability of a special stance allocation for PWDs ☐ Yes ☐ No
f. Availability of toilet paper ☐ Yes ☐ No
g. Availability of lined bins with covers for menstrual hygiene waste ☐ Yes ☐ No

7. Fire safety practices

a. Fire detecting equipment available and functional ☐ Yes ☐ No
b. Availability of fully serviced fire extinguishers ☐ Yes ☐ No
c. Fire safety plan available and implemented ☐ Yes ☐ No

8. Public swimming pools

a. Approved architectural plans ☐ Yes ☐ No
b. Clear marking of the pool (deep and shallow end) ☐ Yes ☐ No
c. Appropriate pool barriers available ☐ Yes ☐ No
d. Pool water clarity ☐ Turbid ☐ Clear
e. Maintenance plan in place (evidence of pool cleaning) ☐ Yes ☐ No
f. Functional filtration system available ☐ Yes ☐ No
g. Non-slippery deck and coping ☐ Yes ☐ No
h. Presence of trained supervisory personnel ☐ Yes ☐ No
i. Record of PH tests for pool water available ☐ Yes ☐ No
j. Record of microbiological tests for pool water available ☐ Yes ☐ No
k. Pool water PH in range 7.2 – 7.8 ☐ Yes ☐ No
l. Availability of secure stainless-steel handrails and ladders ☐ Yes ☐ No
m. First aid box stations available at the swimming pool ☐ Yes ☐ No
n. Standard operating procedures (SOPs) visibly displayed ☐ Yes ☐ No

9. Sanitation Facilities at the poolside

a. Adequate toilet facilities separated by sex available ☐ Yes ☐ No
b. Availability of Janitorial (cleaning) services ☐ Yes ☐ No
c. Adequate shower rooms separated by sex available ☐ Yes ☐ No
d. Adequate changing rooms separated by sex available ☐ Yes ☐ No

Key observations (positives and negatives/ include best practices/ Innovations)

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Recommendations/follow-up actions

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Name and signature of Inspecting Officer: .....

Title and contact: .....

Name and signature of approving Officer: .....

Title and contact: .....

Second Schedule.

rule 7.

Permitted Number.

The Public Health (Lodging House) Rules.

Address _____

_____

Room No. _____

The number of persons who may sleep in this room are _____

It is an offence under rule 9(c) of the Public Health (Lodging Houses) Rules for any person to allow a greater number of persons than is shown on this notice to sleep in this room.

_____

History: S.I. 269-30

Cross References

Hotels Act, Cap. 90.
Local Governments Act. Cap. 243
Public Health (Drainage and Sanitation) Rules, S.I. 281-4.
Public Health (Grade II Building) Rules, S.I. 281-3.
Town and Country Planning Act, Cap. 246.
Trade (Licensing) Act, Cap. 101.

_____

8. Duties of lodger.

Every lodger shall -

a) every day before two o'clock in the afternoon remov all refuse from the accommodation which has been let to him or her and cleanse every receptacle used for the refuse;
b) keep clean his or her accommodation and any fittings or appliances in the accommodation; and
c) keep clean his or her furniture, bedding, household utensils and that of any person sharing his or her accommodation.

SANITARY INSPECTION FOR WATER POINTS

j. Public tap stands

Part 1. General information:

District/City: ..... Sub-County/Division: .....

Parish/Ward: ..... Village/Cell: .....

GPS coordinates: ..... Approximate number of people served: .....

Water sample taken? ..... Sample ID .....

Date of inspection: ..... Name of water source: .....

Water User Committee (Verify with previous quarterly meeting minutes/ registers):

Present and functional ☐ Present and inactive ☐ Absent ☐

Part 2. Risk assessment:

		Observation	
a)	Is the tap leaking or damaged?	☐ Yes	☐ No
b)	Does surface water collect around the tap stand?	☐ Yes	☐ No
c)	There is no drainage channel leading from the tap stand	☐ Yes	☐ No
d)	Are the tap stand pipes exposed?	☐ Yes	☐ No
e)	Is human excreta within 10m of tap stand?	☐ Yes	☐ No
f)	Is there a broken/open sewer within 30m of tap stand?	☐ Yes	☐ No
g)	Has there been discontinuity in the last 10 days from this tap stand?	☐ Yes	☐ No
h)	Are there signs of leakages in the mains pipes supplying this tap stand?	☐ Yes	☐ No
i)	Did the community report any leakages in the last week?	☐ Yes	☐ No
j)	Is the main pipe exposed anywhere along the system?	☐ Yes	☐ No
k)	Is the area around the tap stand unprotected?	☐ Yes	☐ No

Risk of contamination (add the number of 'Yes' answers): ..... /11

Part 3. Results and comments:

9-12 = Very high	6-8 = High	3-5 = Medium	0-2 = Low

Results and Recommendations:

The following risks were observed

Name and signature of Inspecting officer:

.....

k. Protected spring

Part 1. General information:

District/City: ..... Sub-County/Division: .....

Parish/Ward: ..... Village/Cell: .....

GPS coordinates: ..... Approximate number of people served: .....

Water sample taken? ..... Sample ID .....

Date of inspection: ..... Name of water source: .....

Water User Committee (Verify with previous quarterly meeting minutes/ registers):

Present and functional ☐ Present and inactive ☐ Absent ☐ ious quarterly meeting minutes/ registers):

Present and functional ☐ Present and inactive ☐ Absent ☐

Part 2. Risk assessment:

		Observation	
a.	Is the yield insufficient (20-liter container does not fill up within 3 minutes)?	☐ Yes	☐ No
b.	Is the collection or spring box defective?	☐ Yes	☐ No
c.	Is the masonry or backfill area protecting the spring faulty or eroded?	☐ Yes	☐ No
d.	Is the fence around the catchment area defective?	☐ Yes	☐ No
e.	If there is an overflow pipe, is it unsanitary?	☐ Yes	☐ No
f.	Do animals have access to the spring?	☐ Yes	☐ No
g.	Is the diversion channel above the spring absent or defective?	☐ Yes	☐ No
h.	There is a latrine or waste dump site upstream	☐ Yes	☐ No
i.	Are there human activities upstream that are likely to interfere with the functionality of the spring (e.g. children playing, washing, brick making, agricultural activities)	☐ Yes	☐ No

Risk of contamination (add the number of 'Yes' answers): ..... /9

Part 3. Results and comments:

9-10 = Very high	6-8 = High	3-5 = Medium	0-2 = Low

Note: If either 8 or 9 are scored as risks, consider the risk of contamination of the water point as very high.

Results and Recommendations:

The following risks were observed

Name and signature of Inspecting officer:

.....

I. Shallow Well/ Borehole with a Hand Pump

Part 1. General information:

District/City: ..... Sub-County/Division: .....
Parish/Ward: ..... Village/Cell: .....

GPS coordinates: ..... Approximate number of people served: .....

Water sample taken? ..... Sample ID .....

Date of inspection: ..... Name of water source: .....

Water User Committee (Verify with previous quarterly meeting minutes/ registers):

Present and functional ☐ Present and inactive ☐ Absent ☐

Part 2. Risk assessment

	Observation	
a. Is the yield insufficient? (20-liter container does not fill up within 4 minutes)	☐ Yes	☐ No
b. Is there a latrine within 10 m radius of the well?	☐ Yes	☐ No
c. Is there any other source of contamination within 10 m of the well?	☐ Yes	☐ No
d. Is the drainage poor, causing stagnant water around the well?	☐ Yes	☐ No
e. There is no soak way pit	☐ Yes	☐ No
f. Is the drainage channel defective? (broken, stagnation of water)	☐ Yes	☐ No
g. Is the apron (parapet wall) defective?	☐ Yes	☐ No
h. Is the concrete floor less than 1m wide around the well?	☐ Yes	☐ No
i. Is the well unfenced?	☐ Yes	☐ No

Risk of contamination (add the number of 'Yes' answers): ...../8

Part 3. Results and comments:

8-9 = Very high	6-7 = High	3-5 = Medium	0-2 = Low

Note: If either 2 or 3 are scored as risks, consider the risk of contamination of the water point as very high.

Results and Recommendations:

The following risks were observed

Name and signature of Inspecting officer:

.....

m. Rainwater Harvesting Tank

Part 1. General information:

District/City: ..... Sub-County/Division: .....
Parish/Ward: ..... Village/Cell: .....

GPS coordinates: ..... Approximate number of people served: .....

Water sample taken? ..... Sample ID .....

Date of inspection: ..... Name of water source: .....

Water User Committee (Verify with previous quarterly meeting minutes/ registers):

Present and functional ☐ Present and inactive ☐ Absent ☐

Part 2. Risk assessment	Observation	
a. Are there visible signs of contamination on the roof (e.g., faeces, dirt, leaves)?	☐ Yes	☐ No
b. Is the first flush diverter absent?	☐ Yes	☐ No
c. Is the gutter system that collects rainwater dirty or blocked?	☐ Yes	☐ No
d. Are there any problems with the filter box or first flush system at the tank inlet?	☐ Yes	☐ No
e. Is there any other point of entry to the tank that is not properly covered?	☐ Yes	☐ No
f. Is the top or wall of the tank defective? (leaking, broken, cracked)	☐ Yes	☐ No
g. Is the tap leaking or broken?	☐ Yes	☐ No
h. Is the concrete floor under the tap missing, broken, or dirty?	☐ Yes	☐ No
i. Is the water collection area inadequately drained?	☐ Yes	☐ No
j. Is there any source of contamination around the tank or water collection area?	☐ Yes	☐ No
k. Is a bucket in use and left in a place where it may become contaminated? (in case of an underground tank)	☐ Yes	☐ No
l. Is the capacity of the tank insufficient compared to the population served?	☐ Yes	☐ No
m. Is the tank unprotected from vandalism?	☐ Yes	☐ No
n. Is the platform defective? (surging, cracked)	☐ Yes	☐ No

Risk of contamination (add the number of 'Yes' answers): ...../14

Part 3. Results and comments:

10-14 = Very high	6-10 = High	4-6 = Medium	0-4 = Low

Results and Recommendations:

The following risks were observed

Name and signature of Inspecting officer:

.....

HEALTH INSPECTION CHECKLIST FOR FOOD PROCESSING, MANUFACTURING/FACTORY FACILITIES

Reference is made to the HACCP Principles and Codex Alimentarius.
(Attach pictorial evidence and supporting documents where necessary)

Date of Inspection:.....

Name of Facility: .....

Nature of Facility: .....

District/ City:..... Sub-county/ Division: .....

Parish/Ward ..... Zone/Village:..... Block Number:.....

Plot Number: ..... Street: .....

Proprietor's name and contact.....

Manager's name and contact: .....

Staff No: Male ..... Female: .....

Premises description (ie permanent, semi-permanent etc)

.....

.....

14. Food Establishment Inspection

a. Food establishment has a valid suitability of premises certificate and is displayed in a conspicuous place	☐ Yes	☐ No
b. Valid trading license displayed in a conspicuous place	☐ Yes	☐ No

15. Physical Status of Premises

a. Adequate floor space available	☐ Yes	☐ No
b. State of repair	☐ Sound	☐ Unsound
c. Premises are clean	☐ Clean	☐ Dirty
d. Floors are impervious	☐ Yes	☐ No
e. Non-slippery floors	☐ Yes	☐ No
f. Premises are vector, vermin, and rodent proof	☐ Yes	☐ No
g. Ventilation is adequate	☐ Yes	☐ No
h. Lighting is adequate	☐ Yes	☐ No
i. Screens are available on open windows, doors, and any other openings	☐ Yes	☐ No
j. Production line design minimizes food contamination	☐ Yes	☐ No
k. Food safety plan displayed	☐ Yes	☐ No

16. External Environment

a.	Pathways/walkways properly maintained	☐ Yes	☐ No
b.	Compound clean and well maintained	☐ Yes	☐ No
c.	Access ramps properly maintained and in place	☐ Yes	☐ No
d.	Steps and landings unobstructed, clean, and provided with handrails	☐ Yes	☐ No
e.	Cycle racks available	☐ Yes	☐ No
f.	Adequate lighting at all times	☐ Yes	☐ No
g.	Appropriate signage in place	☐ Yes	☐ No

17. Food Storage

a)	Appropriate storage for raw materials for processing	☐ Yes	☐ No
b)	Appropriate storage for the final product (food)	☐ Yes	☐ No
c)	Food storage spaces clean	☐ Yes	☐ No
d)	Food stored off the ground	☐ Yes	☐ No
e)	Availability of record of food supply and source	☐ Yes	☐ No
f)	Application of the (First in, first out) FIFO principle	☐ Yes	☐ No
g)	Observed application of (Hazard analysis and critical control points) HACCP principles	☐ Yes	☐ No
h)	Food safety guidelines displayed	☐ Yes	☐ No

18. Packaging and Labeling

a.	Application of batch and serial numbers	☐ Yes	☐ No
b.	Certification of final product by UNBS	☐ Yes	☐ No
c.	Application of material safety data sheet for each package (manufacture date, expiry date, ingredients, contraindications, method of food processing, preservatives, etc.)	☐ Yes	☐ No
d.	Clear labeling of content of food	☐ Yes	☐ No
e.	Seals are intact	☐ Yes	☐ No

19. Food Hygiene/Workers' Practices

a)	Food handlers are medically examined and certified	☐ Yes	☐ No
b)	Food handlers are clean in body and clothing (fingernails, hair, and general body cleanliness)	☐ Yes	☐ No
c)	Availability of functional hand washing facilities with soap and water	☐ Yes	☐ No
d)	Food handlers free of obvious signs of infections and illness (flu, cough, open sores, wounds, ringworms, etc.)	☐ Yes	☐ No
e)	Availability of cloakroom and lockers	☐ Yes	☐ No

f) All workers have appropriate PPE (masks, aprons, safety shoes, headgear) ☐ Yes ☐ No

g) Continuous job training on safety ☐ Yes ☐ No

h) Well-stipulated guidance and supervision of workers ☐ Yes ☐ No

20. Kitchen and Equipment

a. Adequate spacing available ☐ Yes ☐ No

b. Appropriate lighting and ventilation available ☐ Yes ☐ No

c. Impervious worktops are present ☐ Yes ☐ No

d. All food equipment adequately washed and rinsed thoroughly before and after use ☐ Yes ☐ No

e. The kitchen is kept clean in all areas ☐ Yes ☐ No

f. Adequate and safe storage for kitchen equipment ☐ Yes ☐ No

g. Availability of a raised fireplace with a chimney ☐ Yes ☐ No

21. Fire and Safety Practices

a. Fire detecting equipment available and functional ☐ Yes ☐ No

b. Availability of fully serviced fire extinguishers ☐ Yes ☐ No

c. Fire safety plan available and implemented ☐ Yes ☐ No

d. Availability of unobstructed emergency escape routes ☐ Yes ☐ No

e. Properly marked assembly points available ☐ Yes ☐ No

f. Regular training of employees on fire safety practices ☐ Yes ☐ No

22. Solid Waste Management

a. Availability of clean, covered, waterproof, and lined refuse bins ☐ Yes ☐ No

b. Refuse bins emptied as necessary ☐ Yes ☐ No

c. Availability of appropriate waste segregation techniques ☐ Yes ☐ No

d. Area around the refuse bin is clean ☐ Yes ☐ No

e. Evidence of utilization of a licensed service provider (e.g., receipts or contracts) ☐ Yes ☐ No

f. Evidence of training of solid waste handlers ☐ Yes ☐ No

g. Solid waste management plan available and followed ☐ Yes ☐ No

h. Appropriate refuse storage area ☐ Yes ☐ No

23. Waste Water Management

a. Availability of onsite wastewater treatment before final disposal ☐ Yes ☐ No

b. Availability of a functional wastewater drainage system (e.g., grease trap, soak pits) ☐ Yes ☐ No

24. Safe Water Supply

a. Availability of a reliable water source ☐ Yes ☐ No

b. Availability of a safe water source ☐ Yes ☐ No

c. Availability of clean water containers (collection, reservoir, and storage) ☐ Yes ☐ No

d. Provision of safe drinking water ☐ Yes ☐ No

25. Sanitation Facilities

a. Availability of adequate toilet facilities separated by sex ☐ Yes ☐ No

b. Availability of cleaning services ☐ Yes ☐ No

c. Hand washing facilities available ☐ Yes ☐ No

d. Availability of adequate shower rooms separated by sex ☐ Yes ☐ No

e. Availability of a special stance allocation for people with disabilities (PWDs) ☐ Yes ☐ No

f. Availability of appropriate anal cleansing materials ☐ Yes ☐ No

g. Availability of a separate room for menstrual hygiene ☐ Yes ☐ No

26. Control of Substances Hazardous to Health (COSHH)

a. COSHH assessments conducted and records available ☐ Yes ☐ No

b. Exposure to hazards adequately controlled ☐ Yes ☐ No

c. Safety data sheet available and evidence of use ☐ Yes ☐ No

d. Spillage control procedure in place ☐ Yes ☐ No

e. Working floors free of oil spillage or leakage ☐ Yes ☐ No

f. Hazardous substances correctly labeled and stored ☐ Yes ☐ No

g. Hazardous waste correctly disposed of ☐ Yes ☐ No

27. Equipment and Machinery Safety

a. Risk assessment in place ☐ Yes ☐ No

b. Protective guards in place ☐ Yes ☐ No

c. Equipment clean, free from chemicals, dust, and rubbish ☐ Yes ☐ No

d. Emergency stop buttons fitted, functional, and well labeled ☐ Yes ☐ No

e. Safety warning notices in place ☐ Yes ☐ No

f. Trucks, forklifts, and other equipment inspected and properly maintained (Check the inspection logs/reports) ☐ Yes ☐ No

g. First aid services and focal persons available ☐ Yes ☐ No

28. Personal Protective Equipment (PPE)

a. Appropriate type of PPE available ☐ Yes ☐ No

b. PPE in good condition ☐ Yes ☐ No

c. Staff trained on appropriate use of PPE ☐ Yes ☐ No

d. PPE correctly used ☐ Yes ☐ No

Key observations (positives and negatives/ include best practices/ Innovations)

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Recommendations/ follow-up actions

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Name and signature of Inspecting Officer:

.....

Title and contact

.....

Name and signature of approving Officer:

.....

Title and contact

.....

HEALTH INSPECTION CHECKLIST FOR SLAUGHTERHOUSES AND MEAT HANDLING

Reference is made to the Public Health (Meat) rules and other relevant laws.
(Attach pictorial evidence and supporting documents where necessary)

1. General Information

Date of Inspection: .....

Name of Premises: .....

District/ City:..... Sub county/ Division: .....

Parish/ Ward: ..... Village/ Cell: .....

Block Number: ..... Plot Number:..... Street:.....

Proprietor's Name and contact: .....

Manager's name and contact: .....

Staff No: Male ..... Female: .....

Premises description:

.....

.....

2. General Inspection

a.	Certificate for suitability of premises displayed in conspicuous place	☐ Yes	☐ No
b.	Valid license displayed in conspicuous place	☐ Yes	☐ No

3. Physical Status of Premises

a.	Adequate space available	☐ Yes	☐ No
b.	State of repair: Sound / Unsound	☐ Yes	☐ No
c.	Premises are Clean: Clean / Dirty/Filthy	☐ Yes	☐ No
d.	Floors are impervious	☐ Yes	☐ No
e.	Non-slippery floors	☐ Yes	☐ No
f.	Vector and vermin proof	☐ Yes	☐ No
g.	Ventilation is adequate and appropriate	☐ Yes	☐ No
h.	Adequate lighting	☐ Yes	☐ No
i.	Screens are on open windows and doors	☐ Yes	☐ No
j.	No human habitation	☐ Yes	☐ No
k.	No animal and poultry habitation in the slaughter hall	☐ Yes	☐ No
l.	Availability of hang rails for carcasses	☐ Yes	☐ No
m.	Availability of adequate drains in the slaughter hall	☐ Yes	☐ No

4. Meat Receiving and Storage

a. Availability of record for animal supply and source ☐ Yes ☐ No

b. Meat stored off the floor ☐ Yes ☐ No

c. Meat storage spaces clean and organized ☐ Yes ☐ No

d. Meat store is vector and vermin proof ☐ Yes ☐ No

e. Availability of adequate space ☐ Yes ☐ No

f. Appropriate marking of meat ☐ Yes ☐ No

g. Carcasses not stuck together ☐ Yes ☐ No

5. Meat Handling Hygiene Practices

a. Meat handlers are medically examined and certified every 6 months (verify with presence of certificates of medical fitness) ☐ Yes ☐ No

b. Meat handlers are clean in body and clothing (overalls), including fingernails, hair, and general body cleanliness ☐ Yes ☐ No

c. Meat handlers wearing appropriate gear (head covers, uniform/apron, covered shoes) ☐ Yes ☐ No

d. Availability of functional hand washing facilities with soap and water ☐ Yes ☐ No

e. Meat handlers free of obvious signs of infections and illness (flu, cough, open sores, wounds, ringworms, etc.) ☐ Yes ☐ No

f. Availability of cloakroom and lockers ☐ Yes ☐ No

g. Hot water available ☐ Yes ☐ No

h. Availability of adequate and sterile equipment ☐ Yes ☐ No

i. All carcasses inspected ☐ Yes ☐ No

6. Fire Safety Practices

a. Fire detecting equipment available and functional ☐ Yes ☐ No

b. Availability of serviced fire extinguishers ☐ Yes ☐ No

c. Fire safety plan available and implemented ☐ Yes ☐ No

d. Availability of unobstructed emergency escape routes ☐ Yes ☐ No

e. Properly marked fire safety assembly points ☐ Yes ☐ No

f. Regular training of employees on fire safety practices ☐ Yes ☐ No

7. First Aid

a.	Name and contact details of focal person displayed	☐ Yes	☐ No
b.	Emergency telephone number displayed	☐ Yes	☐ No
c.	Emergency reporting procedure in place	☐ Yes	☐ No
d.	Standard first aid kit available	☐ Yes	☐ No
e.	Staff routinely trained on first aid (refer to reports)	☐ Yes	☐ No
f.	Occupational health and safety personnel/committees in place	☐ Yes	☐ No

8. Solid Waste Management

a.	Availability of clean, covered, waterproof, and lined refuse bins	☐ Yes	☐ No
b.	Refuse bins emptied as necessary	☐ Yes	☐ No
c.	Appropriate segregation of solid waste	☐ Yes	☐ No
d.	Area around the refuse bin is clean	☐ Yes	☐ No
e.	Evidence of utilization of a licensed service provider (e.g., receipts or contracts)	☐ Yes	☐ No
f.	Evidence of training of solid waste handlers	☐ Yes	☐ No
g.	Solid waste management plan available and followed	☐ Yes	☐ No

9. Waste Water Management

a.	Availability of onsite wastewater treatment before final disposal	☐ Yes	☐ No
b.	Availability of a functional wastewater drainage system (e.g., grease trap, soak pits)	☐ Yes	☐ No

10. Safe Water Supply

a.	Availability of a reliable water source	☐ Yes	☐ No
b.	Availability of a safe water source	☐ Yes	☐ No
c.	Availability of clean water containers (collection, reservoir, and storage)	☐ Yes	☐ No
d.	Provision of safe drinking water	☐ Yes	☐ No

11. Sanitation Facilities

a.	Availability of adequate toilet facilities separated by sex	☐ Yes	☐ No
b.	Availability of janitorial (cleaning) services	☐ Yes	☐ No
c.	Hand washing facilities available	☐ Yes	☐ No
d.	Availability of adequate shower rooms separated by sex	☐ Yes	☐ No
e.	Availability of a special stance allocation for PWDs	☐ Yes	☐ No
f.	Availability of toilet paper	☐ Yes	☐ No
g.	Availability of a separate room for menstrual hygiene	☐ Yes	☐ No

Key observations (positives and negatives/ include best practices/ Innovations)

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.....

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Recommendations/ follow-up actions

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.....

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Name and signature of Inspecting Officer:

.....

Title and contact

.....

Name and signature of approving Officer:

.....

Title and contact

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ANNEXES

Annex I: NUISANCE NOTICE - MEDICAL FORM 85

RESPECTIVE LOCAL GOVERNMENTS

To..... Date: .....

.....

WHEREAS THE Authority/Local Government Council is satisfied that a nuisance as defined by section 57 ( ) of the Public Health (Amended) Act Cap. 310 of 2024

Exists upon the premises at .....

Owned by..... and

Occupied by ..... for reason:

AND DOES HEREBY REQUIRE YOU WITHIN ..... days (s) from the date of service of this notice, to abate and prevent a recurrence of the said nuisance(s) and for that purpose to: -

And do all such other works as may be necessary to the satisfaction of the Medical Officer of the Authority/Local Government Council. Further take notice that unless the terms of this Notice are complied with, legal proceedings will be taken against you without further notice.

DATED THIS ..... DAY ..... of ..... 20 .....

Environmental Health Officer/ Health Inspector

Sign .....

Medical Officer of Authority/Local Government Council

Sign..... Date .....

Environmental Health Officers/ Health Inspectors may be seen without appointment during office hours

THIS NOTICE IS FINAL NO FURTHER WARNING WILL BE GIVEN

Annex II: NUISANCE NOTICE REGISTER

No.	Date of Service	Served by	Name of Author	Address of Author (Village, Parish)	Particulars of nuisance	Instruction given	Time given to abate nuisance (days)	Expiry date of notice	Status on subsequent inspection	Action taken

Annex III: MONTHLY REPORTING TEMPLATE FOR KPIS

REPUBLIC OF UGANDA

MINISTRY OF HEALTH

Monthly Performance Monitoring for Environmental Health Services in Local Governments (Reporting Tool A)

District/City..... Sub-county/Division .....

Parish/Ward ..... Cell/Village .....

Reporting Date: ..... Quarter being Reported .....

DESCRIPTION AND INSTRUCTIONS

Objective: To report monthly on status of performance of Environmental Health (Health Inspectorate and vector control staff) in regards to their KPIs within their areas of Jurisdiction

Copies: 2 Copies. One remains with EHO/Health Inspector/Assistant and another remains at Health Facility/Division/Sub-county

Timing: Filled in at the end of each week and summarized at end of the month

Responsibilities: EHO/Health Inspector/ Health Assistant/Vector control officer of the Health Facility or Sub County/ Division

PROCEDURE:

1. This Reporting template must be compiled and completed by the supervisee (EHO/Health Inspector/Assistant) of the designated area of Jurisdiction e.g. Health facility, Division etc.
2. It is filled in with reference to KPIs to reflect the supervisee's weekly and monthly performance.
3. The supervisee uses Reports, inspection Checklists etc as means of verification for performance E.g. Number of Schools inspected during week 1)
4. It records the number of activities undertaken during that month and recording is done weekly.
5. This is done for all the three months of a particular quarter and then this is summarized into in the Quarterly performance monitoring for Environmental Health services reporting Tool B

Section A: Environmental Health services Reported Monthly (Aligned to KPIs)

	Filled in by Supervisee (EHO/Health Inspector/Assistant) i.e. the personnel that carried out the work						
	Performance indicators	**Week 1**	**Week 2**	**Week 3**	**Week 4**	**Total**	**Remarks**
1	Number of statutory nuisances abated						
2	Number authors of nuisances (cases) submitted for prosecution						
3	Number of statutory nuisance express penalties issued						
4	Number of community engagements (community sensitization) conducted						
5	Number of food handlers mentored on food hygiene and safety						
6	Number of CME sessions conducted in HCFs on Environmental Health						
7	Number of villages reporting timely using the eCHIS/WASH- MIS						
8	Number of learning institutions supported to improve WASH status						
9	Number of water facilities with functional water and sanitation committees						
10	Number of VHTs/CHEWs supervised and supported for sanitation promotion						
11	Number of performance review meetings conducted with VHTs /CHEWS						

	Filled in by Supervisee (EHO/Health Inspector/Assistant) i.e. the personnel that carried out the work						
	Performance indicators	**Week 1**	**Week 2**	**Week 3**	**Week 4**	**Total**	**Remarks**
12	Number of planned entomological surveillance of malaria vector conducted.						
13	Number of timely entomological surveillance reports submitted						
14	Number of mentorships/ coaching sessions conducted for entomological staff.						
15	Number of support supervisions visits conducted for lower-level staff.						
16	Number of targeted communities that have been sensitized on NTDs and vector control.						
17	Number of public institutions supported for vector and vermin control						
18	Number of entomological studies conducted for mosquito breeding areas						
19	Number of supervisions conducted for NTDs control						
20	Number of mentorships conducted for vector and vermin control						
21	Number of Post treatment surveillance activities conducted for NTDs control						

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Section B: Health and Sanitation Inspections undertaken during Month (Aligned to Health and Sanitation Checklists)

Filled in by Supervisee (EHO/Health Inspector/Assistant) i.e. the personnel that carried out the work

	Premises	Week 1	Week 2	Week 3	Week 4	Total	Remarks
	Filled in by Supervisee						
1	Number of Schools inspected						
2	Number of Markets, bus/taxi parks, places of worship, shopping arcades inspected						
3	Number of Eating houses inspected						
4	Number of Healthcare facilities inspected						
5	Number of Salons, beauty shops/ parlours (including saunas & spas), barbershops, dry cleaning and laundry services inspected						
6	Number of Lodging houses, hotels and recreation centres inspected						
7	Number of Water points inspected						
8	Number of Food processing, manufacturing/ factory facilities inspected						

Annex IV: QUARTERLY REPORTING TEMPLATE FOR KPIS

REPUBLIC OF UGANDA

MINISTRY OF HEALTH

Quarterly Performance Monitoring for Environmental Health Services in Local Governments (Reporting Tool B)

District/City..... Sub-county/Division.....

Parish/Ward..... Cell/Village.....

Reporting Date: ..... Quarter being Reported.....

DESCRIPTION AND INSTRUCTIONS

Objective: To report quarterly on status of performance of Environmental Health (Health Inspectorate and vector control staff) in regards to their KPIs within their areas of Jurisdiction

Copies: 2 Copies. One remains with EHO/Health Inspector/Assistant and another submitted to district/ City/Municipality

Timing: 7th day of a new Quarter

Responsibilities: EHO/Health Inspector/ Health Assistant/Vector control officer of the Health Facility or Sub county/ Division

PROCEDURE:

1. This Reporting template must be compiled and completed by the EHO/Health Inspector/Assistant of the designated area of Jurisdiction and submitted to immediate supervisor
2. The supervisor will verify the report against available Data sources (Reports, inspection Checklists etc) as submitted by the supervisee
3. **Section A:** This section is filled in reference to KPIs with the Quarterly performance jointly filled in between the supervisee and supervisor
4. **Section B:** This section is filled in using Health and Sanitation inspection checklists for the premises *e.g. Data source for No. Of Schools visited are the "Health and Sanitation Inspection checklists for Schools" etc.*
5. Quarterly Performance is obtained by: *No. Achieved (Section A) or No. of Inspections conducted (Section B) divided by Quarterly target X 100%*
6. The filled in Reporting template must then be submitted to Head of Environmental Health Section at the District, City or Municipality by the 7th day of a new Quarter.

Section A: Environmental Health services Reported Quarterly (Aligned to KPIs)

Filled in by Supervisee (EHO/Health Inspector/Assistant) i.e. the personnel that carried out the work				
	Performance indicators	**No. Achieved**	**Quarterly Target**	**Quarterly Performance (%)**
Filled in by Supervisee				
1	Number of statutory nuisances abated			
2	Proportion of authors of nuisances (cases) submitted for prosecution			
3	Number of statutory nuisance express penalties issued			
4	Number of community engagements (community sensitization) conducted			
5	Proportion of food handlers mentored on food hygiene and safety			
6	Number of CME sessions conducted in HCFs on Environmental Health			
7	Proportion of villages reporting timely using the eCHIS/WASH- MIS			
8	Proportion of learning institutions supported to improve WASH status			
9	Proportion of water facilities with functional water and sanitation committees			
10	Proportion of VHTs/CHEWs supervised and supported for sanitation promotion			
11	Number of performance review meetings conducted with VHTs /CHEWS			
12	Proportion of planned entomological surveillance of malaria vector conducted.			
13	Percentage of timely entomological surveillance reports submitted			
14	Number of mentorships/ coaching sessions conducted for entomological staff.			
15	Number of support supervisions visits conducted for lower-level staff.			
16	Proportion of targeted communities that have been sensitized on NTDs and vector control.			
17	Proportion of public institutions supported for vector and vermin control			
18	Number of entomological studies conducted for mosquito breeding areas			
19	Number of supervisions conducted for NTDs control			
20	Number of mentorships conducted for vector and vermin control			
21	Number of Post treatment surveillance activities conducted for NTDs control			

Section B: Health and Sanitation Inspections undertaken during Quarter (Aligned to Health and Sanitation Checklists)

Filled in by Supervisee (EHO/Health Inspector/Assistant) i.e. the personnel that carried out the work					
	Premises	**No. Inspected**	**Quarterly Target**	**Quarterly Performance (%)**	**Remarks**
Jointly filled in by Supervisor and supervisee in reference to Inspection checklists					
1	Schools				
2	Markets, bus/taxi parks, places of worship, shopping arcades				
3	Eating houses				
4	Healthcare facilities				
5	Salons, beauty shops/ parlours (including saunas & spas), barbershops, dry cleaning and laundry services				
6	Lodging houses, hotels and recreation centres				
7	Water points				
8	Food processing, manufacturing/factory facilities				
9	Slaughterhouses and meat handling				

General Comment by Supervisor

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Date of Report: .....

Supervisor's Name: ..... Title: .....

Signature ..... Phone No : .....

Email: .....

---------- (District/City/Municipality use only) ---------- ----------

Date received		
Received by 7th of next Quarter	Yes	No
Checked by (signature)		
Date Entered		
Name of Data Entrant		

Comments by District/City/Municipality Head of Environmental Health Section

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ANNEX V: QUARTERLY REPORTING TEMPLATE FOR KPIS

REPUBLIC OF UGANDA

MINISTRY OF HEALTH

Quarterly Performance Monitoring for Environmental Health Services in Local Governments (District/City/Municipality Report Summary)

Reporting Tool C

District/City/Municipal .....

Reporting Date: .....

Quarter being Reported .....

DESCRIPTION AND INSTRUCTIONS

Objective: To Summarize quarterly activities undertaken by Environmental Health Workers (Health Inspectorate and vector control staff) during the quarter being reported for the District/City/Municipality)

Copies: 2 Copies. One remains with the office (District/city/Municipality) and another submitted to the centre

Timing: 7th day of a new Quarter

Responsibilities: ADHO-EH, ACHO-EH, AMHO-EH(PEHO) of the District/City/Municipality Sub county/ Division

PROCEDURE:

1. This Reporting template must be compiled and completed by the ADHO-EH, ACHO-EH, AMHO-EH(PEHO) of the District/City/Municipality
2. Data is obtained from Reporting Tool B that has been submitted from lower local governments
3. Quarterly reporting Rate is calculated by: No. of Lower local Governments that reported divided by total number of Lower Local governments in the reporting Local Government x 100%
4. The filled in Reporting template must then be submitted to MoH (Environmental Health Department) by the 7th day of a new Quarter.

Section A: Submission Status

Filled in by ADHO-EH, ACHO-EH, AMHO-EH/PEHO of the District/City/Municipality					
		Submitted Report	**Failed to Submit Report**	**Total**	**Quarterly Reporting Rate**
1	Number of Lower Local Governments				
			Reasons for Failure	**Agreed coarse of Action**	
2	Lower local Governments that failed to submit	1. ..... 2. ..... 3. ..... 4. ..... 5. ..... 6. ..... 7. ..... 8. ..... 9. ..... 10.	1. ..... 2. ..... 3. ..... 4. ..... 5. ..... 6. ..... 7. ..... 8. ..... 9. ..... 10.	1. ..... 2. ..... 3. ..... 4. ..... 5. ..... 6. ..... 7. ..... 8. ..... 9. ..... 10.	

Section B: Environmental Health services Reported Quarterly (Aligned to KPIs)

Filled in by ADHO-EH, ACHO-EH, AMHO-EH/PEHO of the District/City/Municipality				
	Performance indicators	**No. Achieved**	**Quarterly Target**	**Quarterly Performance (%)**
1	Total number of statutory nuisances abated			
2	Proportion of nuisance defaulters (cases) submitted for prosecution			
3	Total number of statutory nuisance express penalties issued			
4	Total number of community engagements (community sensitization) conducted			
5	Proportion of food handlers mentored on food hygiene and safety			
6	Total number of CME sessions conducted in HCFs on Environmental Health			
7	Proportion of villages reporting timely using the eCHIS/WASH- MIS			
8	Proportion of learning institutions supported to improve WASH status			
9	Proportion of water facilities with functional water and sanitation committees			
10	Proportion of VHTs/CHEWs supervised and supported for sanitation promotion			
11	Total number of performance review meetings conducted with VHTs /CHEWS			
12	Proportion of planned entomological surveillance of malaria vector conducted.			

Filled in by ADHO-EH, ACHO-EH, AMHO-EH/PEHO of the District/City/Municipality				
	Performance indicators	**No. Achieved**	**Quarterly Target**	**Quarterly Performance (%)**
13	Percentage of timely entomological surveillance reports submitted			
14	Total number of mentorships/ coaching sessions conducted for entomological staff.			
15	Total number of support supervisions visits conducted for lower-level staff.			
16	Proportion of targeted communities that have been sensitized on NTDs and vector control.			
17	Proportion of public institutions supported for vector and vermin control			
18	Total number of entomological studies conducted for mosquito breeding areas			
19	Total number of supervisions conducted for NTDs control			
20	Total number of mentorships conducted for vector and vermin control			
21	Total number of Post treatment surveillance activities conducted for NTDs control			

Section B: Health and Sanitation Inspections undertaken during Quarter (Aligned to Health and Sanitation Checklists)

	Premises	No. Inspected	Quarterly Target	Quarterly Performance (%)	Remarks
	Filled in by ADHO-EH, ACHO-EH, AMHO-EH/PEHO of the District/City/Municipality				
1	Total number of Schools				
2	Total number of Markets, bus/taxi parks, places of worship, shopping arcades				
3	Total number of Eating houses				
4	Total number of Healthcare facilities				
5	Total number of Salons, beauty shops/ parlours (including saunas & spas), barbershops, dry cleaning and laundry services				
6	Total number of Lodging houses, hotels and recreation centres				
7	Total number of Water points				
8	Total number of Food processing, manufacturing/factory facilities				
9	Total number of Slaughterhouses and meat handling				

General Comment by DHO/CHO/MHO of the District, City or Municipality

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Date of Report: .....

Name: ..... Title: ..... Signature .....

Phone No : ..... Email: .....

Annex VI: ANNUAL REPORTING TEMPLATE FOR KPIS

REPUBLIC OF UGANDA

MINISTRY OF HEALTH

Annual Performance Monitoring for Environmental Health Services in Local Governments (Reporting Tool D)

District/City/Municipality.....

Financial Year of Reporting.....

Officer Reporting .....

Title.....

Reporting Date: .....

DESCRIPTION AND INSTRUCTIONS

Objective: To annually report on status of performance of key Environmental Health including vector Control service indicators in Districts, Cities and Municipalities

Timing: 15th day of New Financial Year

Responsibilities: ADHO-EH[1] /ACHO-EH[2] /PHEO-EH[3] of the District/City or Municipal council

PROCEDURE:

This Reporting template must be compiled and completed by the ADHO-EHO /ACHO-EHO /PHEO-EHO jointly with the Vector control officer of the District/City or Municipal council

Reporting is based on KPIs that must be reported on annually to reflect performance of EH interventions carried out during the Financial Year

The supervisor (DHO/CHO/MHO) will verify the report using available sources such as: Activity Reports etc submitted by supervisee (ADHO-EHO /ACHO-EHO /PHEO-EHO and Vector Control Officer)

Annual Performance will be calculated by: No. of achieved interventions divided by Annual set target X 100% using the KPIs as reference document

The filled in Reporting template will then be entered in Information management system and copy filled for further reference, service monitoring and supervision

1 ADHO-EH-Assistant - Assistant District Health Officer Environmental Health
2 ACHO-EH-Assistant - Assistant City Health Officer Environmental Health
3 PHEO-EH-Principal - Principal Health Environmental Officer

Section A: Environmental Health Reported Annually (Aligned to KPIs)

	Filled in by Environmental Health Section Head for District/City or Municipality and Vector Control Officer			
	Performance indicators	No. Achieved	Annual Target	Annual Performance (%)
	Percentage of EH staff with performance management plans			
	Number of EH work plans and budgets developed			
	Percentage of EH staff in-post appraised			
	Percentage of vector control staff in-post appraised.			
	Actual amount of funds allocated to EH services from 30% PHC-NWRG in FY			
	Sum of additional resources mobilized for EH activities through concepts, proposal and Innovations			
	Sum of additional resources mobilized for vector control activities through concepts, proposal, innovations			
	Proportion of EH/vector control staff forwarded to Chief Accounting Officer for rewards and sanctions			
	Proportion of partners in the LG aligning their plans and budgets to the service priorities of EH/Vector control			
	Number of Quarterly WASH-MIS reports submitted timely to MoH			
	Percentage of outbreak investigations and response activities supported			
	Number of EH related innovations and best practices documented			
	Number of National cleaning days conducted			
	Number of EH/vector control related ordinances formulated			
	Number of planned model clean communities created.			
	Proportion of planned health inspections for compliance with Public Health standards			
	Number of Sanitation safety plans developed			
	Proportion of communities sensitized on indoor air pollution and use of clean energy sources			

	Filled in by Environmental Health Section Head for District/City or Municipality and Vector Control Officer			
	Performance indicators	No. Achieved	Annual Target	Annual Performance (%)
	Proportion of food handlers certified for handling food			
	Percentage of vector control staff with performance management plans.			
	Number of vector control work plans and budgets developed.			
	Percentage of planned entomological surveillance activities conducted			
	Proportion of planned mass drug administration (MDA) activities conducted.			
	Number of vector-borne diseases and control initiatives related research activities conducted			

General Comment by District/City/Municipal Head of Health Department (DHO, CHO or MHO)

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Date of Report: .....

Supervisor's Name: ..... Title: .....

Signature ..... Phone No : .....

Email: .....

Annex VII: LIST OF PERSONS WHO CONTRIBUTED TO THE DEVELOPMENT OF THESE KPIS

No	Name	Title	Organization
1.	Dr. Diana Atwine	Permanent Secretary	Ministry of Health
2.	Dr. Henry G. Mwebesa	Director, General Health Services	Ministry of Health
3.	Dr. Herbert Nabaasa	Commissioner, Health Service-Environmental Health	Ministry of Health
4.	Dr. Sarah Byakika	Commissioner, Health Service- Planning	Ministry of Health
5.	Dr. Kabanda Richard	Commissioner, Health Service-HPE	Ministry of Health
6.	Mr. Kabangi Moses	Assistant Commissioner- Inspection, Sanitation and Hygiene	Ministry of Health
7.	Mr. Paul Mbaka	Assistant Commissioner- Division of Health Information	Ministry of Health
8.	Ms. Julian Kyomuhangi	Retired Commissioner, Environmental Health	Ministry of Health
9.	Ms. Mirembe Rachel Faith	Technical Coordinator, Sanitation and Hygiene Fund	Ministry of Health
10	Mr. Amodan Bob Omoda	Environmental Health Officer	Ministry of Health
11	Mr. Kayanja Stephen	Senior Environmental Health Officer	Ministry of Health
12	Mr. Okia Bosco	Principal Health Inspector	Ministry of Health
13	Mr. Lukwago Martin	Monitoring and Evaluation Officer	Ministry of Health
14	Mr. Mbaha Emmery	Technical Support Officer	Ministry of Health
15	Ms. Veronica Owagage	Environmental Health Officer	Ministry of Health
16.	Mr. Batesaki Rogers	Senior Environmental Health Officer	Ministry of Health
17	Mr. Wandera Dickson	Environmental Health Officer	Ministry of Health
18	Ms. Marion Natukunda	Senior Communications Officer	Ministry of Health
19	Mr. Kalyebi Peter	Retired Principal Environmental Health Officer	Ministry of Health
20	Dr. Kiwanuka Ivan Mutebi	Senior Medical Officer	Ministry of Health
21	Mr. Namanya Bambeiha Didacus	Health Geographer	Ministry of Health
22	Mr. Uragiwenimana Vallence	Principal Environmental Health Officer	Ministry of Health
23	Dr. Ivan Ankunda	Senior Medical Officer	Ministry of Health
24	Ms. Nalwanga Eva	Environmental Health Officer	Ministry of Health
25	Ms. Kyobutungi Sandra	Environmental Health Officer	Ministry of Health

No	Name	Title	Organization
26	Caroline Oundo	Admin Assistant	Ministry of Health
27	Ms. Naigaga Martha	Senior Environmental Health Officer	Ministry of Water and Environment
28	Mr. Musa Birungi	Senior Education Officer/BE	Ministry of Education and Sports
29	Mr. John Genda Walala	Commissioner	Ministry of Local Government
30	Mr. Wandera Stephen	WASH Officer	UNICEF
31	Ms. Jane Sembuche	Country Director	Water Aid
32	Ms. Brenda Achiro	Country Director	Water for People
33	Mr. David Katwere Ssemwanga	Program Manager	Water for People
34	Ms. Nalubiri Norah	Principal Tutor	Uganda Institute of Allied Health and Management Sciences-Mulago
35	Mr. Sekaboga David	Assistant District Health	Wakiso DLG
36	Mr. Richard Mutabazi	Ag. Supervisor Sanitation	Kampala Capital
37	Mr. Eyura Martins	Assistant District Health Officer-Environmental Health	Soroti DLG
38	Mr. Kibwota Godfrey Achilla	Assistant District Health Officer-Environmental Health	Kabong DLG
39	Mr. Omitta Patrick Owino	Assistant District Health	Tororo DLG
40	Ms. Ashaba Patience	Senior Health Inspector	Mukono Municipality
41	Mr. Omia Santos	Principal Health Inspector	Mbarara DLG
42	Mr. Tugume Erastus	Assistant District Health Officer-Environmental Health	Mbarara DLG
43	Ms. Nakitto Prossy	PHO-EH	Jinja City
44	Ms. Kareo Rhina	Principal Health Inspector	Kitgum Municipality
45	Mr. Apangu Godfrey	Environmental Health Officer	Arua City
46	Ms. Kengonzi Gertrude	Senior Health Inspector	Kamwenge DLG
47	Mr. Mbuya Daniel	Senior Environmental Health	Buikwe DLG
48	Mr. Kimuli Musa	Senior Environmental Health	Gomba DLG

REPUBLIC OF UGANDA

MINISTRY OF HEALTH

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